

## Transcript for Podcast Episode: 041 Teamwork & Collaboration Between SLPs and BCBAs: Interview with Dr. Joanne Gerenser Hosted by: Dr. Mary Barbera

Mary Barbera: You're listening to the Turn Autism Around podcast, episode number 41, with a special interview with Dr. Joanne Gerenser, who I will introduce in just a second. Before I get there, I'd love to give a shout-out to a podcast listener who found my podcast about a month ago, and she left me a five star rating and review on Apple podcasts and she said, "I was so excited when I heard Dr. Mary Barbera was starting a podcast and after listening to lessons, I am not disappointed. Great information and I'll be listening to all her podcasts. Thank you Mary for all of your hard work in the field of autism." Well thank you for writing me that excellent rating and review.

- Mary Barbera: It really does help if you could take a minute and go on to wherever you're listening and give me a great rating and review, I would totally appreciate it because it helps me spread the word. And if you are brand new listening to these podcasts like this listener did, she started with the lessons and that is podcast episode number one which I recorded back in January of 2019. You can get to any of the podcast episodes by going to Marybarbera.com/podcast. To get to the first podcast, you go to Marybarbera.com/one and to get to the show notes for this podcast with Dr. Gerenser, you would go to Marybarbera.com/41.
- Mary Barbera: So I'd love to introduce you now to our special guest for this week. It is Dr. Joanne Gerenser, who is the executive director of the Eden II programs in New York State. Joanne has spent her whole educational life in the field of speech and language pathologist with a PhD, but she has practiced in the field of behavior analysis for almost four decades now. Her mission is to bridge the gap between SLPs and BCBAs and she has a brand new book which will help her in that quest. So I'd love to introduce and get chatting with Dr. Joanne Gerenser.

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 Barbera:	So I am so thrilled today to welcome Dr. Gerenser here, thanks so much for spending some time with us, Joanne.
Dr. Joanne Gerenser:	Glad to do it.
Mary Barbera:	Yeah. So I remember seeing you present somewhere, I think it was back 2000-ish when Lucas was just diagnosed in 1999 and you were speaking about teaching kids with autism as a speech pathologist. But let's go back even farther and tell our listeners and myself how you ended up falling into the autism world.
Dr. Joanne Gerenser:	Well, it's interesting because I always knew I wanted to be a speech pathologist and two of my best friends growing up were twins who are deaf. So my goal was really to work with the deaf, but once I got to graduate school, I had kids with autism on my caseload. And after that it was no questions. That's the population I wanted to work with. So when I graduated college, I moved to Staten Island and my first job was at a school that was an ABA school for kids with autism, which was not really very prominent back in the early eighties, but that's where I landed. And that's kind of where I've been.
Mary Barbera:	Right in New York practicing. And as I said in the introduction, you, all of your education has been in the speech pathology realm, but you practice in the ABA world as you know You're not a BCBA. And why did you not get that credential, which obviously you could have done pretty easily.
Dr. Joanne Gerenser:	When it first came out, I was finishing my PhD in speech and so that was the priority. And then I just, you know, I have a license in speech pathology. I'm able to practice and you know, I just believe that behavior analysis is a vehicle for behavior change. And so I use behavior analysis in all my work, but I'm really a speech language pathologist.
Mary Barbera:	Right. And you see a divide sometimes between speech pathologists and BCBAs. Why do you think that is? And do you think that's getting worse or better?
Dr. Joanne Gerenser:	You know, it's interesting because it's been something I've been, you know, looking at for a long, long time being a speech pathologist. It, well before the BCBA ever existed we were always struggling to get papers accepted, for example, at Asia that were too behavioral. So there was always a divide. It's never been easy, but it got better. You know, largely

when I think speech pathologists were more open to less structured ABA such as pivotal response training. And then when the BCBA came about, there were a number of speech pathologists that got certified as behavior analysts. So it got better for a short period of time; not great, but better. And it has gone downhill rapidly for the last five or six years. I think the divide is worse than it's ever been, unfortunately.

- Dr. Joanne Gerenser: And I mean I think there are a number of reasons. One of them, probably the most prominent, is the rapid growth of behavior analysis across the country, particularly with all of the new insurance mandates in 50 States. And so there's not a great deal of quality control. And so one of the reasons why there was always this divide was I don't think other disciplines fully understood what behavior analysis was. And if they saw really good behavior analysis, they embraced it. If they saw really bad behavior analysis, they rejected it and it became sort of what they viewed as behavior analysis.
- Dr. Joanne Gerenser: So my concern is that there's just not enough control over what behavior analysis looks like for children with autism. And couple that with social media, it's a recipe for disaster. And that's kind of where we're at right now, you know? So there's a couple of list serves and Facebook pages that I belong to and it's appalling to me what speech pathologists in this case are saying about behavior analysis, but then they present some videotapes of what they've seen and you're like, Oh my God, I kind of understand it. But you and I both know that that's not what behavior analysis is.
  - Mary Barbera: Yeah. And I think speech and language pathologists have a lot of training on, you know, vocal language and even augmentative communication systems, and the structure of how everything works; oral motor and so I think there has been also in the past of speech pathologists really being in control of the goal for language and the goal for communication and, you know, behavior people or just, you know,... I was told like in 2003 when I was a brand new behavior analyst, like, you're here for the behavior problems. Like, we're in charge of speech, you know, and it's like, well, but the kid's on the floor, and I'm not like in it to like drag him to the table so you can do your speech.
  - Mary Barbera: And so I think that's part of the reason too is like, there's like this control over whose goal is it, who's right, you know. And as we know, communication is 24/7 and everybody needs to be working on it. And it has so much to do with problem behavior that you can't treat the problem behaviors separately than the language and the communication. And so, yeah.

Mary Barbera:	I mean I've worked collaboratively with so many hundreds, if not thousands, of speech pathologists and I've had great relationships with many, many people, many, many speech pathologists and when you can have a BCBA who is strong with their knowledge and respectful of a speech pathologist, what they bring to the table and a great speech pathologist that learns or knows how to work as a team. And this is also the occupational therapist and the PT and the parent. And you know, it just snowballs from there. But we've done a couple, I've done a couple podcasts, interviews with other speech pathologists, Rose Griffin, Mags Kirk, and Deidra Darst. So if anybody listening here wants to listen to other interviews with other speech pathologists, I think it's a really important thing that we figure out because this divide is just hurting our kids.
Dr. Joanne Gerenser:	Absolutely. I mean, the bet, I mean, I could not work with kids with autism if I had not learned as much about behavior analysis. I always look at, for me, as a speech language pathologist, this concept, that behavior analysis is the train. It gets us from A to B, right? It's the vehicle for change. And what I learned about language and speech production, apraxia of speech, of method of communication, all the content that just is stuff that goes into the train.
Dr. Joanne Gerenser:	You know, it's funny because I always say to my fellow speech pathologists, we don't have a theory on learning that's in the world of behavior analysis. So we really need to coexist. And I think when we work together, we create far better programs. Both behavior analysis and speech pathology have in our ethics guidelines, a mandate to collaborate with other disciplines. So, you know, I, along with many, many other speech pathologists have worked really closely with behavior analysts and seen much better outcomes because of it.
Mary Barbera:	Right. So if you had to wave your magic wand and have people do a few things to bridge that gap more, what would those be?
Dr. Joanne Gerenser:	Well, it's funny because it would it's a lot. One is we have to learn how to collaborate. It's not innate. We t's a skill that, you know, I hope is being introduced in universities. I know Dr. Mary Jane Weiss in her sequence of courses does an entire sequence on collaboration and integral aberration. So I think that's really important so that people have the skills they need to be able to collaborate.
Dr. Joanne Gerenser:	I mean, we're going to disagree. I disagree with behavior analysts every time I sit down with them. But disagreement is the healthy way to get to the right answer. You know, it, there's this great quote that says,

"disagreement with trust is the search for truth", right? You just to get to the right answer. It doesn't matter if I'm right or you're right, I just want to know which one is right.

Dr. Joanne Gerenser: But disagreement without trust is just politics, right? It's not about who's right or wrong, it's that I want to be in charge. And so I think it's really important that we learn how to collaborate. I think it's really critical that we spend time with each other. A lot of buildings now that I've worked with, they actually put their speech pathologists and behavior analysts in the same office. Because once you get to know the person, you're much more willing to listen and to learn. And we have a lot to learn from each other. Both disciplines bring so much vital information to the learner with autism. The hardest part really is that both disciplines bring a problem that we have to overcome, right?

Dr. Joanne Gerenser: So what I think is an issue in speech language pathology is that we are viewed as not being as evidence based. I've heard behavior analysts say speech therapy is not evidence-based, which that's as absurd as saying behavior analysis isn't evidence-based. Right? So we have to get to this understanding that there's two different, there's what's called evidence based practice, which is very different from empirically supported treatments, right? So an empirically supported treatment would be something like the work of Lovaas where he actually demonstrated through rigorous methods that this works. But there's very little of that, right? And so oftentimes when we're faced with a challenge, we have to go to the literature and use the best available evidence. So that's a really important issue that we have to come to an agreement on. And then I think the other issue is we've got to create better standards so that we can be able to say, this is not what behavior analysis is.

Dr. Joanne Gerenser: When you say to me when a speech pathologist says to me, I don't like behavior analysis because it's this and that and they're reflecting something that isn't accurate... we have to be better at being able to demonstrate what it really looks like because you know, and I know that good behavior analysis looks fluid, it looks flexible, the kids are having fun. It's not rote and repetitive and painful, which is the way oftentimes it's being described. I guess the last thing is we have to be really careful with social media because that's where the real damage is being done. As I see it, people feel very compelled to make statements that then get repeated and repeated and repeated, but have no basis for them.

Mary Barbera:Right. There are a lot of attacks and you know, it's not benefiting anyone.I mean, these kids are in real need here and let's put our egos at the<br/>door. It doesn't matter who's right or whose goal is, which goal is yours.

The goal should be to get the child to reach his or her fullest potential, which is always my goal. So, yeah, I think those are some good suggestions. And you actually just wrote a book in this with the same concepts, right? So can you tell us the name of your book and also why you wrote it, what it's about, and those sorts of things?

Dr. Joanne Gerenser: Basically. So I actually edited the book. I only wrote about three or four chapters. I co-edited with my colleague Mareile Koenig, And you know, Mareile and I have been sort of teammates. She's at the university of Westchester, University of Pennsylvania.

- Mary Barbera: That's my Alma-mater actually. I went to Westchester undergrad for nursing. So it's my Alma-mater. And I know Mareile, too. Yeah. Mareile, how do you pronounce her name?
- Dr. Joanne Gerenser: Mareile.

Mary Barbera: Yeah, she's great. And she is a SLP, BCBA, right?

Dr. Joanne Gerenser: She is. Yep. So we added to the books. So the chapters are all written. So there's a, I think, something like 17 chapters and each chapter is coauthored by a speech pathologist and a behavior analyst. So the idea really is called, ABA for SLPs: Interprofessional Collaboration. The goal for us was to write a book or get a book written that really explained applied behavior analysis, both in terms of the principles, you know, for example, you know, the principles of reinforcement or prompting, shaping, etc. But also each of the different models. So for example, we have a chapter on, on a more traditional Lovaas' ABA written by people who have been in that arena for a long, long time. Andy body and Lori Freost wrote the chapter on PACs. So we really wanted people to hear what something was from the people who had been doing it for a long time.

Dr. Joanne Gerenser: There's chapters in there on how to manage challenging behaviors for speech language pathologists because we have different issues. You know, we see kids for 30 minutes and oftentimes we're stuck at the possibility of negatively reinforcing the problem behavior because our session is finished. So we tried to make each chapter very directed with good examples for speech language pathologist, the first chapter and the last chapter in the book talk about how to inter-collaborate, how to collaborate with each other, and what are the real big issues that are kind of standing in the way. And so, you know, it's my hope that both behavior analyst and speech pathologist will take a look at this and recognize the value that bring to the table, both of us, both disciplines so that we can, you know... The research is clear. When you work together, you get better outcomes.

Dr. Joanne Gerenser: So, and again, it's part of our ethical guidelines in both disciplines. So, you know, one of the interesting things that I learned as I was writing this was, you know, it's hard for behavior analysts to, you know, in their ethical guidelines, it basically says that they really need to be doing behavior analysis, right? So it's very difficult for them to then understand, well, what if somebody... How do I collaborate with somebody that doesn't necessarily do behavior analysis?

Dr. Joanne Gerenser: And so there's a great chapter or article written by Matt Broadhead that really lays out a great model for behavior analysts, because what ends up happening if they don't at least want to work with... let's pretend that I'm not a behavior analyst or I'm not behavior analyst. Let's pretend I'm a more pragmatic speech language pathologist and a behavior analyst says, I can't work with you because you're not behavior analyst. Well, that's very arrogant and dismissive. At least that's the perception. And that's what's happening in some cases because they're so rigid to their, to their ethical guidelines, which I agree and I understand you want to be ethical, but that doesn't foster collaboration. I love the way Matt lays it out so that you don't have to say I'm right, but at least willing to entertain my information and then let's determine what's right because we have a great way to do that, right? It's called data.

- Dr. Joanne Gerenser: So if I say as a speech pathologist, I don't think you should... I think you should be using this right now. For example, I would recommend that you work on this. And not this, well, you know what, we argue, we get to the bottom and we make a decision and we test it. And if my recommendation is turned out to be fine, but if you just dismiss me from the very beginning because I am not behavior analyst, you're doing a disservice because you're not disseminating behavior analysis then, which is another one of your ethical guidelines. So yeah.
- Dr. Joanne Gerenser: And then, you know, I could go on also about speech pathologists, because I mean there is a group on Facebook and they basically say on their Facebook page that their mission is to be anti-ABA. Well the minute you do that, I think you're violating your own ethical standards as well. You can't just dismiss an entire discipline that just doesn't work for me in terms of understanding the needs that the children that we work with should come first.

Mary Barbera: Absolutely. And I think my background, I don't know if you know, but I'm a nurse and I worked in a rehab setting for a year or two where I worked

with multidisciplinary teams. So we had nursing goals. We had OT goals, we had speech goals, and it was very collaborative and there were team goals and there was team objectives to, you know, all focused on the patient. And then as a parent too, and a behavior analyst. So I think that is one of my strengths is, like you, don't discount anybody or anything and you go in focusing on the child, not your own ego. And I think we can, you know, get to the next level. But it is, unfortunately, a bigger divide than we've seen in the past. And hopefully, you know, podcasts like this might help your book, ABA for SLPs. I think it's excellent. I'm planning on getting it and reading it myself.

- Mary Barbera: Okay, so you are the executive director of the Eden II programs. What is that and where is that, and is that different than the Eden I program, and how does that work?
- Dr. Joanne Gerenser: Yeah. So we are located in Staten Island and Long Island. In 1976, again, really just at the birth of special education. A group of parents on Staten Island had children with autism who were already thrown out of school. And so they were looking to start a program. They'd read a lot about this thing called ABA and they found a program in New Jersey called Eden. And so the program in New Jersey helped this program in Staten Island get started, but there is no relationship, formal relationship between the two. So I don't know why they chose to name it Eden II, but they did.
- Dr. Joanne Gerenser: And so we provide services to about 500 families across the preschool... A couple of school-age programs, one here on Staten Island, one on Long Island. We provide adult services, we provide residences. So we have about nine residences or we will have nine residences at the end of this year. We do outreach training workshops. So we're pretty comprehensive in terms of the services that we provide.
  - Mary Barbera: Wow. And over the decades you've been involved with the autism field. What are the main struggles of parents of toddlers through adults with autism?
- Dr. Joanne Gerenser: Yeah. You know, it's interesting because I think when I first got started, the struggle was access to the intervention and trying to get services. Now I think the struggle parents have in the beginning when they're, when they first get their diagnosis, because of social media and the internet, is what should I do? Right. And so, you know, that's why it's so important that we do good outreach in terms of how important early access to good ABA is. Because I mean, that's really the critical thing for them. So I think that's one of the... is making sure that parents are

accessing reliable information because the first place they go is the internet.

- Dr. Joanne Gerenser: And then obviously as the kids get older, they have big struggles with continuing to access supports and services. You know, there's not a lot of evidence... Or I shouldn't say evidence. There's not a lot of research on what programs should look like for 15 year olds and 19 year olds and 25 year olds. So making sure that we're accessing the right supports and services, I think is a real struggle. And it's a struggle by the way for both ends of the spectrum. You know, if you're on the highest end of the spectrum, often your kids are in general education and they're studying for these exams, et cetera. And they're not accessing the critical social supports they need, so they graduate high school and struggle. But if you're on the more severe end of the spectrum, there are really, really limited programs once you age out of school programs. It varies so considerably from state to state.
  - Mary Barbera: Yeah. And county to county, and school district to school district, and a lot of it, I think a lot of the success is really just how hard a parent's gonna push. And so there's that whole thing too.
  - Mary Barbera: Okay. So, I wanted to talk to you about some ideas. A lot of my focus... I have two online courses. I have a toddler course and I have a verbal behavior bundle. And that's more for parents and professionals dealing with, you know, five and above; and then the toddler preschool or courses for the little guys. And I know you came to present in Berks County back in like 2000, 2001. If I would've done the math earlier, I could've figured out the exact date. Cause I remember Lucas was about four years of age and he is now 23.
  - Mary Barbera: And you came to present and I was going to take you out to dinner, so I thought I would bring you to my home and have you do like a quick 15 minute look at Lucas. And I remember taking you down the basement. He was running around and the one piece of advice I remember, I probably wouldn't have been remembered you being in my house, but you said, like, get rid of the spill proof sippy cup and that was really key information. And because... and explain why you recommend that. Because I really took that to heart. And you know, I've done video blogs on getting rid of bottles and pacifiers and spill proof sippy cups and... because a lot of our kids are, and I have video blogs on picky eating and bonus videos and all kinds of things because I do think that there's a lot of similarities between eating, drinking, sucking problems and talking problems.

- Dr. Joanne Gerenser: No, absolutely. I mean, so this is an interesting concept because this is one of the discussions I have with behavior analysts. We as speech pathologists have taken entire courses on speech development and we don't know, we don't agree all the time, but it's a very scientific literature we have. And one of the things we learn is that speech is what's called an overlaid function. Our tongue and our vellum and those are actually gesticulate as they're designed to eat, right? So that's why you see families when they have a baby, they go from the bottle or liquids to mushy foods. You don't just give a a two year old a piece of steak necessarily. Right?
- Dr. Joanne Gerenser: But the progression that we go through when we eat is what helps our articulators so that they turned into articulators, so that we're able to do... there's a reason why certain sounds come in later. We lose teeth. So you want to make sure your S sound is developed before you lose your front teeth. Otherwise you're going to end up having an a lisp. So anyhow, when kids stay on the bottle too long or the sippy cup, which is in essence just the glorified bottle, they're not developing the right oral motor behaviors that lead to more functional speech. So I think it's really important. It's hard to get, but this is why, by the way, people are now recommending getting rid of the bottle at age one, right? Because you just want to make sure that you're not behind the eight ball when you're starting to develop speech.
  - Mary Barbera: And also pacifiers, um, are a big thing. And a lot of people don't think they can get rid of the pacifier because of severe problem behaviors. And they basically plug up kids to keep them calm and not screaming, but at the same time they're plugging up their kid who is becoming more and more speech delayed. And so I'm like a big proponent and Lucas took a pacifier, like, you know, really a lot. And... but I didn't know then, but now ever since that little piece of advice two decades ago that you gave me about spill proof sippy cups, that they were no bet better than a bottle. I was like, Oh, okay. So now I'm a big proponent of straw drinking, open cup drinking, and moving kids along, not just for drinking but also for eating. You know, the mushy foods, you know, some kids will eat corn chips and Cheerios and that sort of thing.
  - Mary Barbera: I remember interviewing this mom once and, and I was trying to get the bottom of it. I had seen this kid eat crunchy foods, so I'm like, okay, how's his eating? You know, and, and she's, you know, like, well he'll eat french fries and corn chips and you know, the white, white crunchy diet. And I was like, okay, any fruits or vegetables, protein? She's like, this kid was like six years of age, and she said only in the baby food. And she had just gotten done telling me like she was, you know, very financially strapped

and she, you know, the kid had tons of problems. And I was like, Oh. And I was trying not to be like, baby food for a six year old who can chew and swallow? But I was just like, Oh, okay, like how many jars of baby food? She's like 52 jars a week.

Dr. Joanne Gerenser: Because he's six.

Mary Barbera: But nobody is going to ask that question, Is your child eating baby food? And I'm not saying, you know, she needed help. She didn't need people blaming her for not, you know, being able to control her kid to feed them real food. But you know, chewing and swallowing mushy foods, crunchy foods, the E sound with the biting and that, you know, there's just so much involved with the oral motor system that I think behavioral analysts are like, well, you know, I don't like this or that's not evidence based or whatever. And maybe it is and maybe it isn't.

- Dr. Joanne Gerenser: I mean, I would argue, which I love to do, is you aren't looking at that evidence, right? See if you don't have a dialogue with each other, I can't read all the behavior analyst literature. You know, if I'm, when I was in graduate school, I was reading all the speech-language literature, so we can't read each other's extensive literature. We depend on each other to give us that information. So there's a tremendous amount of scientific evidence behind things like speech development and super segmental aspects of speech, lexical processing. There's a very, very broad literature on that. That's very scientific.
- Dr. Joanne Gerenser: But we have to be able to have conversations so that we can decide what we want to include in our interventions. If we don't, we just cut it out. If I don't talk to the gals, I'm missing some really important information. You know, it's interesting, right? Because you know, I've been here now going on 38 years. The behavior analysis that I do today doesn't look at all like what we did 38 years ago. We're so much better and so much more advanced and so you have to stay on top of things, you know? And again, it requires a dialogue.
  - Mary Barbera: Yeah. Which is just excellent that you have such a wide background and such a history with ABA and speech and language pathology. And I hope that, you know, what you're saying here resonates with people because you have been, you know, leading the way and really trying to bridge this gap and make things better for kids with autism. So that is just, I thank you for your service to our field to help us.
  - Mary Barbera: Okay, so we're good. We're about to wrap up things, but part of my podcast goals are for not to just give strategies, but to help parents and

	professionals be less stressed and lead happier lives. So I'm wondering if you have any self-care or any tips for us to reduce stress and be happier?
Dr. Joanne Gerenser:	Honestly, I think that the number one if you are not supportive of getting applied behavior analysis, if somebody has convinced you it's not a good thing; reconsider that because it's through behavior analysis that we are able to really get kids to be more independent. I mean it's interesting we looked at how independent our kids are, and independence means that they can do it in the absence of an adult. If there is one thing that we can do to help parents lead less stressful lives, it's to create opportunities for their kids to be independent for 20, 30, 40 minutes so that a parent can get a breath. I mean that's really, for me, the most important thing is that's really what we focus on.
Dr. Joanne Gerenser:	You know, we designed a new building here for our teenagers that has things like a movie theater in it and an apartment. And the reason is that we want to teach all of our kids to be able to sit through a full movie, even if they're not watching the movie, even if they're watching their iPhone, but at least their parents can go to the movies if they don't have somebody to watch their son or daughter.
Dr. Joanne Gerenser:	The other thing I strongly recommend is look into support systems. You know, we're creating these, we just met with a children's museum yesterday to create, so they're going to close the exhibits every Saturday morning so that families who are nervous about bringing their very challenged child with autism to the children's museum on a given day when there's hundreds of kids there, will be able to come on Saturday morning and while their kids are playing in a very protected, safe environment, the parents can sit and relax and talk to each other and create a support network. So I think independence, push for that, push for it on your child's IEP, push for it in your child's day program. But that's really the most important thing that will help families be less stressed.
Mary Barbera:	Yeah, I totally agree. I, my whole thing is I want kids to reach their fullest potential, which is be as safe possible, as independent as possible, and as happy as possible. And so I'm very much against like tit for tat programming and you know, I now have a 23 year old with moderate severe autism. So, you know, there is a point, not a switch point. You have to be focusing on things from the beginning to increase their independence and not to have them require I mean, he requires 24/7 supervision, but I can leave him for 20 minutes while I get a shower or something like that. Like it's not that's a big deal. Like you said, even if the child goes on and needs a lot of supervision, that late supervision without them doing anything to injure themselves to leave the house,

	you know, it does reduce stress. So if you're not there yet, like you said, like that needs to be on an IEP that needs to be worked on, not just language skills.
Dr. Joanne Gerenser:	Right. Yeah. That's great. I mean, I think that's really critical to me is, you know, that's one of the issues. So we started an organization a few years back called Council on Autism Service Providers and we're this nationally based provider association now. And one of the things that we're trying to develop are these outcome measures for teens and young adults so that parents can understand they should be working on this, they should be working on independence, you know, my child should be able to function outside of a one to one; those kinds of things. So I think independence to me is the number one issue.
Mary Barbera:	Yeah, I think that's great. So ABA for SLPs is your book, and is that available on Amazon or how do people find that book?
Dr. Joanne Gerenser:	Yup. It's on Amazon. It's also available at Brooks publishing, which is the publishers. So it's readily available.
Mary Barbera:	And we'll link it in the show notes. Any other way for people to follow you or your work or just through the book?
Dr. Joanne Gerenser:	Well the book is there, but you know, you can certainly jump onto our website. We do a lot of stuff on our website. We also have free webinars that we offer to families on various topics. We just did one on strategies for traveling with your own child with significant autism. So the website is www.eden2.org and that's a great way to kind of stay in touch.
Mary Barbera:	Okay. And is it the numeral two?
Dr. Joanne Gerenser:	Yes.
Mary Barbera:	Okay, so it's Eden, the numeral two, .com. Okay. I will put that in the show notes.
Dr. Joanne Gerenser:	Oh, .org. That's important.
Mary Barbera:	We'll put that in the show notes. This has been a great interview. I really enjoyed getting to know you better. You've been a real hero of mine with your strategies and your work. And so I really thank you for taking the time out to chat with me today. And for anybody listening that would like more information about how to find out if my online programs are a

great fit for you, whether a parent or professional, you can go to a free<br/>online workshop at marybarbara.com/workshop.Mary Barbera:So thanks again Joanne. I appreciate your time and I look forward to<br/>reading your book. Maybe we'll have you on again in a little while after I<br/>read it for some more of your wisdom. So thanks so much. Have a great<br/>day.Dr. Joanne Gerenser:Thanks very much.<br/>Thanks for listening to the Turn Autism Around podcast with Dr. Mary<br/>Barbera. For more information, visit Marybarbera.com.