

## Translational Science and Effective Practice

### Conference Highlights

#### ABAI 2009 Autism Conference

January 22-24, 2010

Chicago, Illinois

*Review by Michelle Murdoch-Gibson*

The Association for Behaviour Analysis International held their 4th annual autism conference in Chicago Illinois in the end of January. The conference titled “Translational Science and Effective Practice” was a showcase of just that. While presenters shared their experimental methods and promising data sets, they illustrated the efficacy of their work with case study examples of real individual’s on the autism spectrum and their stories – from baseline to present day.

As the conference got underway, Dr Bob Remington of the University of Southampton spoke on “Early Intensive Behavioural Intervention and Family Psychological Adjustment”. While most early intensive behaviour intervention programs are designed to meet the needs of a young child with autism, Dr. Remington reminded delegates that such intensive treatment often impacts the child’s family as a whole - parents, siblings, step-families, grandparents etc. Dr Remington used three measures to rate family adjustment during engagement in an early intervention program. Standard measures were used to measure adjustment in terms of stress, anxiety and depression. While Dr Remington’s research indicated successful EIBI participants did not necessarily result in happier families, happier families did have a positive impact on the effectiveness of EIBI. To this end, Dr Remington suggests that parents’ commitment to the EIBI process should not be assumed but supported in order to facilitate success. Programs that include parent training, acceptance and commitment therapy (ACT) and increased therapist sensitivity to parent and family issues were suggested as impor-

tant additions to improve success rates of existing EIBI programs.

Dr Travis Thompson of the University of Minnesota presentation melded two distinct areas of literature, namely behaviour analysis and biology, in his address entitled Early Intensive Behaviour Intervention and Brain Development. Dr Thompson spoke of the importance of integrating these two fields to help better understand the conditions under which EIBI works best. Exploring success rates of participants who fall into two major subtypes of autism described by Dr Judith Miles as “complex autism” and “essential autism”, Dr Thompson suggests we must tailor make interventions based on these subtypes. Moving beyond the traditional thinking that all children with ASD can benefit from 40 hours a week of discrete trial training, Dr Thompson proposes we move forward towards varying intensity and types of interventions as we look to programming for specific subtypes of individuals with ASD.

Undoubtedly one of the most engaging and inspiring speakers of the conference was Dr. Glen Dunlap of the University of South Florida. By the time he had completed his address, the conference book store had sold out his recent publication Prevent-Teach-Reinforce. As he introduced his presentation entitled “A Standardized Approach for Individualizing School Based Interventions for Challenging Behaviours of Students with ASD”, Dr. Dunlap reminded conference delegates that “schools are the most prevalent and sizable resource available to all children with autism.” He went on to

caution “but this will not lead to positive outcomes for children who engage in problem behaviours.” Before revealing his intervention protocol, Dr. Dunlap urged attendees to look to prevention first. While so much time and resources are devoted to intervention, Dr Dunlap asks first that we invest in adequate environmental and communication supports in order to prevent these behaviours from ever occurring.

Prevent-Teach-Reinforce is a systematic structured process designed for schools that are supporting students who engage in problem behaviour. Key components of this approach include– identifying a team, setting goals, designing data collection, performing a functional behaviour analysis, intervention design and implementation and evaluation. Where Dr Dunlap’s approach differs from many others is in the goal setting. Rather than only looking to reduce a specified problem behaviour, the PRT protocol calls for additional goals to be set – one to increase an area of academic competency and another to improve an area of social competencies. It only makes sense that increased academic engagement and social skills will lead to a collateral decrease in problem behaviour.

As the conference closed, a key theme emerged. The importance of an individualized approach was clear. Treatment protocols designed not just with specific children in mind, but with specific families, specific brain biology and specific learning and communication styles will undoubtedly lead to greater success rates for individuals on the autism spectrum.

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