



**TURN AUTISM AROUND**  
WITH DR. MARY BARBERA

Transcript for Podcast Episode: 029

## *Talk Tools & Speech Therapy for Autism with Mags Kirk*

Hosted by: Dr. Mary Barbera

Mary: Welcome to another episode of the Turn Autism Around podcast. I have a very special guest here today. It is Mags Kirk, who is a speech therapist since 2003 and a newly minted board-certified behavior analyst. I met Mags about four years ago. She's in the UK and that's when she started pursuing her BCBA credential and she just recently passed the test, so I'm so excited to welcome Mags Kirk here to talk about being both a speech therapist as well as a behavior analyst, and she's also level three talk tool certified, which is a whole oral motor program to help kids with not only talking but also with feeding and drooling and other oral motor concerns.

Mary: So before we get to Mags' interview, I'd like to give a shout out to someone who left me a five-star rating and review on Apple podcasts in Canada. She said, "Mary Barbera is the most down to Earth behavior analyst that I've ever had the pleasure of learning from." I love that. I'd love to be described as down to earth, so thank you for that. It goes on, she goes on to say, "she believes that together professionals and parents can work to turn autism around. now. She is not just a behavior analyst and a registered nurse, but she is also an autism mom who has walked the walk and talks the talk if anyone gets it, she does." I love that review. Thank you so much and if you haven't subscribed yet or left me a review, I would love it if you would do that. Now let's get on to an interview that I did with Mags Kirk.

*Welcome to the Turn Autism Around podcast for both parents and professionals in the autism world who want to turn things around, be less stressed, and lead happier lives. And now your host, autism mom, behavior analyst, and bestselling author, Dr. Mary Barbera.*

Mary: Welcome back to another episode of the Turn Autism Around podcast, and today we have a special guest, Mags Kirk, who has been a speech and language therapist in the United Kingdom since 2003 and she recently became a BCPA. I'm talking like within the past week or two. She is the owner of Two Can Talk

Speech and Language Therapy, which offers private speech and language therapy in the United Kingdom. And since setting up Two Can Talk, she became interested in the fascinating world of ABA. She was an early adopter, early joiner of my autism online course and that's where we first met. And then we met in person in the UK a few years ago as well. Mags finds that merging speech and language therapy with ABA is a truly powerful combination. And she's the mom to three children now and I'm so excited to have her on. Please welcome Mags Kirk, thanks for being here Mags.

Mags: Nice. Hi. It's good to be here.

Mary: So, I usually start out with describing your fall into the autism world or if you want to even start with your fall into the world of speech therapy, which you've been doing since 2003, and then how you kind of got interested in ABA for children with autism.

Mags: Okay. Yeah. So I first got interested in speech therapy when I was 14 years old. So at school, we have work experience that we need to do, and we get to choose exactly what we'd like to do. So my mum knew a speech therapist and got me set up with observing that friend of hers in the clinic and I really enjoyed watching her and really decided that it was going to be the career for me.

Mags: So I went off to university in 99 and got my degree in 2003, and then became a speech therapist. I worked for my National Health Service and I did that for around about 10 years working up through community clinics and eventually going into the child development center in my local town. It was really there that I started working with children with autism because we had a lot of children coming in for a diagnosis. I was part of the team there and really enjoyed it. I found it absolutely fascinating how these children behave differently to the other children I was working with, and I just really wanted to know how to help them, and I found that actually one of the children I was working with was on an ABA home program and that made me really interested in finding out a little bit more about it. So it was like they were teaching similar kind of language concepts to what I was teaching, but seemed to have a lot more success in getting the child to comply with what they were wanting them to do; getting them to cooperate with all the tabletop activities particularly, whereas I was more following the child's need, chasing them around the room, and really looking back on it, I didn't have a lot of opportunities to really teach the language I wanted.

Mags: There was a lot of wasted time within a session, whereas these ABA tutors were actually so much more effective than I was being. So from there, I was looking into, what is this? So I was talking to the ABA tutors about it and they told me there was something called verbal behavior. So I was really interested to find out

a bit more about what that was. And doing the research on that's where I found your book originally, the Verbal Behavior Approach, and that just gave me a really clear outline about how you were looking at language but in a slightly different way. So in speech therapy, we're looking at children's comprehension skills, what they actually understand and their expressive language, what they're saying. So what really struck me was how expressive language can be split into so many different more functions. So the wanting to mand to making requests, the taxing, the labeling, it was like we were using the same concepts, but using different labels to describe those concepts.

Mary: So when you were, um, in your speech therapy program prior to 2003, there was no talk about mands, tax, inter-verbals, echoic? So it was very much like a cognitive approach of expressive and receptive language, which is, yeah, pretty much the standard ABA approach without the incorporation of BF Skinner's analysis of verbal behavior. And a lot of people, especially speech pathologists really when they have found my book, now I book is, believe it or not, 12 years old, which is crazy, right.

Mary: But they seem to really like it. Like you said, it's the common language of... we're using the same kind of idea. I remember back when Lucas was, before he was diagnosed, he was getting speech and language therapy and the first couple goals, I mean he was only just newly two, but the first couple of goals were, you know, programs where she'd get out bubbles and she'd have manded, neither of us use the word mand or knew what that was. And that seemed to go well. But then one of her goals was having him answer yes or no to like pictures. Is this an apple? Is this a car? She was doing yes, no, tax, which was years and years down the road. And I didn't understand, I didn't understand why some parts of speech therapy were going well and some parts he'd be like, I have no idea what you're talking about.

Mary: So, but all of your experience up until the point you found my courses, which was like 2015, it wasn't all positive when you looked at some ABA programs, because I remember you said like in the past you had some bad experiences with some ABA programs. Is that true?

Mags: Yeah. Yeah. So there were a few children I was working with that were on ABA home programs, but it felt like they were just being taught to be robots. They were just sitting there and being forced to do the work and they weren't at all motivated to do the work. And a lot of it, unfortunately, didn't seem really very functional. So they were kind of told to label all these things, but they weren't actually words that they would need to functionally use in their day to day environment. So I was like, really, what's the point in that?

Mags: So actually talking to them, I was saying, well, why can't we make it more functional? Why can't we now, you know, teach them, you know, parts of the the house, you know, so they can say, oh, I want to go to my bedroom now it's time to go to sleep. I want to use my bed. So that kind of thing, rather than just labeling all the different kitchen appliances, which is what one home program was doing, I was like, really? What's the point in that? So I think it's looking and getting the best out of every approach that we worked with. So I think that's sometimes why ABA might get a bad name. But actually, if we look at it in the wider picture, there are really good professionals out there. Sure. So it's just that balance really.

Mary: And everyone's trying their best. It's just, you know, the way they were trained or they don't know what else to do, which is one of the goals of my online courses and community is to really provide people with education about what, how you can apply all this stuff and put it together for each individual child's, which is, it's really difficult, especially as the child learns and grows. It doesn't get easier. It actually gets a little bit more tricky I think. Do you think you find that the case; that kids that are more intermediate learners are a little trickier to program for?

Mags: Yeah, because I think, you know, in the earliest stages of the VB-MAPP, it's so much easier to look at setting goals. You can say, oh, actually that's too difficult. They can't do that, or they can't do the time. But when they've got a client, they've acquired all those baseline skills. It's like, where do you go next? And I think that's actually where speech and language therapists can really step in and help the ABA practitioners. So we'll be looking and saying, well yeah, they may have their basic ability to put a three word sentence together, but they are struggling to use the correct pronoun or perhaps they're using a past tense that isn't correct if they need to use the irregular past tense. And so speech therapist that is a real area of expertise that we know how to teach children to do that. And usually by the time they've got to that point the child is more able to sit at the table and learn and listen. So that's where I've found that speech therapy can then really help the ABA practitioners, but the ABA practitioners help those children's get to that point in the first place.

Mary: Right. And then, but some of those children, as my intermediate learner course really covers is that you know, they have bad problems with scripting and bad problems with rote responding and you might have, so really ideally, and that's why I'm so excited for you now about your BCBA is, is you really need that, that coordination and you know, a speech therapist who might be good at pronouns and prepositions, if she or he doesn't know about ABA or doesn't know how to program with the VB-MAPP, it can kind of dig a bigger hole, if you will.

Mags: Yeah, for sure. So I do definitely find that and I find, you know, having my ABA knowledge now has really helped me with teaching those children. So I know about transfer trials now for example, so we will work on the echoic first and then we'll realize actually and then I'll give another the same question and then there'll be more spontaneous and giving me the tact and then learning that way. Whereas a speech therapist might just keep going over and over, asking what is it, what is it? And the child is just going to again go scripting through all their different responses until they get the right answer and then they're not getting the correct reinforcement. So yeah. So the combination of both professions is absolutely brilliant.

Mary: Yeah, there are so many people that you know are trying their hardest to help these kids. But without knowing about errorless teaching, error correction procedures, transfer trials, chaining, shaping, how to prevent problem behaviors. The functions of behaviors is just, it gets even more tricky as the language expands, which, you know, I think there's a big push, a lot of my video blogs and my podcast, I talk about how we shouldn't just throw carrier phrases and we shouldn't just focus on length of utterance because I think that really does backfire a lot. And yeah, so, okay. So we met in person about four years ago and that's when you decided to start pursuing a BCBA and get your ABA coursework that leads to certification. So, with an already full plate and already successful practice, what prompted you to do that?

Mags: Well, I think it was actually, you gave me the final push to go, actually this is the right thing to do. This is really going to help to enhance your practice. Um, so I was just so blown away that you would write me a letter to say, yes, I am actually good enough to get onto the course at Queens. So that was amazing that I could then put that in, and then get accepted onto the course, but yeah, it's been an amazing experience ever since really, that I've been able to get on the course and start that process.

Mags: So finding it was too much. I just have this addiction to learning. I just want to learn something new every day and I feel that I've stagnated if I haven't learned something new. But what I've found over the years really, I've got this primary question in my head. So, and that primary question to me is how can I give even more love to these children? And what I was finding was in speech, really, I could do that to a point, but I was like, there's got to be so much more. How can I help these kids that actually are running away challenging behaviors I can't actually access? And that's, that was kind of the missing link for me that by doing the BCBA coursework and everything, I was just learning so much more has helped those kids. And that's been my drive really ever since.

Mary: Wow. That's awesome. I remember when I spoke in the UK, I think it was four years ago, Skybound Therapy brought me in for a two day workshop I believe,

and that's when we met in person. But you are already a part of my online community. And one of the things that really struck me was you and others, there was a handful of you that talked tools certified. And I had written actually about Talk Tools in my book in chapter six, the non-vocal to vocal chapter. Lucas, my son was always vocal, but there were other kids that their speech therapists used Talk Tools or some kind of, you know, Talk Tools procedures, and those moms really felt like that resulted in better language. So can you, for our listeners, just describe what Talk Tools are and tell us a little bit about your training and certification in that area?

Mags: Sure. So Talk Tools is an approach that's very structured and it's looking at how the muscles function in order to move to the correct postures for speech. So a fundamental concept in Talk Tools is the importance of the jaw. Which actually going back into my speech therapy training was an area which wasn't really covered very much in detail. It was all about what the lips do, what does the tongue do to make the speech sounds, but actually the jaw wasn't really mentioned. But if you actually think about how much the jaw is moving every time we're speaking, it's going up and down, all the time, all these different jaw heights. But what you'll find with the children who've got a very unclear speech or perhaps the ones that are not speaking at all yet, is that they've got a very unstable jaw.

Mags: They're not able to hold their jaw in the postures that are needed for different speech sounds. And so the fundamentals of Talk Tools in the basic exercises that that child will be doing is probably going to be doing jaw stability. And so Talk Tools adopt what we call a tactile approach to teaching children. So most children who are typically developing will be able to perhaps look at the adult to understand how their lips and their tongue and jaw are moving and then there'll be able to imitate that. But we do know that a lot of children with autism don't have that imitative ability at first. The other thing that children typically developing will do with speech developmental is to listen to how the sounds have made and they'll work out how can I make that sound and replicate that.

Mags: But again, we know with children with autism, they will often have the auditory processing difficulties, which means that they find it very difficult to attend to speech to work out what is speech versus what's background noise. How to tune out that background noise so that they can really focus. And so Talk Tools will go to the tactile approach because they can then actually feel what is needed to make the speech sounds. So in Talk Tools we'll be using equipment to help them feel, my jaw needs to be at this opening of height to make this sound, so for example, we work with bike blocks, so those are little plastic sticks that will be put in between their teeth and that will help them to hold their mouth in the posture that we would need for an E sound, or if we use a slightly bigger bite

block then we'd be making the sound for R and they would then be learning, I've got to open my jaw to that height to make that sound.

Mags: Another thing that we might do in Talk Tools is using chewy tubes. So, obviously to chew, it's very commonly used as a sensory strategy for children with autism, but in Talk Tools we're using it in a very structured and hierarchical approach. So we'll be working with the red chewy chew tube, which the easiest one to chew and getting them to bite on that up to 10 times and making sure their jaw is staying very aligned and so then they are strengthening their muscles, which is what is needed for speech. And then gradually we'll move through to the harder textures all the time, strengthening their jaw so that they're able to hold it in different postures for speech sounds. Another thing that we might do in Talk Tools is working on air stream control.

Mags: So a lot of children with autism perhaps haven't got adequate air stream control actually get vocalization going. So we're going to be teaching them, this is how we breathe from the diaphragm and we might be using bubbles to get them to going airstream. So, they got that automatic reinforcement. I've blown the bubbles, therefore I see the bubble and that's going to then reinforce me to try that again. And what we can do with the airstream is then to get them to vocalize at the same time. So we might be pressing on their diaphragm perhaps, and then the airstream comes out and we might open their mouth and they'll be saying that R as they're vocalizing and then that can teach them to make other sounds. So there are lots of different things that we're doing in Talk Tools using the tactile approach to teach them how to speak.

Mary: Okay. So, that was helpful. And I'm familiar with talk tool so some of the equipment, the Talk Tools equipment and hierarchy include things like bite blocks, chewy tubes, but it's not just handing a kid a chewy tube and having them chew on it. It's very specific. They have to be sitting up straight. You have to be supporting their jaw in some situations supporting their head alignment. It's very controlled and hierarchical. There's also the use of bubbles and straws and whistles. And I remember somebody said to me once or I had a little bit of training and Talk Tools, but I'm not certified you are certified at level three, I believe you said?

Mags: Yeah, that's right.

Mary: Yeah. So there's a certification at a level one, two, three, and four. Is that right?

Mags: Yeah. So those are the main levels that people would do to be competent in using Talk Tools. Most people are at level two. I chose to go to level three because that gave me the ability to do more consulting work and to write a very detailed step by step programs for those children that I wasn't able to work with

myself on the day to day basis. Level four Talk Tools just goes into a little bit more detail. So yeah.

Mary: And level four then you're allowed or permitted to do training on Talk Tools. So it's very systematic, this has been around for many years, like decades, right? And it was created by a speech and language pathologist, but I remember her saying... what's the woman's name that created it?

Mags: Sarah Rosenfelt Johnson.

Mary: Yeah, Sarah Rosenfeld Johnson. And I remember her saying, it's just like saying, well, you know, raising a five-pound dumbbell isn't going to make your arms stronger, just like sucking on a certain straw or blowing bubbles isn't going to make the oral motor. But yes, if you have a laid-out plan by a personal trainer that you would just not stop with five-pound weights, you would be going again and you'd be strengthening systematically. And if there were errors or issues you'd be under the care of somebody who knew what they were doing so that they could scale back and go back.

Mary: We also have the added problems because I used Talk Tools, actually after I got back from the UK, you helped me and the speech pathologist that I was working with helped us get more training and the speech pathologist went on to get certified. But, you know, it's not just throwing something at a child, it's a comprehensive plan with the Talk Tools, methodology, and Talk Tools alone without you as an expert in speech pathologies or without a BCBA who's able to, you know, it's a lot for a child who's non-vocal, who's, you know, sensory reactive to have them sit up straight, to have somebody even touch their mouth and stuff and all that may need to be desensitized, which is, that's really the beauty of working with a multidisciplinary team and to have that, you know, what's best for the child because it's not just talking. It's also, what I find is the kids that we have, you know, that the parents and professionals have in my early learner course and toddler course. If they are not talking, if they're non-vocal, they're also usually having eating problems, drinking out of a bottle or a sippy cup or using a pacifier. They also might have trouble with drooling. So drooling, feeding, talking, it's all intertwined and Talk Tools does have the equipment and the care to deal with all those issues. Is that correct?

Mags: So yeah, Talk Tools can be quite misleading with the name. Talk Tools imply that actually, it's all about talking, but actually Talk Tools has a lot of activities that we can use to help with the drooling, the feeding as well as just the talking. So one of the main things I noticed with these children that are non-vocal at this point is that oftentimes they will be drooling as well. They might have this open mouth posture and very often it's related to their muscle function that they actually haven't had the muscle strength to close them properly. So they might be going

around with their tongue hanging out and so a lot of what we're doing with Talk Tools is helping with that jaw stability so that they can put their tongue back in their mouth. And the tongue posture is really important to phasing as well because what you'll often see is children that are primarily just using a forward tongue posture will only be doing a sucking posture in their feedings, so that's why they're still on it also, while they contract from an open cup, why they're having difficulty chewing food.

Mags: And what we see is those children very often turn into very picky eaters or even really destructive feeders simply because they can't physically manage to chew the food. And so they then develop all these behaviors around it to avoid the sensation, avoid that negative experience of not being able to chew the food. And that's where Talk Tools really help with feeding as well as speech. So we would be looking at perhaps how to develop the tongue lateralization skills through chewing, and so that we would be using real food. So if you're working on feeding, you would be using real foods. So, we will very often be using some stick shape foods perhaps and we'll be putting those to the side and encourage the child to chew on them and also particularly looking at how they're swallowing.

Mags: So we might be using the straw hierarchy and Talk Tools and that is a series of straws that get harder and harder to suck. Right? So all the time we're working on retracting the tongue, getting the tongue back in the mouse, but also at the same time we're going to be looking at can they round their lips to suck through the straw and where do they put their tongue when they're swallowing? So we'll see when they move through the straw hierarchy that they're starting to move their tongue up to the bump, just behind the top teeth, the ridge. And as they do that more and more, that tongue is going to start staying in their mouth, which in turn will improve their chewing skills, their swallowing skills, and we'll have a carry over through speech as well. So I am amazed actually how working on feeding developments has an improvement on that speech as well. It just really carries over. It's brilliant.

Mary: So how many, from your experience, how many kids or what percentage of kids that are non-vocal, say they're are between you know one in four years of age and they are not speaking or just have a few word approximations. How, what percentage of those kids, I can kind of tell you my number, but what percentage of those kids also have some feeding issues? Some drinking out of a bottle, can't wean from a pacifier... what percentage of kids have both?

Mags: Yeah, I would say they might split. It's probably around 80% something like that. I would say it's more than the majority that do have a problem than the ones that don't. It's very unusual to me to have a child who is not speaking at all but has absolutely normal feeding patterns.

Mary: I actually think it's, in my experience, it's like 95% of kids who are not speaking at all have some delayed... Only eat baby food, only eat crunchy foods, only are still on a bottle or a sippy cup or a pacifier and can't wean. Like, I can't even think of a case where the child's non-vocal and eating fine and chewing and swallowing. But you know, it's a lot. It's the majority for sure that have both. And I have seen Talk Tools work effectively for feeding issues, for talking, and for journaling. But like it's not the only tool for sure. You need to have, you know, the only people that can really get certified in Talk Tools at a high level are speech-language pathologists. Maybe BCBA's like it or OTs. It can't just be a lay person. I think a lay person could get level one certified, but it's going to take a lot. It's going to, you know, just like you can...

Mags: Even if someone qualifies for level one, I would really recommend that they do get someone who's higher certified to be supervising a program. The risks with tools I think is because you can buy much of the equipment just yourself on Amazon or whatever. And so parents will go, oh, I'm going to buy this whole kit. And I've had that happen several times where it's like, oh, we've been told we need to do Talk Tools. I've, well, everything on the website, can you help me? And a lot of the times I'll have bought a load of stuff that they don't even need and they don't know how to use. And that's where you need someone to actually show you what to do. And it's all working with the child as a whole. They'll have so many different issues and if you just say, oh, I'm going to do chewy tubes with them, I really don't expect them to make a lot of difference to this beach. It's everything together.

Mary: And as the child gets older, I do have a little bit of experience with older parents of older children who are doing Talk Tools even though their articulation is pretty intelligible at a one word level and they have a host of other self-care, vocational, you know, all kinds of things. Like at some point, you know, Lucas's articulation is imperfect but it's intelligible to strangers or to me and to those caregivers. So you know, it's just one tool but there does seem to be a lot of controversies. Many BCBA's and SLPs don't quote-unquote believe in Talk Tools, they don't think it's evidence-based. And I have read some dissertation studies and other studies and I know people like you and other reputable professionals who really believe in it. I met Sarah, the creator of Talk Tools years ago. What do you say to people who say they don't believe in Talk Tools?

Mags: I would probably want to question what they have actually seen of Talk Tools? Have they seen a really well set up program that's been established by someone who's done all the certifications or have they seen someone who's just said, oh, I'll buy some chewy tubes, I'll blow some bubbles. I'll see if that makes a difference to the child's speech. Most of the time those kinds of programs will not be making the progress that you would expect.

Mags: Whereas the ones that are well assessed, those will be making the progress because it's all tailored to what that child needs. There is, some controversy because it's very difficult to evidence-base each individual tool, it's when it's used as a whole that actually we see the progress with that child and it's looking those single case studies and working with so many children now as I have now, they might progress at their own speeds, but it's very difficult to create a cohort of children where you could say they've all got exactly the same or major difficulties, exactly the same sensory issues, exactly the same feeding problems and then put the same program in place for all of them. It's tailored to such a wide variety of different people. It's very hard to standardize and say, yes, this is a practice because of this is that program as a whole.

Mary: It's kind of like when people say they don't believe in ABA or ABA doesn't work, it's like, well, whatever you were seeing may not have been effective, but that doesn't mean the science doesn't work. It doesn't say... And there are some studies on Talk Tools and we can link some of those in the show notes, and you have gone on to a lot of your work now is with feeding too, can you just describe besides Talk Tools, what does your current work look like?

Mags: Okay, so I'd like to probably talk about the dissertation project that I did at Queens. I mean, so I worked with two children actually who had very funny eating patterns. So both of them had only 10 foods in their diets. So they were very carbohydrate-based diet. So it was the children that were only eating chicken nuggets, the plain crisps, those kinds of children and didn't have any vegetables or anything in their food. So I was using a fading approach as part of my degrees. So what we would do is have the tiny, tiny pieces of the food that the parent wanted them. So then to eat so in one child's case it was a tiny piece of carrot and then I was pairing up a larger piece of preferences. So for this child in question, it was like a cheesy puff crisp. And what we did is start off with a really big piece of the cheesy puff crisp with a tiny piece of carrot and then gradually reduce the size of the puff crisp so that gradually it became the same size as the carrot until eventually, we can say that the, what's it all together and he continued to eat the vegetable. So that is one approach that I do use a lot within my practice.

Mags: So it's very effective to those kinds of children who are able to accept directions sitting at the table and for those that perhaps can't access the more intensive feeding clinics. So in the UK we really don't have feeding clinics where they would be using ABA principles. There's a lot more kind of psychology around it. Oh, just kind of touch this food doesn't really matter if you run away from food. And actually with my experience, if you don't have that very structured approach, you don't have the progress that you might make if you have a lot more structure to what you're doing. So for that child on my dissertation project, he made tremendous progress. So we were able to work through four foods in a

very structured approach. So we were targeting a vegetable, a protein, and starch within his repertoire because all the time you were thinking what was actually going to be really useful for him in nutrition for his day by day. And we need to have that balance in different food groups. And from me teaching him very specifically how to meet those foods, he then went onto generalize to many other different vegetables and various meats as well to this and that. Now he's able to order food at restaurants. He's able to eat school dinners and he recently went to a birthday party, was able to eat all the food there and enjoy a piece of birthday cake. So to me, that is absolutely amazing that we can use ABA in that way to improve a child's development in their feeding. It's brilliant.

Mary: So do you have a clinic or how do you work with kids now?

Mags: So I have a clinic-based at my house and we also, I have several therapists now who worked for my team and we would go out and do home visits and school visits. But primarily the feeding ones would come to me at the clinic. Okay. So...

Mary: Yeah, I know you do a fair amount of travel already. So if people want to, okay, so just say a parent is listening and they really want to know more about Talk Tools and you know, how would they get started? And I can't imagine that you have a ton of time for distance consulting and those sort of things, but like how would they find somebody certified maybe in their area or how would they proceed?

Mags: Okay. Yeah. So if they would go to the Talk Tools website, so I think it's [talktools.com](http://talktools.com), we can... there's a database on that. It has all the levels three plus certified practitioners on there. So you can do a database search there and to find someone, well I would say is if you can find a consultant at that level, that's brilliant, but you will find really good practitioners in this as well. Anybody who's kind of level two and above will be really brilliant to work with. They'll all have done the certification training and we'll be able to run a program for you, but it might just be worth getting a level three to oversee. It is a very similar kind of thing to work into the BCBA and then perhaps having an LBT do the groundwork or perhaps have an ABA work with your child, similar kind of structure.

Mary: Okay. And I know you're still in my online community as a Facebook advisor for us. And there are, we have both parents and professionals now you're an SLP and a BCBA and I know your approach is everybody should be working together and, and do you see any problems with parents and professionals learning together, being in online communities together? Anything like that or do you think it's a total pro?

Mags: I think it's really, really good. I think so long as everyone is aware who of who everybody is, but also my experience has been parents are so gung ho, they will

go out and learn what to do. And sometimes just having that ground experience, you know, your child better than the professional know your child, so you can learn stuff and do that with your child. So I think it's just important to have that professional guidance. Just to check that you are on the right track. But certainly, some of the best parents I work with are those that have actually gone off and done different training. And then there are other professionals that I work with within our health service perhaps that don't actually go off and do extra training. And so sometimes the parents are the expert.

Mary: Yeah. Most times. Okay. So part of my podcast goals is for parents and professionals to be less stressed and lead happier lives. And I know you've traveled around the world, gotten training on my online courses, on others, online courses. You have three children, a one-year-old is your youngest, how do you, and then you just finished your BCBA, which is incredible. So like how what kind of self-care could you recommend or how do you stay as less stressed as possible?

Mags: So number one for me is my backup. I have a great family, I have a really brilliant therapy assistant who helps me out and I have a brilliant nanny as well. So I feel like really fortunate that I have all those people around me and they really helped me out with the childcare. But number one for me is making sure that I have time to myself. I can't just be working 24/7 because if I do that I burn out. So it's actually making sure you schedule in that regular time once a week perhaps, where you're actually sitting down and thinking, no, I'm not going to get the laptop out. Yes, I'm just going to sit and have a cup of tea, shut out, you know, Facebook or whatever. Have that time to yourself and find the time to do it and prepare yourself.

Mags: And the other thing that I would really do is get into a positive mindset. So, I find you can just change your state in an instance. So I'm really into Tony Robbins, so he's one of the life coaches that I'm really into and he will say, you can change your state in a heartbeat. So it's a case of actually if you're sitting down, stand up, you know, do a little star jump or something changes your state. It could be you want to put some music on, have a little dance around in the kitchen, nobody's going to see, it's fine. So changing your state, getting in the right energy is really what I do and that just gives me lots of time to get on, do everything I want to do.

Mary: Great. So how can listeners follow up, keep an eye on your work, reach out to you? Do you have a website that they can look?

Mags: Yeah. So yeah, so we're, I'm [TCTspeechtherapy.co.UK](http://TCTspeechtherapy.co.UK) so you can see lots of the different therapies that we offer that gives a view of what we do. If anybody wants to email me, you can do so at [TCTspeechtherapy.co.UK](http://TCTspeechtherapy.co.UK). That's on the

website as well, and email me any questions if you'd like to. I'm happy to have a chat with you that way. And if I'm not in your local area, then I do have contacts all over the world. So I may know someone in your area who might be able to help. And I will certainly do my very best to find someone who will be as helpful.

Mary: And we will link those website and the email in the show notes of this podcast. So if you ever can't find a podcast or you're looking for a show notes for any of the episodes, you can go to [Marybarbera.com/podcast](http://Marybarbera.com/podcast). Mags is a great inspiration to many of us professionals and a big help to parents. She's been a valued member of my online community. If you'd like to learn more about joining my online courses and community, you can go to [Marybarbera.com/workshop](http://Marybarbera.com/workshop) for a free online workshop. And I think it's been great for me to learn more about Mags and more about Talk Tools. And I think we all... I think one of the biggest takeaways is we all need to work together. Doesn't matter what your title is or what your job is within a program. We all need to work together, put our egos at the door, and really just try to help the kid reach his or her fullest potential. And that's what it's all about as we try to have a happy life, whether you're a parent or a professional, no sense with getting completely stressed out or burnout and leaving the field, you know, just put one foot in front of the other; do like Mags has done and learn more and get you to know, life coach training from Tony Robbins. Get Talk Tools, certification, you know, come to online courses through me and others and just keep learning because as Mag said if she's not learning every day she wants to be. And I know I learned something new every day. So thanks for your insights. I appreciate your time and I look forward to now that you're duly certified as a speech and language therapist and I'm looking forward to more and greater things from you. So thanks again for your time.

Mags: Thank you for having me.

*Thanks for listening to the Turn Autism Around podcast with Dr. Mary Barbera. For more information, visit [Marybarbera.com](http://Marybarbera.com).*