

Symposium Title: Evidenced-Based Interventions for Individuals with Developmental Delays and ASD: A Focus on Latino Families

Chair: Cameron Neece, Ph.D.¹

Discussant: Sandy Magaña²

Overview: Latino individuals represent fastest growing population for several developmental disability groups, including Autism Spectrum Disorder (ASD; Maenner et al., 2020). Unfortunately, existing service systems often fail to meet the treatment needs of Latino individuals with intellectual and developmental disabilities and their families (Liptak et al., 2008; Nguyen et al., 2016), in part because of lack of research on interventions with this population. Thus, research is needed to examine whether evidence-based intervention practices are feasible and acceptable when delivered in Spanish and to Latino populations. The three papers in this symposium submission provide data examining the feasibility and preliminary efficacy of three evidenced-based interventions for individuals with developmental disabilities delivered to Latino participants. The first paper by Safer-Lichtenstein and colleagues looks at the feasibility and efficacy of three interventions; Mindfulness-Based Stress Reduction, Psychoeducation, and Behavioral Parent Training, for Latino families of young children with developmental delays. The second paper by Dr. Lopez will present results from a pilot study testing a hybrid model of intervention that included direct parent coaching through the use of pivotal response training (PRT) along with Parents Taking Action (PTA), a culturally informed parent mediated psychoeducation program designed to meet the informational needs of Latinx families of children with ASD. The third paper by Ann Marie Martin and colleagues examines the social validity of the PEERS program, and evidenced-based social skills program, among ethnically and linguistically diverse teens with ASD and their families. Dr. Sandy Magaña will serve as the Discussant for this symposium. Dr. Magaña's current research focuses on identifying pathways from identification to diagnosis to evidenced-based treatment for underserved children with ASD and their families. She will apply her expertise in Latino Mental Health in reviewing the findings of the three papers and discuss their implications for future research investigating evidenced-based interventions for Latino individuals with IDD and their families.

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Paper 1 of 3

Paper Title: Feasibility and Acceptability of Parenting Interventions Delivered in Spanish to Caregivers of Children with Developmental Delays

Authors: Jonathan Safer-Lichtenstein³, Laura Lee McIntyre³, Cameron Neece¹, Geovanna Rodriguez³

Introduction: Parents of children with developmental delays (DD), experience increased stress due to raising a child with a disability, particularly if the child also has challenging behaviors (Baker et al., 2003). Thus, there is benefit to interventions that:

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1) help parents cope with stress, and 2) manage the challenging behaviors of their children. This is particularly true for Spanish-speaking Latinx populations, who are often underrepresented in DD services and intervention research (West et al., 2016; Zuckerman et al., 2017). Two interventions that have shown promise in reducing caregiver stress are providing psychoeducation (Bitsika & Sharpley, 2000), and teaching mindfulness-based stress reduction (MBSR) through meditation (Dykens et al., 2014; Neece et al., 2014;). Furthermore, Behavioral Parent Training (BPT) has proven to produce positive outcomes around child challenging behavior, (McIntyre, 2013). This presentation will discuss pilot testing of these three interventions for Spanish-speaking Latinx caregivers of young children DD as part of a larger, randomized-control trial. In particular, we will focus on feasibility and acceptability of these interventions for parents.

Method: Sixty Spanish-speaking caregivers of 3-5-year-old children with DD were enrolled in this cohort. Participants were randomly assigned to either BPT plus MBSR (BPT-M) or BPT plus psychoeducation (BPT-E). Both intervention were delivered in group settings. In BPT-M, participants received six weeks of MBSR followed by 10 weeks of BPT. In BPT-E, participants received six weeks of psychoeducation followed by 10 weeks of the same BPT intervention. Of note, BPT for both groups was delivered virtually due to the onset of COVID-19 following the six-week stress reduction component. Attendance was recorded at each session. Participants also completed the Parent Satisfaction Questionnaire, an adapted version of the Consumer Satisfaction Questionnaire (Forehand & McMahon, 1981), after both weeks 6 and 16.

Results: Attendance data were analyzed as a two-way, between-subjects analysis of variance, with independent variables of “group” with two levels (BPT-E and BPT-M) and “intervention component” with two levels (stress reduction sessions and BPT sessions). The dependent variable was attendance. The interaction effect of “intervention component” x “group,” was not significant, $F(1, 28) = 1.34, p > .05$. There was a significant main effect of “intervention component,” with average attendance being significantly higher across groups at the in-person stress reduction sessions ($M = 17.83$) than the online BPT sessions ($M = 15.00$), $p < .001$. There was no significant main effect for “group,” $p > .05$. Preliminary exploration of week six satisfaction data indicated high levels of acceptability from participants, with no significant differences between groups. All participant mean ratings, including cultural alignment and overall impressions, fell between five and seven on the 7-point scale items. Ongoing analyses will include examining acceptability across groups following completion of the complete 16-week intervention, and comparisons between this cohort and previously completed English-speaking cohorts of the same intervention.

Discussion: This presentation will provide a first look at how acceptable Latinx parents of children with DD find three evidence-based interventions. Satisfaction ratings indicated high acceptance of both stress reduction interventions, while attendance data indicated possible preference for these interventions over BPT. However, the attendance findings may be due to the fact that BPT sessions were conducted online, or that they were weeks 7-16 of the intervention, and thus part of expected attrition. We are currently in the process of organizing focus groups which will help further assess which aspects of these different interventions have worked well for parents, which strategies have been less effective, and generally how well the interventions aligned with their cultural and familial values.

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Paper 2 of 3

Paper Title: Parent mediated autism intervention through a culturally informed lens: Parents Taking Action and Pivotal Response Training with Latino families

Authors: Kristina Lopez⁴

Introduction Despite increased public awareness of ASD and enhancements in ASD diagnostic techniques and treatment protocols, Latinx children continue to be diagnosed later than non-Latinx white children (Baio et al., 2020). Further, when diagnosed with ASD Latinx children receive inadequate quality of care and have greater unmet service needs (Zuckerman et al., 2014; Magana et al., 2013). Suggestions to improve the quality of care and better support families includes an increase in the availability of culturally informed practitioners and interventions programs, collaboration between parents and providers in treatment planning, and the training of parents, or use of parent mediated interventions to boost the exposure Latinx children have to treatment that they may not otherwise receive due to lack of resources (BuZhardt et al., 2016; Lopez et al., 2020). Parents Taking Action (PTA), is a culturally informed parent mediated psychoeducation program designed to meet the informational needs of Latinx families of children with ASD. PTA utilizes a promotora de salud (community health worker) model to deliver information about ASD, child development, advocacy, and evidenced-based practices to enhance children's social communication to Latina mothers of children with ASD. Previous research on PTA has found positive outcomes in parent understanding of their children's needs, increase in service use, and ability to support them with intervention strategies. The purpose of this study was to pilot a hybrid model of intervention by including direct parent coaching through the use of pivotal response training (PRT) along with PTA with Latina mothers of children with ASD.

Methods Ten Latina mothers of children 8 and under with ASD participated in this study. Mothers received PTA from two bilingual trained *promotoras* (community health workers), who were Latina mothers of children with ASD or other developmental disabilities. PTA included 14 2-hour psychoeducation sessions. Mothers also received 4 one-hour sessions of PRT from bilingual/bicultural coaches. The 4 one-hour PRT sessions complimented the strategy-based PTA sessions. Measures included the Family Outcome Survey (FOS; Bailey et al., 2008), and two questionnaires designed to measure self-efficacy in using the evidenced based intervention strategies and frequency of using the intervention strategies. Participants completed all measures prior to beginning the intervention program and at the conclusion of the program.

Results Paired samples t-tests indicated significant increases in mothers' understanding of their child's strengths ($p < .05$), needs and abilities ($p < .05$), knowledge of their rights and ability to advocate for their child ($p < .05$), have a support system ($p < .05$), self-efficacy in using the intervention strategies ($p < .05$), and frequency of using strategies ($p < .05$), from pre to post test.

Discussion This study demonstrates that culturally informed parent mediated ASD intervention positively affects family outcomes among Latinx families of children with ASD.

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Paper 3 of 3

Paper Title: The Social Validity of the PEERS Social Skills Program for Ethnically and Linguistically Diverse Families

Authors: Ann Marie Martin⁵, Jan Blacher⁵, Elizabeth Baker⁵, Elina Veytsman⁵, Tricia Choy⁵, & Katherine Stavropoulos⁵

Introduction: Treatment efficacy of the PEERS social skills (SS) program for individuals with autism spectrum disorder (ASD) has been demonstrated through significant improvements in SS, frequency of social engagement, and reduced deficits in social responsiveness (Laugeson et al., 2012). However, individuals who are Latinx are often not included in such studies (Schohl et al., 2014) and when included, demonstrate higher rates of attrition and lower levels of program satisfaction (Gamst et al., 2002). Since social validity can be influenced by cultural views and the practical logistics of personal circumstances (e.g., transportation, employment), attention to these factors is crucial. Therefore, to have more representative participant samples in SS interventions, researchers must determine ways to adapt SS interventions to be more inclusive and culturally sensitive. Thus, this paper addresses the following question: What was the social validity of the PEERS program as determined by a diverse sample of both parents and teens?

Methods: Two consecutive groups completed the 16-week parent-facilitated PEERS program. The teen group was delivered in English, and the parent group was delivered bilingually in English and Spanish. The first group included 7 adolescents with ASD (M age=13.3, SD =2.0) and their parents. Ethnicity included 2 White, 4 Latinx, and 1 biracial adolescent. Six families primarily spoke English and 1 participant was Spanish speaking only. Group two included 6 adolescents with ASD (M age=13.5, SD =2.2) and their parents, 2 White and 4 Latinx families. Parents and teens completed behavioral measures at three time points (pre- and post- intervention, and at a four-month follow up). Across both intervention groups (n =13), adolescents demonstrated improved ratings on measures of social functioning, including increases in social skills, decreases in social deficits, and increases in social knowledge, indicating that the program was effective overall. Social validity was also assessed with parents and teens using (1) a post-intervention satisfaction questionnaire and (2) a semi-structured interview conducted at post-intervention and follow-up. The social validity interview was adapted from the Gresham and Lopez (1996) framework for determining validity from post-intervention interviews. Parents and adolescents were asked questions about their perceptions and recommendations for future iterations of the program. Parents were also asked about the program's effectiveness and impact on their traditional cultural practices.

Results: Adolescent interviews revealed that although all teens in the sample endorsed recommending the program to their peers, several adolescents indicated relief upon finishing the program because it required a heavy workload and was stressful. When queried about the effectiveness of the program, parent perceptions ranged extensively, with over half the sample (n =7) indicating that the program worked extremely well for their teen. Despite differences in effectiveness, all parents indicated that they would recommend the program, but most (n =10) provided suggestions for slight adaptations. Regarding impact on culture, several themes emerged. Most notable were reports of program content that went against traditional Latinx child-rearing practices and provoked feelings of anxiety and initial resistance.

Discussion: When assessing the social validity of an intervention, it is important to examine the program from multiple perspectives. While outcome measures indicated positive results consistent with the literature, interviews with Latinx parents

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provided insight into the dynamics that cultural parenting norms play in an intervention that has been validated primarily with White participants.

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