Thank you for your time and willingness to hear my testimony in favor of licensing behavior analysts in Nebraska. My name is Bethany Hansen. I am a licensed psychologist and doctoral level behavior analyst in the Department of Pediatric Feeding at the Munroe Meyer Institute. I am fortunate to have an opportunity to work with a diverse population of children that all exhibit feeding disorders. Feeding disorders are common in the pediatric population, with a prevalence of 25% of children in the general population and of up to 80% of children with developmental disabilities. A feeding disorder impacts the daily lives of children and their families and can have long-term implications. Negative consequences associated with severe feeding problems can include the inability to develop proper oral-motor skills, failure to gain weight appropriately, and nutritional deficiencies. Inadequate intake of calories, nutrition, or both is associated with attentional and learning difficulties and increases the child's long-term risk of behavior and health problems. These may include failure to thrive, diabetes, and heart disease. Severe feeding problems also contribute to caregiver and family stress and are associated with maternal depression. Children with feeding problems may have difficulty participating in age- and developmentally appropriate activities such as going to birthday parties or to a friend's or family member's house. They may also be limited in their ability to participate in typical activities such as going to a restaurant or on vacation. Although there is a significant need for services for this population, access to trained clinicians that specialize in severe pediatric feeding disorders is limited.

Etiologies of feeding disorders are quite unique and complex but may involve medical, physiological, oral motor, or behavioral factors. Many children that we work with are dependent on feeding tubes or formula. Others consume foods orally but their limited variety results in malnutrition. It is not uncommon for us to work with a child that consumes only one food. Some children are diagnosed with autism spectrum disorder or other developmental disabilities. Other children have a history of genetic disorders or complex medical issues, such as severe allergies, gastroenterology issues, cancer, or organ transplants. Given the complexity, treating a feeding disorder requires a special team of trained specialists of various disciplines such as speech language pathologists, registered dietitians, gastroenterologists, allergists, psychologists, and behavior analysts.

A licensed psychologist and behavior analyst with backgrounds in behavior management is crucial to the team. As a clinician who holds both credentials, I can understand and speak to the unique training and background each receive. My training as a licensed psychologist focused on broader areas of child development, skill acquisition, and behavior modification. I also received comprehensive training on a broad range of mental health disorders, differential diagnosis, and comorbidities. My training as a behavior analyst consisted of in-depth training of learning principles, function-based assessments and treatments, data analysis, and systematic evaluations of clinical outcomes. As a clinician in the field that has utilized all facets of my training, I have witnessed the unique and significant contributions of a behavior analyst. There are decades of research supporting ABA-based approaches as a component of effective intervention for a variety of presenting concerns. Behavior analysts are well-equipped and well-trained to provide services to a diverse population of consumers.

Services for a child with a pediatric feeding disorder requires interdisciplinary collaboration with experts of medical care, swallow safety, behavior management, and skill development. Given the medical and safety implications, it is crucial for all providers, including

behavior analysts, to be licensed and overseen by a licensing board. This is a necessity for the protection of consumers of services. Licensing behavior analysts in the state will also benefit the community as a whole by increasing access to qualified, licensed providers for its members.

Sincerely,

Bethany Hansen, PhD, BCBA-D

Bethany Hansen