



Understanding the Professionals Supporting Your Child

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A clear, parent-friendly guide to the professionals, therapies, and approaches that support children with disabilities and developmental differences — so families can make informed, confident decisions.

Introduction

Families entering the world of disability and developmental services are often introduced to dozens of professionals, therapies, acronyms, recommendations, and opinions all at once. This guide was created to help families better understand the landscape of support available to their children.

Who They Are

Learn about the different professionals and what they actually do

Their Training

Understand the education and credentials behind each role

Their Scope

Know what each professional can and cannot help with

Their Philosophy

Explore the different approaches that shape therapy

- ① The goal is not to rank professions against one another. Children benefit most when skilled professionals work collaboratively, ethically, and with respect for the child's communication, autonomy, regulation, and development. Parents deserve clear, informed information about their options.

Speech-Language Pathologist (SLP)

SLPs specialize in communication — including spoken language, gestures, signs, AAC devices, and all other forms of communication access.



Education & Training

- Master's degree in speech-language pathology
- Graduate clinical training
- Supervised clinical fellowship
- State licensure
- Continuing education every 2–3 years

Speech & Language

Speech development, language delays and disorders, apraxia, fluency/stuttering

Communication Access

Autism communication support, AAC devices, social communication

Feeding & Literacy

Feeding and swallowing support, literacy-related language skills

Common Settings

Schools, hospitals, private clinics, early intervention, outpatient therapy, home-based services

Occupational Therapist (OT)

OTs focus on helping children participate more fully in daily life activities and routines — from getting dressed to handwriting to managing sensory experiences.

Education & Training

- Master's or doctoral degree in occupational therapy
- Graduate clinical training
- Clinical fieldwork rotations
- State licensure
- Continuing education every 2–3 years



Motor Skills

Fine motor skills,
handwriting, adaptive
equipment

Sensory & Regulation

Sensory processing,
regulation support, sensory
processing needs

Daily Living

Activities of daily living,
self-care skills, visual-
motor difficulties

Common Settings

Schools, clinics, hospitals, early intervention, outpatient rehabilitation

Physical Therapist (PT)

Physical therapists support children's movement, mobility, and physical development — helping them gain strength, coordination, and independence in how they move through the world.

Education & Training

- Doctorate in physical therapy
- Graduate clinical work
- Clinical rotations
- State licensure
- Continuing education every 1–2 years



Movement & Mobility

Walking, balance, coordination, gross motor development

Strength & Posture

Strength, posture, core stability

Equipment & Settings

Mobility equipment, hospitals, schools, outpatient clinics, rehabilitation, early intervention, in-home services

Common Settings

Hospitals, schools, outpatient clinics, rehabilitation settings, early intervention, in-home services

Infant Educator / Early Intervention Developmental Specialist

These providers often focus on helping families support development within everyday routines and play. Education requirements for this profession vary between states.



Background May Include

- Early childhood education
- Child development
- Special education
- Developmental therapy

What They Help With

- Infant/toddler development
- Parent coaching
- Play skills
- Routines-based learning
- Developmental milestones

Common Settings

- Early intervention programs
- Home visits
- Childcare settings
- Community programs

Developmental Pediatrician

Developmental pediatricians are medical doctors with specialized training in how children grow, develop, and behave. They are often involved in formal diagnostic evaluations.

Education & Training

- Medical degree (MD or DO)
- Pediatric residency
- Fellowship in developmental-behavioral pediatrics



Evaluations

- Autism evaluations
- ADHD evaluations
- Developmental delays
- Developmental monitoring

Medical Support

- Medication management when appropriate

Common Settings

- Hospitals
- Developmental clinics
- Outpatient offices

Psychologist

Psychologists may provide evaluations, diagnostic testing, therapy, counseling, behavioral and emotional support, parent coaching, and cognitive or learning assessments.

Neuropsychologists often focus extensively on cognitive, developmental, learning, and brain-behavior assessments.

Education & Training

- Doctoral degree (PhD or PsyD)
- Clinical internship and supervised training
- State licensure
- Ongoing continuing education



Evaluations & Testing

- Autism and ADHD evaluations
- Cognitive testing and learning disabilities

Emotional & Behavioral Health

- Emotional and behavioral health
- Anxiety, depression, executive functioning

Support & Settings

- Therapy, counseling, parent coaching

Special Education Teacher

Special education teachers work within school settings to provide individualized academic instruction and support for students with disabilities, ensuring access to appropriate educational environments.



Education & Training

- Bachelor's or master's degree in education or special education
- State teaching license

Academic Support

- Academic instruction
- Classroom accommodations

IEP & Planning

- IEP implementation
- individualized education plans

Settings

- Public schools
- special education classrooms
- resource rooms
- inclusive classrooms

Board Certified Behavior Analyst (BCBA)

BCBAs conduct behavioral assessments, design behavior intervention plans, support skill acquisition, coach caregivers, and modify environments. They supervise RBTs and behavior technicians.

BCBA — Education & Training

- Master's degree
- Coursework in behavior analysis
- Supervised fieldwork
- Certification through the Behavior Analyst Certification Board



Behavior & Skills

- Behavior assessment
- skill-building programs
- reducing challenging behaviors

ABA Therapy

- Applied behavior analysis
- discrete trial training
- naturalistic teaching

Settings

- Clinics
- homes
- schools
- community settings

SECTION 1: THE PROFESSIONALS

Registered Behavior Technician (RBT)

Education & Training

- High school diploma minimum
- 40-hour training course
- Competency assessment
- Ongoing supervision by BCBA



What They Help With

- implementing behavior plans
- practicing skills designed by supervising clinicians
- data collection

Settings

- Clinics
- homes
- schools
- community settings

Important Notes

- RBTs do not independently design treatment plans
- They are not required to have education in child development.

Professional Comparison Table

A quick-reference overview of each professional's typical education, main focus, and what they may assess or diagnose.

Professional	Typical Education	Main Focus	Examples of What They May Assess/Diagnose
SLP	Master's degree	Speech, language, AAC, feeding	Speech sound disorders, language delays/disorders, apraxia, fluency, voice, social communication, swallowing
OT	Master's/doctorate	Fine motor, sensory, daily living, regulation	Fine motor delays, visual-motor difficulties, sensory processing needs, daily living challenges
PT	Doctorate	Mobility, gross motor, strength, balance	Gross motor delays, mobility limitations, balance/coordination, strength/postural concerns
Infant Educator	Varies	Early development and family coaching	Developmental concerns and milestone delays; usually does not provide formal medical diagnoses
Devel. Pediatrician	MD/DO + specialty training	Developmental and behavioral medical care	Autism, ADHD, developmental delay, intellectual disability, genetic/developmental syndromes
Psychologist	Doctorate	Cognitive, emotional, developmental, behavioral assessment/therapy	Autism, ADHD, anxiety, depression, learning disabilities, intellectual disability, cognitive/executive functioning
BCBA	Master's + certification	Behavior assessment and intervention	Behavioral patterns, skill deficits, environmental factors; does not provide medical/developmental diagnoses
RBT	High school + training	Implements behavior plans	Does not diagnose; implements plans under BCBA supervision
Special Education Teacher	Bachelor's / master's	Academic instruction and school supports	Educational needs, academic skill levels, IEP progress; does not provide medical diagnoses

i Important note: Diagnosis can mean different things in different settings. A medical diagnosis, educational eligibility determination, therapy evaluation, and behavioral assessment are not all the same thing. Families can ask providers: *"What are you qualified to evaluate or diagnose, and what would we need to be referred to another professional?"*

Who Helps With What?

Use this reference to understand which professionals are commonly involved for different concerns. Many situations involve more than one professional working together.

Concern	Professionals Commonly Involved
Speech or language delay	SLP, infant educator/developmental specialist
Speech sound disorder	SLP
Language disorder	SLP
AAC device or communication system	SLP
Autism evaluation	Developmental pediatrician, psychologist
ADHD evaluation/support	Developmental pediatrician, psychologist, OT, special education teacher
Feeding difficulties	SLP, OT, GI specialist
Walking/balance	PT
Gross motor delay	PT
Low muscle tone, strength, or posture concerns	PT, OT
Fine motor difficulties	OT
Sensory processing or sensory regulation needs	OT
Executive functioning difficulties	Psychologist/neuropsychologist, OT, SLP, special education teacher
Social communication or social interaction differences	SLP, psychologist, special education teacher
Early developmental delays, birth–3	Infant educator/developmental specialist, SLP, OT, PT
School accommodations	Special education teacher, school psychologist
Emotional regulation support	OT, psychologist, mental health therapist
Behavioral safety concerns	BCBA + RBTs

SECTION 4

Therapy Approaches & Philosophies

- ❏ **Important Note:** Therapy approaches and professional titles are not the same thing. A child may see an SLP, OT, psychologist, educator, or behavior provider — and each professional may use different philosophies or methods. Some providers may be more structured and adult-directed, while others may be more child-led, developmental, sensory-focused, relationship-based, or neurodiversity-affirming.

Families can ask not only, *"What is your profession?"* but also, *"How do you approach therapy?"* Understanding the philosophy behind a provider's practice is just as important as understanding their credentials.



APPROACH

Behavioral Approaches

Commonly Seen In

ABA programs, behavior therapy, some autism intervention programs

Often Emphasize

- Learning principles and reinforcement
- Measurable skill development
- Structured teaching
- Behavior and environmental analysis

May Look Like

- Repetition and practice
- Data collection
- Skill breakdowns
- Structured or naturalistic teaching

Questions Families Can Ask

- How is communication supported?
- How is distress differentiated from behavior?
- How is autonomy respected?
- How are goals selected?



APPROACH

Developmental & Relationship-Based Approaches

Commonly Seen In

DIR/Floortime, early intervention, some speech therapy, some occupational therapy, some play-based autism supports

Often Emphasize

- Emotional connection and regulation
- Child-led interaction
- Developmental readiness
- Shared engagement

May Look Like

- Play routines
- Following the child's interests
- Co-regulation
- Natural interaction



APPROACH

Neurodiversity-Affirming Approaches

Neurodiversity-affirming care is not one specific therapy program. It is a philosophy that can shape how many different professionals support children — across speech therapy, occupational therapy, psychology, education, social work, and some behavior providers.



Communication Access

Ensuring children always have access to communication in the way that works for them



Autonomy

Respecting the child's choices, preferences, and right to participate in decisions



Accommodations

Modifying environments and expectations to support participation



Reducing Shame

Honoring sensory needs and supporting quality of life without stigma

APPROACH

Sensory & Regulation-Focused Approaches

Commonly Seen In

Occupational therapy, trauma-informed care, some speech therapy, early intervention, mental health therapy



Often Emphasize

Nervous System Regulation

Supporting the child's ability to feel calm and ready to engage

Sensory Processing

Understanding how sensory input affects the child's experience

Environment Supports

Modifying spaces to reduce overwhelm and increase safety

Emotional Safety

Creating conditions where children feel secure enough to learn

Blending Approaches & What Families May Notice

Many providers blend multiple approaches together. No single chart can fully capture the complexity of a provider's philosophy or clinical style. Families can ask providers: *How do you approach learning? How do you support communication? How do you respond to distress? How do you incorporate play, autonomy, and regulation into therapy?*

Some Approaches May Emphasize...	Others May Emphasize...
Adult-directed instruction	Child-led interaction
Repetition and practice	Natural interaction
Compliance with tasks	Autonomy and assent
Structured teaching	Play-based learning
Measurable behavior change	Emotional connection and regulation
Therapist-led goals	Collaborative or interest-led goals

Green Flags and Red Flags

When evaluating a provider or program, these signals can help families assess whether an approach aligns with their child's needs and their family's values.

● Green Flags

- "We collaborate with other professionals."
- "Your child always has access to communication."
- "We explain our reasoning and goals clearly."
- "We respect your child's autonomy and regulation."
- "We adjust therapy based on the child's needs."
- "Families are part of decision-making."

● Red Flags

- "We can treat everything."
- Discouraging collaboration with other providers
- Removing communication access
- Using regulation needs (like swings or comfort items) as rewards
- Expecting constant compliance without considering communication, pain, sensory needs, or regulation
- Using fear-based pressure to increase therapy hours

Questions Families Can Ask Providers

These questions can help families understand a provider's qualifications, approach, and fit for their child — before or during services.

1

Credentials

What degree and credential do you hold?

2

Specialization

What population do you specialize in?

3

Collaboration

How do you collaborate with other professionals?

4

Communication

How do you support communication access?

5

Distress Response

How do you respond to distress or dysregulation?

6

Family Involvement

What does family involvement look like?

7

Scope of Practice

What happens if something falls outside your scope?

8

Individualization

How do you individualize therapy?

9

Progress

How do you measure progress?

Final Reminder

No single professional, therapy philosophy, or approach is the right fit for every child or family.

There are many different options for support, and families deserve to understand those options clearly. If a particular therapist, setting, or approach does not feel aligned with your child's needs, your family's values, or the way your child learns best, it is okay to ask questions, seek another perspective, or find a different fit.

- ✔ The strongest support systems are **collaborative, communication-supportive, individualized, and responsive to the child as a whole person.**

Ask Questions

You have the right to understand every recommendation made for your child

Seek Perspectives

Getting a second opinion or consulting multiple professionals is always appropriate

Find the Right Fit

It is okay to change providers if an approach does not align with your child and family

References & Professional Organizations

The following organizations, licensing boards, professional associations, educational resources, and clinical sources were referenced during the creation of this guide. Because licensing requirements, credentialing pathways, and professional scopes can vary by state and setting, families are encouraged to verify current information directly through state licensing boards and professional organizations.

Speech-Language Pathology	American Speech-Language-Hearing Association (ASHA)
Occupational Therapy	National Board for Certification in Occupational Therapy (NBCOT) American Occupational Therapy Association (AOTA)
Physical Therapy	American Physical Therapy Association (APTA) Federation of State Boards of Physical Therapy (FSBPT)
Psychology & Neuropsychology	American Psychological Association (APA) American Academy of Clinical Neuropsychology (AACN)
Developmental Pediatrics	American Academy of Pediatrics (AAP) American Board of Pediatrics (ABP)
Behavior Analysis	Behavior Analyst Certification Board (BACB)
Special Education & Early Intervention	Center for Parent Information and Resources Early Childhood Technical Assistance Center (ECTA) Individuals with Disabilities Education Act (IDEA)
Therapy Approaches & Developmental Models	Interdisciplinary Council on Development and Learning (DIR/Floortime)

Additional Notes

This guide is intended for educational purposes only and is not medical, legal, or therapeutic advice. Information may vary by state, employer, credential, and clinical setting.