Interventions for Autistic Children and Youth:

What are they? What do they target? Where can I access these?

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Speech-Language Pathologist

Masters of Education (Curriculum)

Board Certified Behavior Analyst (BCBA®)

Trained/Certified in:

- Assistive Devices Program (AAC)
- The Picture Exchange Communication System (PECS)
- Paediatric Feeding Disorders

Conflict of Interest

- Salaried employee
- No other conflicts



- Important skills for children and youth for positive experiences and transitions
- Empirical support and Evidence-Based Practice
- Treatments and Programs by Type
 - Intervention Description
 - Specific Skills Targeted
 - Current Level of Evidence
 - Access to the Treatment/Program
- Making Decisions





Skills for Children and Youth: - 6 yrs to 18 yrs



What Skills are Important?

Sustained Attention & Concentration	Learning & Problem Solving	Activities of Daily Living (ADLs)	Motor Coordination
Fine & Gross Motor skills	Comprehension & Understanding of Language	Expressive Language (any mode)	Communication skills (any mode)
Reading and Written language	Social Skills (behaviour & communication)	Self-Management skills (IADLs)	Hobbies & leisure skills
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Empirical Support and Evidence-Based Practice



What is Empirical Support?

Empirical Support means:

research studies

of the highest quality

across various places

with many individuals that match your child



Evidence-Based Practice in Clinical Services

ABA, OT, and SLP

Evidence Based Practice includes the equal integration of:

- (a) external scientific evidence (EST), <u>and</u>
- (b) clinical expertise/expert opinion, <u>and</u>

(c) client/patient/caregiver perspectives/values, <u>and</u>

(d) Internal evidence (data)

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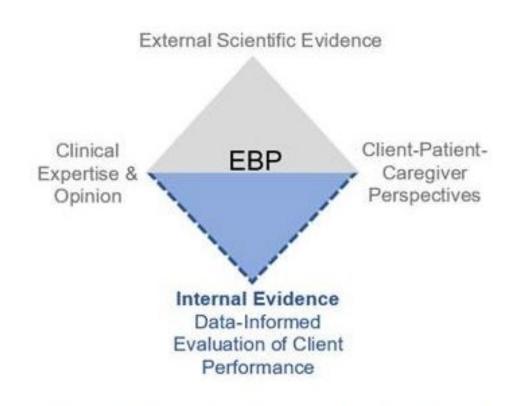


Figure 1: Evidence-Based Practice: Triangle to Diamond

Ratings of Effectiveness Table 1 - Different Terminology Used in Different Sources, ONTABA

EVIDENCE-BASED	EMERGING	NOT EVIDENCE BASED			
Good Evidence Showing Effective	Some (weaker) Positive Evidence	Insufficient Evidence To Inform Decision- Making	Good Evidence Showing Ineffective /Harmful		
(Well) Established	Emerging	Unestablished	Ineffective		
Empirically validated	Evidence informed		Not recommended		
Empirically supported treatment	Probably efficacious				
	Practices with some support		Non-evidence based		
Definitely Use	Use Only with Caution	Do Not Use	Definitely Do Not Use		



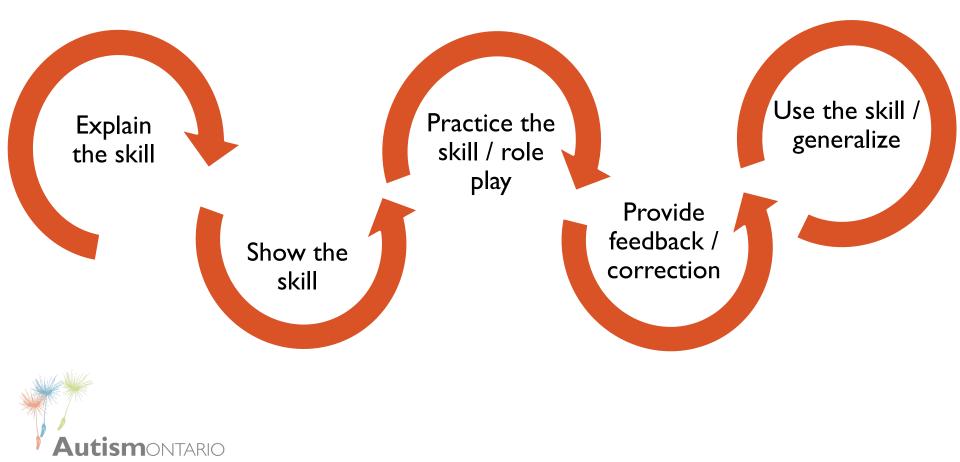
Interventions and Commercially Available Programs for:

- Foundational Family Services
- Core Clinical Services
- Privately-funded



Intervention Pathways

Direct teaching interventions – Behaviour Skills Training (BST) approach



Direct Therapy Services

There are different types of services, interventions, and/or treatments provided by regulated health professionals.

- Assessment services
- I:I treatment services
- Small group services
- Consultative and/or collaboration services



Direct Therapy Services

These are services provided by a regulated or credentialed health professional:

- applied behaviour analysis (BCBA)
- speech-language pathology (SLP)
- occupational therapy (OT)
- mental health professional (Psychotherapist)

These may be private therapy services and are also eligible under Core services in the OAP.



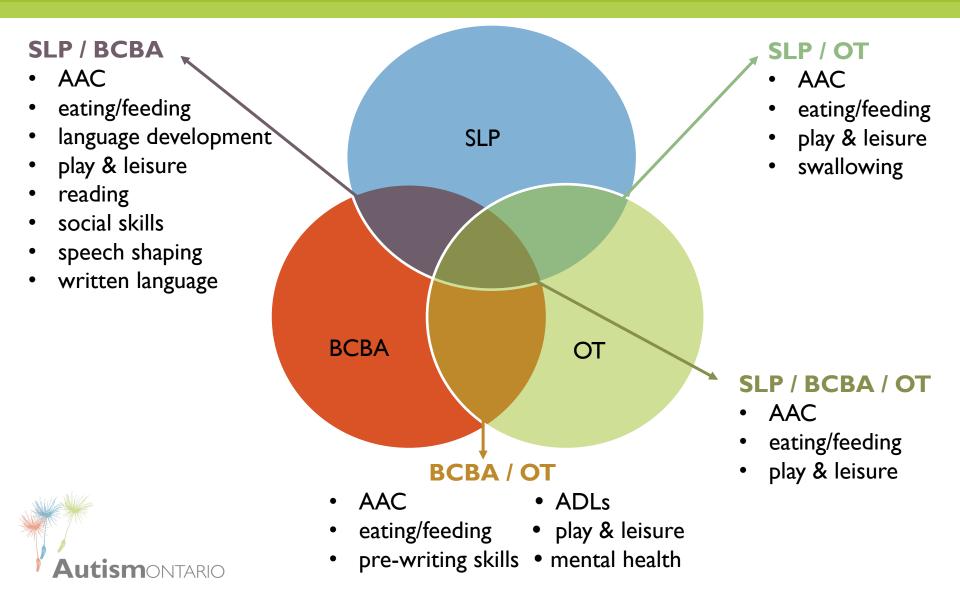
Direct Therapy Services

The services chosen/provided may vary depending on the individual and the goals. For this presentation we will focus on:

- Services for children and youth who are exhibiting challenges in skills that are necessary for independence
- Typically directed at <u>school-aged children</u> (6 years 18 years)
- Can be I: I or small group (as appropriate)
- Can be delivered by a BCBA, OT, SLP, and/or Psychotherapist/mental health professional



Overlap of Services



Applied Behaviour Analysis

- ABA services are delivered by credentialed individuals, typically within a tiered model
 - Board Certified Behavior Analysts[®] (BCBA)
 - Board Certified Assistant Behavior Analysts[®] (BCaBA)
 - Registered Behavior Technician[®] (RBT)
- RBTs or ABA therapists deliver the treatment, which is supervised by BCaBAs and BCBAs





- Services are typically grouped into two different models depending on the intensity of intervention
- *Focused ABA
 - 15 25 hours
 - Generally, I to 2 goals are targeted only
- Comprehensive ABA (also called EIBI, IBI)
 - 25+ hours
 - 15+ goals are targeted across all domains of functioning

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Intensive ABA

- Comprehensive or Intensive Applied Behaviour Analysis (ABA)
 - EFL Essentials for Living (to adulthood)
 - PEAK Relational Training System (to 8 years of age)



Focused ABA

- Fewer goals and less hours per week, generally
- Can use the same tools as used in Intensive ABA
 Intensity per goal is less
- Often used to <u>increase</u> skills within the areas of:
 - Activities of Daily Living (ADLs) dressing, eating, sleeping, toileting
 - Instrumental Activities of Daily Living (IADLs) chores, community activities, transit training, etc.
- Or to <u>decrease</u> interfering or self-injurious behaviours (SIB), and/or to address mental health needs



ABA Services

Treatment	Good Evidence	Emerging	Not Yet Supported	
Comprehensive or Intensive ABA	Х			
Focused ABA	Х			
Activities of Daily Living (ADLs)–for behavioural approaches	Х			
Augmentative and Alternative Communication (AAC)	X - PECS	X - SGDs		
Essentials for Living	Х			
Instrumental Activities of Daily Living (IADLs)	Х			
PEAK	Х			

Occupational Therapy

- OT has research support for the treatment of autism with respect to specific motor skill acquisition
- Occupational therapists help people to:
 - learn new ways of doing things
 - regain skills and develop new ones
 - use materials or equipment that makes life easier or
 - adapt their environment to work better for them



Occupational Therapy

Services are typically:

- I:l or group
- Generally, I 3 hours per week
 - I to 2 goals are targeted only
 - Specific skill building small groups (e.g., handwriting/printing, activities of daily living, instrumental activities of daily living, etc.)





Treatment	Good Evidence	Emerging	Not Yet Supported
OT Therapy	X	Х	X
Activities of Daily Living (ADLs)	Х		
Ayres Sensory Integration		Х	
Handwriting (Print / Cursive) - Not a 'program' for handwriting	Х		
Instrumental Activities of Daily Living (IADLs)	Х		
Sensory Diets		Х	X

Speech-Language Pathology

- SLP has a body of research support in very specific areas for the treatment of children with ASD
- SLP is a discipline which focuses on assessing and treating speech, language, communication delays or disorders, and social skills, as well as swallowing, voice, and dysfluency/stuttering
- I:I direct therapy
- Group therapy





Treatment	Good Evidence	Emerging	Not Yet Supported
SLP Therapy	Х	Х	Х
Augmentative & Alternative Communication (AAC)	Х		Х
ESI / SCERTS	Х		
JASPER	Х		
PRT			Х
PROMPT Therapy	Х	Х	Х
*Social Stories / Narratives			Х

Mental Health Services

- Mental health providers have a body of research support in specific areas for the treatment of children and youth with ASD
- Mental health services are provided by a few different professionals who focus on assessing and treating mental health challenges such as anxiety, attention difficulties, aversions, depression, mood fluctuations, and severe challenges such as suicidal thoughts and self-harm.
- I:I direct therapy
- group therapy



Mental Health Services

- Services can be provided by these professionals IF they have the education, training, and experience in mental health (i.e., have psychotherapy in their scope of practice).
 - Psychotherapists
 - Psychologists
 - Occupational Therapists
 - Social Workers
 - Behaviour Analysts
 - Nurses



Mental Health Services

Treatment	Good Evidence	Emerging	Not Yet Supported
Counselling	Х	Х	Х
ACT		X *	Х
Cognitive Behavioural Therapy	X		
Dialectical Behaviour Therapy	Х		
Facing Your Fears (CBT)	Х		
Mindfulness		X *	Х
Secret Agent Society	Х		

Social Skills Services

- Social skills training is an intervention area which can be provided by different professionals who have varied theoretical and applied backgrounds
- Behaviour analysts
- Speech-language pathologists



Social Skills

Treatment	Good Evidence	Emerging	Not Yet Supported
Behaviour Skills Training (BST)	Х		
Children's Friendship Training	X		
PEERS - Adolescents	X		
Secret Agent Society	Х		
Social Skills Groups	X	X	Х
*Social Stories / Narratives	Х		
Social Thinking			Х



Making Decisions: What do I do? How do I evaluate and problemsolve?



Where can I access more information?

- Parents face a difficult task in choosing treatment(s) for children with autism.
- A wide range of techniques are routinely used by speechlanguage pathologists, occupational therapists, and behaviour analysts with varying degrees of success and evidence.





What to look for in a provider:

- Credentials
- Contracts and fees
- Informed consent
- Scope of practice
- Competency
- Insurance
- Assessment
- Goal-setting

- Research-based
- Data review
- Open door policy
- Collaboration
- Family involvement
- Continuing education
- Supervision

See our Provider Checklist



How do I know if it's working?

- Intended outcomes
- Data or feedback
- Program components

Is this the right fit for my family?

- Child response
- Family response
- Benefits and risks

See our Provider Checklist



What are my next steps?

- Problem-solving
 - Is this treatment or program supported by research and matched to my child's areas of need?
 - Can it be changed to better meet my child's needs?
 - Is there a different treatment that might be better?
 - Are there different providers that may be a better match?

See our Provider Checklist



Is it the right intervention pathway?

Case Examples: Intervention Pathways

Child A

- Age: 18 months
- Diagnosis: ASD
- Brief Profile: Delayed social communication; emerging play skills
- Considerations: Father at home with child during the day; keen to be involved
- Recommendations:
 - > Parent-mediated NDBI program
 - Community play group (drop-in)

Child B

- Age: 4 ½ years
- Diagnosis: ASD
- Brief Profile: Displays a limited range of needs –play, group routines, toileting
- Considerations: Parents and child want to continue with full-time school
- Recommendations:
 - Focused ABA/Parent Training: 10 hours per week, in home
 - > School collaboration
 - > Group-based community play group

Child C

- Age: 6 1/2 years
- · Diagnosis: ASD, ADHD
- Brief Profile: several skill-deficits across multiple domains (communication, behaviour, adaptive skills); high rates of property destruction across environments, and self injurious behaviour
- Considerations: Two younger siblings at home, parents worried about safety of siblings
- Recommendations:
 - ➢ Comprehensive ABA 25-30 hours weekly: initially 1:1 in clinic → with plan to move towards small group and in-home ABA
 - Parent training

Holland Bloorview



Making Decisions: Where can I find additional information?



Feedback Survey

- Please answer each question in the survey
- The questions include items with:
 - A Likert scale (i.e., a 5-point scale with a range of responses)



- Selecting only one answer (single answer)
- Selecting all answers that might apply (multiple selections)
- Text boxes where you type your answer



References

Higginbotham, J., & Satchidanand, A. (2019). From triangle to diamond: Recognizing and using data to inform our evidence-based practice. ASHA Journals: Academy. <u>https://academy.pubs.asha.org/2019/04/from-triangle-todiamond-recognizing-and-using-data-to-inform-our-evidencebased-practice.</u>





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