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Michael Siller • Lindee Morgan Editors

Handbook of Parent-Implemented Interventions for Very Young Children with Autism



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Foreword

Over recent decades, there has been a dramatic increase in knowledge regarding the early course of autism spectrum disorders (ASD) as well as a proliferation of evidence-based interventions that have been shown to improve the lives of children with ASD and their families. Knowledge regarding the early course of ASD has informed early screening and detection efforts, such that several measures are available to conduct general population screening designed to identify children at high risk for ASD as early as 12 months of age. Moreover, understandings regarding the heterogeneity of the early course of ASD, with respect to both symptom variation and age at onset, have led to calls for repeated ASD screenings as well as the use of screeners to identify broader developmental and behavioral challenges. Further, there have been major advances in early diagnosis, both in relation to the availability of appropriate diagnostic instruments and the formal recognition that children who evidence impairment based on the presence of multiple ASD symptoms, but do not yet meet full criteria (i.e., may meet criteria for the new Zero to Three DC: 0-5 Early Atypical Autism Spectrum Disorder diagnosis), should receive existing evidence-supported treatments. In addition, there is now consensus that children as young as 12-14 months of age can meet full criteria for ASD. Finally, there has been a dramatic increase in the empirical evidence supporting naturalistic, developmental approaches to child ASD interventions that approach parents as collaborators and critical caring decisionmakers. Yet, consistent with expected lags from innovation to dissemination, systems of care have not kept pace with scientific understanding regarding screening, early diagnosis, or intervention science.

Drs. Siller and Morgan have compiled a unique and important edited volume that is likely to shorten the gap between scientific innovation and dissemination to systems of care serving diverse children with ASD and their families around the world. This book is rich in both conceptual frameworks and practical tools for providing family-centered, inclusive services in a wide range of early intervention service systems. Appropriate for clinicians and clinical researchers, the chapters are authored by the world's leading clinical scientists and innovators – the experts who have developed and evaluated new early identification and intervention methods and approaches for children with ASD and their families. Moreover, while

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grounded in both empirical evidence and strong conceptual models of development, family systems, adult learning, multiple aspects of diversity, and stigmatization, authors synthesize their lived experience as scientists and clinicians committed to supporting children with ASD and their families to offer specific practical suggestions on a broad range of topics central to effective practice and research, including the following: monitoring and discussing concerns with parents and other family members; using behavioral and motivational strategies to promote children's social communication; joining with parents as collaborators; motivating and empowering parents to become active, self-reflective, and engaged learners who are poised to address children's goals within the context of daily routines; and supporting family well-being (e.g., mindfulness and promoting social connection). In addition, this compilation goes further to address the use of technology (e.g., video feedback, telehealth) to advance dissemination efforts as well as offer specific recommendations for pursuing and evaluating implementation and dissemination work in early intervention systems of care. The range of empirically supported early screening and therapeutic interventions presented to enhance children's development and family well-being and the possibility of expanding evidence-based services in existing service networks as well as in underdeveloped, underresourced communities should offer a sense of optimism and hope for the field and for parents raising young children with ASD. With great pleasure, I encourage everyone involved in early identification and intervention services for young children with ASD to read this book!

Boston, MA, USA

Alice Carter

Preface

In 2006, the American Academy of Pediatrics published a groundbreaking policy statement on early identification of children with developmental delays. Specific recommendations for surveillance and screening of autism spectrum disorders (ASD) were published as clinical practice guidelines in 2007. According to these guidelines, all children (independent of known risk factors or parental concerns) should be screened for ASD using formal screening tests administered during pediatric well-child visits at 18 and 24 months. Given the heated debate between advocates and policy-makers about funding for early intervention services, these clinical practice guidelines underscored the need for rigorous early intervention research for tod-dlers, younger than 24 months, at "high risk" for ASD.

Between 2007 and 2010, Autism Speaks funded seven research studies, testing the efficacy of parent-mediated interventions for toddlers at "high risk" for ASD. Because this research was novel and aimed to chart new territory, the Autism Speaks Toddler Treatment Network (ASTTN) was formed to provide an infrastructure for ongoing communication between the key investigators of these seven research studies. From the beginning, the principal investigator of an eighth research study, funded through other sources, was invited to join the network. The ASTTN was initially codirected by Sally Rogers and Michael Siller and involved 26 investigators who met regularly during bimonthly conference calls and annual meetings. Since 2010, the ASTTN was opened to researchers beyond the initial network and continued to hold annual conferences, coordinated by a planning committee that was led, among others, by Lindee Morgan and Lauren Turner-Brown. Initially, the network focused primarily on methodological issues, including diagnostic inclusion criteria for toddlers, measures of treatment fidelity in parent-mediated interventions, shared baseline and outcome measures, and analytic techniques for identifying moderators and mediators of treatment efficacy.

Aside from these questions of research methodology, the ASTTN also provided a context to learn about the eight experimental, parent-mediated interventions that were being developed and tested across the network. Since the investigators of the ASTTN represented a range of different disciplines (e.g., early childhood education, clinical or developmental psychology, speech-language pathology, occupational therapy, and behavior

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analysis), we learned to speak and understand each other's terminology. Further, by discussing our experiences, we learned about the possibilities and challenges of implementing parent-mediated interventions to support families and promote learning in toddlers with autism. Most importantly, we witnessed an emerging consensus about the essential components of effective interventions for young children with autism. This emerging consensus was first articulated under the moniker of Naturalistic Developmental Behavioral Interventions (NDBI; Schreibman et al., 2015) and includes strategies such as child choice, environmental arrangement, natural reinforcement, balanced turn taking, contingent imitation, and broadening the child's attentional focus. The current volume is an attempt to present this consensus, as it relates specifically to parent-mediated interventions for young children with autism. Most of the chapters are authored by original or current members of the ASTTN.

Obviously, our pursuit of the essential components of parent-mediated interventions for young children with autism will continue in the future. As discussed in Chap. 1, any universal conclusions about the efficacy of parent-mediated interventions are complicated by the fact that a broad range of approaches has been developed and tested. At the same time, it is the heterogeneity of intervention approaches that gave rise to the emerging consensus that is presented in this volume.

Atlanta, GA, USA

Michael Siller Lindee Morgan

Reference

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Michael Siller

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Lindee Morgan

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