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A summarization of the study from AJMR:

Early Intensive Behavioral Intervention: Outcomes for Children With Autism and Their Parents After Two Years

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Background:

This study assessed the effects of Early Intensive Behavior Interventions (EIBI) for preschool children with autism in Southern England. EIBI is a highly structured and intensive teaching approach based on the principles of Applied Behavior Analysis (ABA). Children are taught a range of skills by trained therapists, who break down skills into small teachable units that are easily accessible for the learners. Prior to this study there has been strong research evidence suggesting that EIBI is effective for a wide variety of children with autism. However the majority of this evidence is based on data from America and prior to these findings there had been no data from a UK sample to support the efficacy of EIBI for use with preschool children with autism in the UK.

Purpose of Research:

The authors of this research designed this study to address three key questions:

- Can EIBI reduce the diagnostic symptoms associated with autism?
- Can EIBI have a positive impact on the language, cognitive and behavioral deficits associated with autism?
- Does EIBI contribute to increased family pressures?

Method:

Two groups of preschool children diagnosed with autism were recruited for this study. The first group of children consisted of 23 preschool children diagnosed with autism receiving EIBI for a period of two years. The second group consisted of 21 children diagnosed with autism receiving a standard educational provision from their local education authority for a period of two years. Assessments for both groups took place before, a year into, at the end, and two years after the research began.

Participants:

All children had received a diagnosis of autism and presented with no other medical or chronic illness. Children in both groups were aged between 30 months and 42 months and all lived in their family home.



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Measures:

A range of standardized tests was used to assess the children, including IQ test. Parents were also assessed for their psychological well-being.

Procedure:

Children in the EIBI group received one-to-one intervention in their homes for an average of 25 hours per week over a two year period. The intervention was delivered by 3-5 tutors from a range of service providers and also by the parents of the children, who were all trained to teach using the principles of ABA. The EIBI intervention group was taught a variety of key skills which included, play, language and cognition and adaptive behaviors.

The children in the group not receiving EIBI, received standard provision from their local education authority and some form of speech and language therapy.

Results:

Results found 26% of the children receiving EIBI demonstrated substantial gains in IQ. Results further illustrated that there were significant improvements in intelligence, daily living skills, motor skills, social skills, and in early social communication and language. Relative to the parents whose children received standard provision, no increase in psychological adjustment problems were noted with the parents whose children received EIBI. The Results also found a decrease in the problem behaviors and diagnostic symptoms associated with autism. Differences between the two groups were still noted after 12 months.

Conclusion:

The findings from this study demonstrated that EIBI can be effectively implemented in the UK. Although the intervention fell short of the recommended 40 hours per week, results were on the whole comparable to those provided by the US. Although the key questions of the research had been addressed, the findings also brought additional questions. For example, it remains unclear which children are most likely to benefit from EIBI, how to best evaluate and identify effective teaching methodologies and curricula, the long term effects of EIBI and whether EIBI can provide better outcomes than those reported thus far.

Please note that every effort has been made to condense and provide a broad overview of this research, however, in order not to lose the key information some of the information in this summary has been copied directly from the original article. All credits of the summary whether directly worded or re-worded are solely given to the researchers and autism research UK.



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For a more comprehensive read and further information please contact Bob Remington to receive the full study as PDF at: R.E.Remington@soton.ac.uk

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