Impediments to Administer Behavior Management Techniques Over Children and Adults Diagnosed with Autism Spectrum Disorder: Views of Academic Psychologists

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Abstract

Autism Spectrum Disorder (ASD) presents unique challenges in behavior management, requiring tailored approaches. This paper explores the impediments academic psychologists face in administering Behavior Management Techniques (BMTs) for children and adults diagnosed with ASD. Qualitative research was employed to discover the views of academic psychologists. The investigator selected the participants through purposive sampling technique and performed semi-structured interviews to accumulate the views. Academic psychologists within the Punjab province, Pakistan, were taken as the population of the study. The group of five academic psychologists was selected purposefully to discover the phenomenon. Academic psychologists were recruited from the Govt. Special Education Centers, along with the experience of diverse clinical settings, hospitals practices and clinical sessions with children and adults diagnosed with ASD. Twelve open ended questions were designed to inquire from the respondents and to facilitate a deeper dialogue about the phenomenon of the study. Reflexive thematic analysis was employed over the views of academic psychologists. The analysis process was involved coding the data to perceive the patterns of the data. Patterns were prepared into broader themes and then sub-themes to increase the complete understanding of the statistics. Key impediments were identified, including communication challenges, sensory sensitivities, individualized needs, and lack of parental involvement. Understanding these impediments is crucial for developing effective interventions and improving outcomes for children and adults diagnosed with ASD.

Keywords: Behavior Management Techniques, Autism Spectrum Disorder, Psychologists.

Introduction

Autism Spectrum Disorder (ASD) is a complex neurodevelopmental disorder characterized by challenges in social interaction, communication, restrictive and repetitive behaviors, known as self-stimulating behaviors (American Psychiatric Association, 2013). Managing these behaviors is a critical aspect of supporting children and adults diagnosed with ASD, requiring a multidisciplinary approach. Academic psychologists play a crucial role in assessing, diagnosing, and implementing BMTs for children and adults diagnosed with ASD. However, they encounter various impediments in this process, impacting the effectiveness of interventions.

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BMTs for children and adults diagnosed with ASD aim to promote positive behaviors, reduce challenging behaviors, and enhance their quality of life. These techniques include visual supports, structured routines, and positive reinforcement. Visual supports, such as schedules and social stories, help children and adults diagnosed with ASD understand expectations and transitions. Structured routines provide predictability, which can reduce anxiety and support learning. Positive reinforcement, such as praise or rewards, helps reinforce desired behaviors. Additionally, techniques like environmental modifications and sensory accommodations can create a supportive environment that minimizes triggers for challenging behaviors. Overall, BMTs for children and adults diagnosed with ASD are most effective when individualized to meet the unique challenges and preferences of each child.

Literature Review
Applied Behavior Analysis
Applied Various techniques of Behavior Analysis (ABA) are widely researched and commonly used approaches for managing behavior in children and adults diagnosed with ASD. Studies have examined various ABA techniques, such as positive behavioral support, natural environment teaching, naturalistic teaching, pivotal response training, errorless teaching, discrete trial training, extinction, and functional communication training, showing positive outcomes in improving behaviors and skills. Presently, in accordance with the Diagnostic and Statistical Manual of Mental Disorders-V, ASD falls under the category of neurodevelopmental disorders (American Psychiatric Association, 2013). Individuals on this spectrum have deficits in rapport development, social communication, social interaction, lacks in verbal languages and non-verbal language skills, repetitive behaviors and stereotypical behaviors with both limited and fixed interests i.e. motor stereotypical behaviors and echolalia and socio-emotional reciprocity. Moreover, the DSM-V classifies such deficiencies according to different levels based on intensity and duration such as mild to moderate, moderate to severe, or severe to profound (Baer et al., 1968). Research shows a number of children and adults diagnosed with ASD in recent years have caused global concern. There was an estimated one individual per one hundred twenty five cases in the United States, and an estimated one case per fifty four children (Centers for Disease Control and Prevention, 2020; 2004). America's children, that's a 131 percent increase. Global statistics estimate that 1 in 64 children in the UK, one in thirty eight children in South Korea and more than ten million children in the Indian population was diagnosed with ASD, and 350,000 children with ASD in Pakistan (Furrukh & Anjum, 2020; Kientz & Abowd, 2008; Dautenhahn, 2000; Higgins & Boone, 1996).

In recent decades, ABA has become an evidence-based well supported treatments for ASD and related disorders (Khowaja et al., 2020; Kocsis, 2013). Baer et al. (1968) and Kohli and Kohli (2016) published an article proposing seven dimensions within ABA such as applied domain, conceptual domain, analytical domain, behavioral domain, effective domain, generalized domain, and technological domain. The applied dimension involves behavioral change that is important to the subject and aims at socially relevant behavior (Pierce & Cheney, 2017; Cooper et al., 2007; Baer et al., 1987; 1968). Conceptually, the systematic dimension of ABA is the use of well-defined concepts linked to procedures according to behavioral principles. In the analytical dimension, one receives a guarantee that the intervention leads to behavioral changes because it demonstrates the relationship between environment and behavior (Pierce & Cheney, 2017; Baer et., 1987; 1968). For a behavioral dimension, demonstrates that the focus of that dimension is observable in behavioral events can be measured directly and indirectly. The effective dimension, on the other

hand, indicates that the intervention caused a change in the disruptive behavior in a socially acceptable way, because if there was no change, this means that the intervention was not sufficient (Yeaton & Sechrest, 1992). Generalization on other hand is the dimension requiring newly acquired behavior (s) to happen in different contexts for them to have long lasting effects, and for the behavior to be adaptive to life. Finally, the technological dimension illustrates the process objectively making it illustrative for service providers including therapists, teachers and parents to ensure its repetition. These dimensions are important in defining and accepting ABA intervention and treatment procedures (Landa, 2007).

Additionally to the ABA strategies and related procedures, (Muñoz et al., 2012; Higgins & Boone, 1996) pointed out another way to advance the intervention procedure for individuals diagnosed with ASD is the use of assistive devices and technologies. In accordance with Morris (2005), since the 1970s, researchers tried to incorporate computers into the treatment of children and adults diagnosed with ASD. Assistive technology positively impacts the learning development as compare to other learning pedagogies. Research suggests a number of potential benefits of using technology in ASD treatment: controllable, structured, adaptive and stimulating (Murray, 2011; Powell & Jordan, 2011; Panyan, 1984). According to (Putnam & Chong, 2008), people with ASD generally are interested to engage with technology, which includes images, sound and video. Recent researches suggested that technology contributes to the intervention process by improving academic skills, learning, communication, interaction, languages and other subsets of behavior through a positive and supportive environment (Tuedor et al., 2019; Trevisan et al., 2019; Shamsuddin et al., 2015; Powell & Jordan, 2011; Tseng & Do, 2011; Putnam & Chong, 2008;). However, in case if the developed technology is not supported, it can create interactive obstacles for the individuals diagnosed with ASD to use it independently, or in extreme cases, can therefore cause the persons' unnecessary discomfort and stress (Urbano et al., 2017; Virués-Ortega, 2010). Using technologies to support adaptive behaviors of individuals with ASD, therefore it is important to know how information should be demonstrated to them, considering their cognitive profile, behavioral disorders, strengths, preferences, and challenges provide an environment suitable for their learning style (Xu et al., 2018; Whalen et al., 2009).

Visual Supports
Research has highlighted the effectiveness of visual supports, such as visual schedules, photographs, drawings, visual timers, and picture communication systems, in enhancing communication, reducing anxiety, and improving behavior regulation in children and adults diagnosed with ASD (Johnston, 2003). Visual aids are widely used and generally considered an effective intervention tool for people on the spectrum of autism. Interventions to support people with ASD usually start early, immediately after diagnosis, and often involve the use of various visual tools (Rutherford et al., 2020). These objects are based on words, images and tangible objects to represent both concrete and abstract real world concepts (Meadan et al., 2011). Use of these visual objects was shown to reduce signs and symptoms associated with cognitive, communication and social disabilities, especially in individuals with ASD. Therefore, Hayes et al. (2010) explained that such visual supports are often used to encourage communication and learning in children.

Structured Teaching
Structured teaching approaches, often associated with the TEACCH (Treatment and Education of Autistic and related Communications Handicapped Children) program, emphasize the use of

structured environments, visual supports, and predictable routines to promote independence and reduce challenging behaviors. The addition of structural visual supports to classroom instruction and activities to enhance independence and motivation towards learning skills, and the clear organization of classroom teaching pedagogies and materials to lower anxiety and promote appropriate behavior, structured teaching creates predictable and meaningful routines.

Positive Behavior Support

Positive Behavior Support (PBS) focuses on understanding the function of challenging behaviors and implementing proactive techniques to prevent them. Research has shown PBS to be effective in reducing problem behaviors and improving adaptive skills in children and adults diagnosed with ASD (Singh, 2019; Schall, 2010; Neitzel, 2010).

Parent Training

Studies have emphasized the importance of involving parents in behavior management interventions, providing them with training and support to implement techniques effectively at home.

Technology-based Interventions

There is a growing interest in the use of technology, such as mobile apps and virtual reality, to deliver behavior management interventions for children and adults diagnosed with ASD, showing promising results in improving engagement and outcomes. Finally, numerous meta-analyses, and systematic reviews testify to the effectiveness of interventions based on ABA. Indeed, investigators have illustrated that the ABA can result in significant improvements in the quality of life of children and adults diagnosed with ASD (McEachin et al., 1993; Lovaas, 1993; Lovaas, 1987), and can be occurred in a variety of contexts such as school, home, and clinic. Even though the various procedures based upon the principles of ABA can be implemented across a number of different contexts, there is often query about the impediments faced by academic psychologists within the school contexts. The purpose of this research was to provide a discussion of school - based impediments faced by academic psychologists within the context of the progressive approach to ABA.

The investigator further set the following objectives to meet the purpose of the study:

1. Assessing the perspectives of the academic psychologists about the effectiveness of BMTs for children and adults diagnosed with ASD.
2. Identifying areas or gaps for improvement in administering BMTs over the children and adults diagnosed with ASD.
3. Providing insights for policy and practice to enhance support and resources for behavior management for children and adults diagnosed with ASD.
4. Gathering recommendations from the academic psychologists to improve the administration of BMTs for children and adults diagnosed with ASD.

Theoretical Assumptions

Braun and Clarke (2020; 2014; 2012) have outlined various theoretical presumptions that need to be taken into consideration while performing RTA, or any other type of theme analysis. Constructionist epistemologies versus essentialist, critical approach to data versus experiential, deductive analyses versus inductive analyses, and latent coding of data versus semantic are the sequences of continua that these presumptions are conceptualized as. Not only should the

researcher indicate where their analysis falls on each of these continuums, but also explain why the analysis falls where it does and why this conceptualization makes sense in light of the research question(s).

As Braun and Clarke (2020; 2013; 2012) argued that codes and themes don't emerge from the data, but are present in the data waiting to be discovered. Here, the investigator played an active role to explain codes and themes and identifying those relevant to the research question (s) of the study. Data analyzed using latent coding often overlaps with aspects of thematic discourse analysis (Braun & Clarke, 2006), as the language used by the respondent can be used to interpret deeper levels of meaning and importance. The investigator utilized both semantic and latent coding. The investigator made no attempt to prioritize semantic coding over latent coding or latent coding over semantic coding. Instead, semantic codes were generated when relevant semantic information was interpreted (Patton, 1990), and latent codes were created when relevant latent information was interpreted. In itself, any information could be doubled coded according to the semantic meaning conveyed by the respondent and the hidden meaning interpreted by the investigator. This reflected the theoretical assumption underlying the analysis, as a constructive and interpretive epistemology and ontology was approached in relation to the participant's constructed and mediated meaning as well as the investigators' interpretations.

Methods and Materials

Research Design

Qualitative research was employed to discover the views of academic psychologists about the phenomenon. Participants were recruited through purposive sampling technique. Semi-structured interviews were performed to accumulate the views. The interviews were audio recorded and transcribed for further analysis and later on digging the conclusions out of the study. Qualitative method is used to understand people's beliefs, experiences, attitudes, behavior, and interactions. It generates non-numerical data. The integration of qualitative research into intervention studies is a research strategy that is gaining increased attention across disciplines (Gibson et al., 2004).

Population and Selection of the Sample

Academic psychologists within the Punjab province, Pakistan, were taken as the population of the study. The group of five academic psychologists was purposefully selected as sample of the study to discover the phenomenon. In qualitative research, purposeful sampling is a commonly employed strategy that facilitates the identification and selection of instances with abundant information, hence optimizing the utilization of few resources (Patton, 2002). This entails locating and picking people—or groups of people—who have particular expertise or experience with a topic of interest (Cresswell & Plano Clark, 2011).

Recruitment Criteria

Academic psychologists were recruited from the Govt. Special Education Centers, along with the experience of diverse clinical settings, hospital practices and clinical sessions with children and adults diagnosed with ASD.

Research Tool

A semi-structured interview with twelve open ended questions was designed to inquire from the respondents and to facilitate a deeper dialogue about the phenomenon of the study.

Quality Criteria

The investigator ensured quality criteria. It was performed with the aid of credibility, transferability, dependability, and confirmability.

- *Credibility:* The investigator built credibility with the aid of triangulation and external audits to ensure correctness and accurateness of the findings of the study.
- *Transferability:* The investigator demonstrated transferability with the aid of utilizing thick description. It was established by providing readers with evidence that the study's findings could be applicable to other contexts, settings, situations, times, and populations.
- *Dependability:* The investigator ensured dependability through an inquiry audit by an outside investigator.
- *Confirmability:* Finally, the investigator performed the procedures for checking and rechecking the data throughout the study to ensure the degree to which obtained results could be confirmed.

Procedures

The investigator completed the research in following six phases to explore the impediments to administer BMTs over children and adults diagnosed with Autism Spectrum Disorder:

- *Phase-I:* In the first phase, investigator set the research boundaries and met the ethical protocols.
- *Phase-II:* In the second phase, researcher designed a questionnaire to conduct the semi-structured interview for data collection from the respondents of public special education schools.
- *Phase-III:* In the third phase, investigator selected the interviewees purposefully and set the date and time to conduct individual interviews. The respondents were selected keeping in view their experience in dealing the individuals with ASD.
- *Phase-IV:* In the fourth phase, the views of academic psychologists were recorded through semi-structured interviews in written form and recorded audios to be used later on.
- *Phase-V:* In the fifth phase, researcher met the quality criteria with the aid of credibility, transferability, dependability, and confirmability measures to ensure and adopt the valid research procedure.
- *Phase-VI:* In the sixth phase, the collected data was analyzed and reached the conclusions of the study.

Data Analysis

Reflexive thematic analysis was employed over the views of academic psychologists. The analysis process was involved coding the data to perceive the patterns of the data. Patterns were then prepared into broader themes and sub-themes to increase a complete understanding of the statistics. Reflexive thematic analysis is a technique to qualitative data analysis that is both conceptually flexible and easily accessible, and makes it easier to find and analyze patterns or themes within a particular data set (Braun & Clarke, 2012).

Results

A six-phase method developed by Braun and Clarke (2020; 2014; 2013; 2012) helped with the analysis. It assists the investigator in recognizing and addressing the crucial elements of the analysis. The investigator should be aware that although the six stages are arranged in a logical

sequential order, the analysis is not a linear process progressing through the phases. Instead, the study is iterative and recursive (Braun & Clarke, 2020), and necessitating that the investigator went back and forth between the stages as needed. The process of conducting the thematic analysis takes time and changes as the investigator moves through the various stages. This may result in rigorous analyses of the data, which may need going back and revising prior stages. Because of this, it's critical to understand the six-phase approach as a series of recommendations rather than strict requirements that should be tailored to the specific data and research question (s) at hand (Braun & Clarke, 2020; 2013). In this regard, the six-phase procedure recognized by Braun and Clarke (2012) as a method for performing thematic analysis was employed to inquire the phenomenon of the current study. The classification of the data in various phases provides an effective view to understand the study procedure.

Familiarization with the Acquired Data (stage 1)
At this phase of preliminary notes taking, the investigator familiarized with the material by actively listening to each recorded interview once before transcribing this recording. The first reproduction of videos of each recorded interview was required active listening, as the investigator could not take notes at this stage. The investigator performed active listening process to understand the main areas covered in each interview before transcription. It also offered an opportunity, without being burdened with tasks such as note taking, and to remember gestures and mannerisms that were documented in the interview notes. Then, the investigator transcribed each interview manually and immediately after active listening. After all the interviews were transcribed, investigator read each transcript several times. At this point, the investigator noted casual observations about preliminary trends and patterns in the data and potentially interesting points in the transcripts. The investigator also documented thoughts and feelings about both the data and the analysis process. Initial notes were made during the early iterations of familiarization with the acquired data of the study.

"All the participants emphasized that children have exceptional strengths. It is very important to focus on those strengths, let your child know how proud you are of their efforts, and incorporate those strengths into play and learning. If you are truly invested in implementing effective strategies and doing your best to meet the needs of your child/student, you are doing the right thing, even if you are not getting the results you want".

"They focused attention on the children who do not seem to understand language may not respond to some of the strategies in this article, but there are some suggestions for children with severe language problems. If you feel that the situation with your child is incomprehensible, seek help from a medical, behavioral or mental health professional".

"Although deviant behavior is a major barrier to successful treatment and education for individuals with autism, Applied Behavioral Assessment (ABA) technique offers scientifically validated methods to overcome it".

"Equally important is care planning and long-term evaluation of treatment effects. Maintenance refers to treatment effects or improvements that remain stable after the intervention is removed".

Generating Preliminary Codes (stage 2)
The investigator generated preliminary codes as it can be seen in the figure 1 below.

Figure 1: Extract of preliminary coding

Professionals and caregivers may not fully understand the
underlying needs and challenges of children and adults
diagnosed with ASD, leading to inappropriate or ineffective   [Co1]   Limited understanding and
interventions. The general population has a limited knowledge of   interest
autism. [C1].

The certified ABA providers is insufficient to meet the needs of
children and adults diagnosed with ASD. Professionals and   [Co2]   Lack of training
caregivers may lack training in evidence-based BMTs for autism,
reducing their ability to implement effective techniques. [C2].

Limited access to resources such as time, funding, and   [Co3]   Resource constraints
specialized services can hinder the implementation of
comprehensive behavior management plans. [C3].

Children and adults diagnosed with ASD often have complex
needs that require individualized and multifaceted interventions, [Co4]   Complexity of needs
which can be challenging to implement consistently. [C4].

Difficulties in communication, common in autism, can make it
challenging to convey instructions or understand the child's
needs and responses accurately. [C5].   [Co5]   Communication
                                                                           impediments
The physical environment, including sensory stimuli and social
interactions, can impact the effectiveness of BMTs if not
appropriately managed. [C6].   [Co6]   Environmental factors

Some children and adults diagnosed with ASD may exhibit
resistance to changes in routine or interventions, making it
challenging to introduce and maintain new BMTs. [C7].   [Co7]   Resistance to change

Stigma and misconceptions about autism can lead to negative
attitudes and approaches, affecting the willingness and ability to
implement effective interventions. [C8].   [Co8]   Stigma and misconceptions

The bare minimum is 10 hours of ABA therapy per week, but
most children with autism will need more, ranging from 20 to 40   [Co9]   Limitations of ABA
hours per week. And ABA therapy usually lasts for months, if   (intensity and duration)
not years. [C9].
                                                                   [Co10] Harmful and abusive
The therapy is based on a behaviorist approach that treats
children and adults diagnosed with ASD as if they are machines
that can be programmed to behave in a certain way. [C10].

Generating Themes (stage 3)
The investigator assembled codes into preliminary themes at this point in the analysis. A thematic
map of the preliminary themes can be seen in Figure 2. The theme "communication challenges"
was clearly definable, with constituent coded data presenting two concurrent narratives. The two
distinct sub-themes emphasized on the "uneven language development" and the "repetitive or rigid
language" associated with the ASD segment. It was also evident of the "impediments to administer
behavior management techniques for children and adults diagnosed with ASD" was the topic. Once
more, investigator read the academic psychologists views. The four views, nevertheless, appeared
to work even better together in this instance. The "sensory sensitivities" sub-themes emphasized
two separately illuminating aspects of school practices. The two sub-themes in this case were

somewhat more closely related: the first sub-theme identified natural potential barrier as "hypersensitivity/ hyposensitivity", while the second sub-theme explored potential inhibitor as "difficulties interpreting and organizing". Researcher viewed at this early point in the study that the topic "impediments to administer behavior management techniques for children and adults diagnosed with ASD" may possibly be defined by this sub-theme structure. Lastly, coded data items addressing barriers to wellbeing promotion were compiled under the subject "role of parental involvement in the application of ABA." These elements were divided into four distinct sub-themes, each of which represented a deficiency in knowledge about supporting documents relating to the parental knowledge, parental training, time, and value for promoting wellbeing of the segment with ASD. The theme "individualized needs" was clearly definable, with constituent coded data presenting two concurrent narratives. The two distinct sub-themes emphasized on the "provision of behavioral support" and the "safety, acceptance, sense of competence". It was also evident of the "impediments to administer behavior management techniques for children and adults diagnosed with ASD" was the topic. Although organizing all of this material under a single topic was helpful, it was already clear that this specific theme was complicated and cumbersome and would probably need to be revised further.

**Figure 2: Thematic Relationship Map**

⬭	Theme
▢	Sub-Theme
──────	Link to Sub-Theme
- - - - - -	Relationship between the Theme
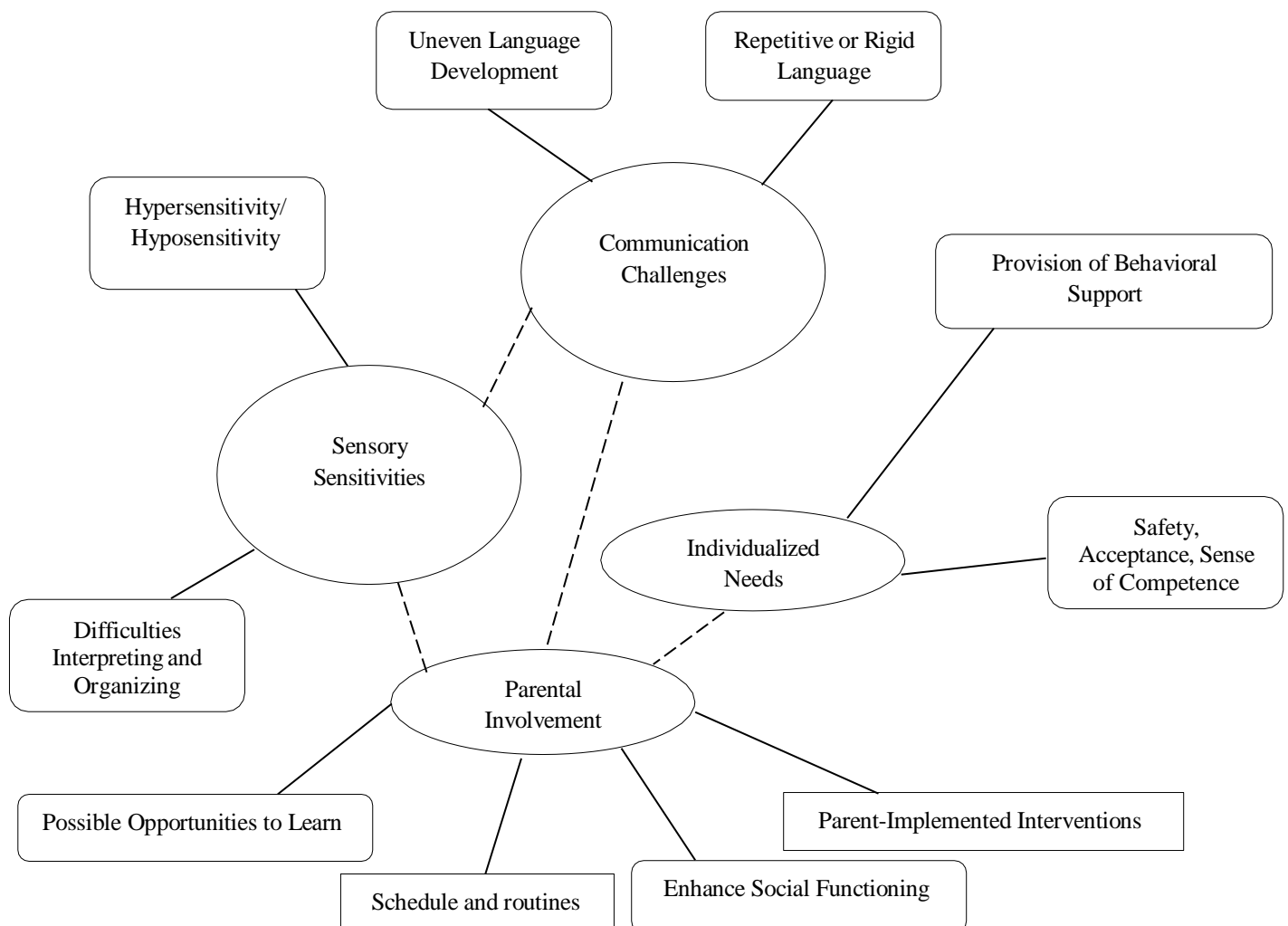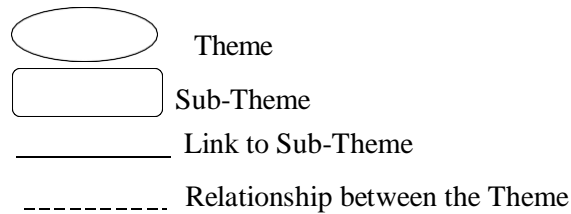
Reviewing Potential Themes (stage 4)

There were two layers of review involved in the analysis carried out at this stage. The links between the data items and codes that underpin each theme and sub-theme were reviewed at level one. It can be presumed that the participant theme or sub-theme presents a logical case and might add to the overall story of the data if the items or codes make sense together. Level two involves an assessment of the prospective themes in light of the dataset. Themes were evaluated according to how well they answer the research question(s) or offer the best appropriate interpretation of the data. Braun and Clarke (2020) suggested that Patton's (1990) "dual criteria for judging categories", that is, internal homogeneity and outward homogeneity, may be helpful to consider when addressing these important problems.

The purpose of Patton's two criteria was to observe the internal homogeneity of subjects in a first-level review, and the external heterogeneity between subjects in a second-level review. Essentially, these two levels of control prove that the items and codes fit the subject (Braun & Clarke, 2006), and that the subject fits the interpretation of the data set. This two-level review often results in a number of subthemes or themes that may require reconstruction through the addition or deletion of codes, or even the addition or deletion of themes/subthemes. The theme framework resulting from the review of participant themes is shown in figure 3.

Exploration of the future subtheme "provision of behavioral support" in relation to the theme "individualized needs" led to a new interpretation of the items coded during the first-level review. Participants reported a number of factors that they believed prevented ABA treatment. The Level 2 review addressed my concerns about "factors impeding the application of ABA". As for Braun and Clarke's key questions, identifying the boundaries of this topic was quite difficult. It was also too dense and a bit uneven. At this point, the investigator decided that this topic was not an adequate representation of the data. Earlier stages of the analysis were repeated and new interpretations were developed from the data. This theme was later re-titled "participating in therapy sessions" divided into three separate themes. Although the sub-topics of topic were somewhat informative in the development of new topics, the way in which the composition information was understood had been thoroughly reworked.

Figure 3: Reviewed Thematic Relationship Map
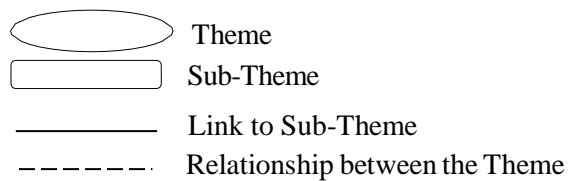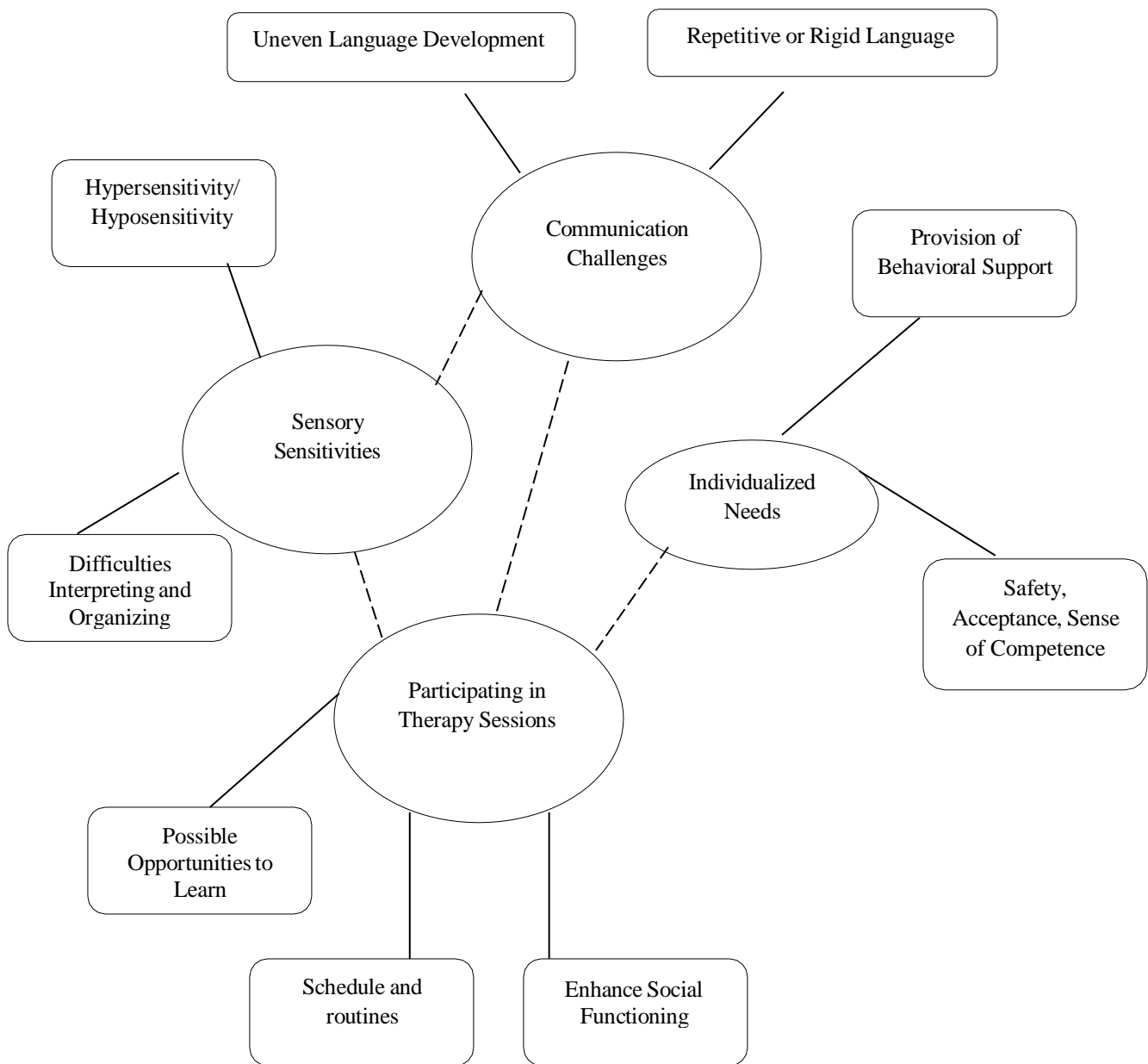
Defining and Naming Themes (stage 5)
At this stage, the investigator defined and named the themes. It led the investigator to produce the report of the study.

Communication Challenges
 While some children and adults diagnosed with ASD may not speak at all, others may not find it difficult to communicate. Every child with ASD struggles to some extent with communication e.g., establishing friends or keeping connections at school or home. One of the primary impediments academic psychologists face in behavior management for children and adults diagnosed with ASD is communication challenges. Many children and adults diagnosed with ASD struggle with verbal communication and non-verbal communication, making it difficult for academic psychologists to understand their needs and preferences. This barrier can hinder the development of a therapeutic relationship, which is essential for effective behavior management. Academic psychologists often employ communication aids such as visual schedules, social stories, and augmentative and alternative communication devices to overcome these challenges. However, implementing these aids requires specialized training and resources, which may not always be available.

Sensory Sensitivities
Another significant barrier is sensory sensitivities, which are common among children and adults diagnosed with ASD. Sensory issues can include hypersensitivity or hyposensitivity to stimuli such as sound, touch, taste, and smell. These sensitivities can trigger or exacerbate challenging behaviors, making it challenging to manage them effectively. Academic psychologists must consider sensory sensitivities when developing behavior management plans, often incorporating sensory integration techniques and environmental modifications. However, identifying and addressing sensory issues require specialized knowledge and resources, posing a barrier to effective intervention.

Individualized Needs
Children and adults diagnosed with ASD have diverse and individualized needs, requiring personalized BMTs. Academic psychologists must conduct comprehensive assessments to understand each child's unique strengths, challenges, and preferences. However, time constraints and limited resources can impede the development of individualized plans. Academic psychologists often collaborate with other professionals, such as speech therapists, occupational therapists, and special educators, to create holistic and tailored interventions. However, coordinating these services can be challenging, leading to fragmented care and suboptimal outcomes.

Lack of Parental Involvement and Specialized Training
Parental involvement is essential for the success of behavior management interventions, as parents play a significant role in implementing techniques at home. However, parents of children and adults diagnosed with ASD may face their own challenges, such as stress, fatigue, and lack of support. These challenges can affect their ability to participate actively in interventions, hindering their effectiveness. Academic psychologists often provide parent training and support to address these challenges, but this requires additional time and resources. Moreover, cultural and socioeconomic factors can influence parental involvement, further complicating situation.

Producing the Report (stage 6)
At this stage, it was useful to determine the sequence in which the themes were generated and then presented. Themes must be connected logically and meaningfully to build a compelling story from

the data. Where appropriate, themes should build on previously reported themes (Braun & Clarke, 2012), yet remain internally consistent and able to convey their own individual story when separated from other themes. The investigator first spoke about "communication challenges" as I felt it reinforced the positivity that seemed to underlie what all my participants were saying. This topic was also heavily influenced by semantic codes, with participants being good at describing what they thought was taken as the impediment "communication challenge". The investigator could see this as an easily digestible first topic that facilitates a broader analysis for the reader. Later, it made sense to report on the "sensory sensitivities". This particular study's theme introduced the fact that, despite the underlying positivity, participants had many concerns about the hypersensitivity/hyposensitivity of the segment with ASD. This theme provided an insight to the next two topics, which were "participating in the therapy sessions" and "individualized needs".

Discussion

The purpose of this research was to provide a discussion of school-based impediments faced by academic psychologists within the context of the progressive approach to ABA. The investigator further set the following objectives to meet the purpose of the study: 1) assessing the perspectives of the academic psychologists about the effectiveness of BMTs for children and adults diagnosed with ASD; 2) identifying areas for or gaps for improvement in administering BMTs over the children and adults diagnosed with ASD; 3) providing insights for policy and practice to enhance support and resources for behavior management for children and adults diagnosed with AS; 4) gathering recommendations from the academic psychologists to improve the administration of BMTs for children and adults diagnosed with ASD.

The findings highlighted significant impediments faced by academic psychologists in administering BMTs over children and adults diagnosed with ASD. Key impediments included the communication challenges, sensory sensitivities, individualized needs, and lack of parental involvement. The presence of communication challenges often require modified intervention plans. However, the academic psychologists reported that sensory sensitivities impede in administering a cohesive and well-coordinated behavior management plans. A high variability in responding to BMTs necessitated personalized approached to be administered over children and adults diagnosed with ASD. Lack of parental involvement and specialized training was identified as a crucial issue influencing the success of BMTs.

Conclusion

In conclusion, academic psychologists face several impediments in administering BMTs for children and adults diagnosed with ASD. Communication challenges, sensory sensitivities, individualized needs, and parental involvement are key impediments that impact the effectiveness of interventions. Addressing these impediments requires a multidisciplinary approach, involving collaboration among academic psychologists, parents, educators, and other professionals. By understanding and addressing these impediments, academic psychologists can improve outcomes for children and adults diagnosed with ASD and enhance their quality of life. Further research relating to the use of BMTs for children and adults diagnosed with ASD was identified. Finally, the study underscored the need of more tailored approached to meet the unique needs of the children and adults diagnosed with ASD.

Recommendations

The investigator set the following recommendations based on the conclusions of the study:

1. School administration should enhance collaboration between academic psychologists and parents to overcome the crucial impediments in administering the BMTs over children and adults diagnosed with ASD.
2. School administration should foster a supportive network among the stack-holders to ensure success of BMTs to administer over children and adults diagnosed with ASD.
3. Concerned authorities should plan and execute comprehensive training programs to improve the effectiveness of BMTs.

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