**RELATIONSHIP OF SEVERITY OF BEHAVIOUR PROBLEMS TO IMPACT ON QUALITY OF LIFE: A PILOT STUDY**

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**Introduction and Objectives**

Individuals with Autism Spectrum Disorder (ASD) are at increased risk for the development of challenging behaviors including but not limited to aggression and self-injurious behaviours (Feldman, Atkinson, Foti-Gervais, & Condillac, 2004). Applied Behavior Analysis (ABA) is the current treatment of choice for reducing challenging behaviors and increasing adaptive skills within the given population (Leblanc, Richardson & McIntosh, 2005). Community-based ABA programs often use a “mediator-model” to treat challenging behaviors, where a behaviour analyst develops intervention strategies and provides treatment plans to be implemented by natural caregivers (Gambrill, 2012). These government-funded programs have a common need for evaluative measures that are (a) specific to ABA-based interventions, (b) go beyond numeric data to determine the degree to which behaviour changes are meaningful to the individual and caregivers, and (c) to determine the impact of behaviour changes on life quality. Condillac (2009) designed a system of program evaluation measures to meet the preceding needs. These measures are designed to (a) track ABA assessment and intervention techniques and behavioural outcomes, (b) measure the perceived severity of problem behaviour by caregivers, and (c) determine the impact of problem behaviour on the quality of life of the individual and those in their environment. This poster will focus on the development of the Impact on Quality of Life Scale (IQOL; Condillac, 2009), which measures the degree to which the problem behavior adversely impacts the individual’s quality of life and that of others in their environment. Furthermore, this poster will focus on the relationship between the IQOL and the Target Behaviour Severity Scale (TBSS), which is designed to measure problem behaviour across the dimensions of frequency, intensity, duration, and discrimination.

**Method**

For this poster, the TBSS and IQOL were piloted with the caregivers of 25 individuals with ASD/DD who were receiving community based ABA treatment for problem behaviour. Behaviour Consultants working with the parents administered the measure. The reliability, face validity, and useability of the IQOL were measured and will be presented, along with results of exploratory analyses examining the relationship of IQOL scored and scores of the TBSS.

**Results**

Preliminary results from the 25 caregivers suggest that the I-QOL is user friendly, focuses on areas of quality of life that are impacted by problem behaviour, and has acceptable internal consistency (.871 for individual, .950 for caregiver, and .949 for the full scale). The correlations between the TBSS total score and IQOL scales and total showed a modest positive relationship (.53-.67, p<.01) and accounts for between 28%-45% of the variance, suggesting that the IQOL and TBSS are measuring overlapping but relatively unique concepts.

**Discussion/Conclusion**

These results provide support for further research and field-testing of the IQOL and TBSS within a prospective program evaluation pilot.

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