Supporting families living in lockdown: Lesson learned

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MODERATED BY BRITT FARLEY, PH.D. BCBA-D LBA

LIVE ZOOM WORKSHOP
25 APRIL 2020
Thank you

Dr Britt Farley for accepting to co-host and moderate

To all of you for trusting me with your learning time
Why?
ABA in Italy

Second European country (after the UK) with largest number of BCBAs

14 Verified Course Sequences

State autism guidelines recommend ABA for autism

Increase in rehabilitation centres offering low intensity ABA (4-15 hours)

ABA is not part of the recognised autism provision

Mainly privately funded (many parents take the national health authorities to court and win to receive funding for intervention designed by BCBAs, delivered both at home and school)

Most BCBA are recognised professionals working under the regulations of their belonging professional body (e.g., psychologists, professional educators) and have a 5-year degree as well as a master in ABA
Advantages & disadvantages

- Not bound by insurance companies or local authorities
- Law, recognised professional body and BACB for those who are certified
- Greater flexibility
- Parental involvement
A Model of Support for Families of Children with Autism Living in the COVID-19 Lockdown: Lessons from Italy (Behavior Analysis in Practice, 2020)

Abstract

Italy has been the European country most affected by the COVID-19 pandemic to date and has been in social lockdown for the longest period of time compared to other countries outside China. Almost overnight, Italian behavior analysts were faced with the challenge of setting up remotely whole-family systems aimed at maintaining adaptive skills and low levels of challenging behavior carried out solely by caregivers. Given these extraordinary circumstances, the protocols available from the applied behavior analytic, parent training, and autism literature did not appear fully to meet the need of parents having to be with their child under extreme levels of stress in a confined space with limited reinforcers for 24 hours a day, 7 days a week. To meet this unprecedented challenge, we developed a dynamic and holistic protocol that extended to the full day and that recognized the need for sustainable intervention delivered solely by parents who were often looking after more than one child. These practices are presented in this paper, together with a discussion of lessons we have learned thus far, which may be useful for behavior analysts working in other regions in which the effects of the pandemic are not yet fully realized. Although somewhat unorthodox, we include some parent comments at the end with the goal of sharing the parent perspective in real time as this pandemic unfolds across the world.
Preliminary Findings of a Telehealth Approach to Parent Training in Autism

Laurie A. Vismara · Carolyn McCormick ·
Gregory S. Young · Anna Nathhan ·
Katerina Moubux

Published online: 17 May 2013
© Springer Science+Business Media New York 2013


Telehealth as a Model for Providing Behaviour Analytic Interventions to Individuals with Autism Spectrum Disorder: A Systematic Review

Jenny Ferguson¹ · Emma A. Craig¹ · Katerina Dounavi²

Published online: 26 August 2018
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But...

- Behavioural skills training
- Parent training and coaching
- ESDM
- Focused interventions
- Brief periods of time
#iorestoacasa

I stay home
OPEN ACCESS
In summary

Reinforcers once available and expected are no longer accessible.

The home context typically signals uninterrupted and noncontingent reinforcement access.

Sudden absence of contexts correlated with instructional control and contingent reinforcement.

Parents’ history of avoiding removing reinforcers and giving instructions for fear of challenging behaviour.

Parental stress higher than under usual circumstances, reinforcement of challenging behaviour to receive relief from aversive situations highly likely.
No MO - no contingency

what's the opposite of satiation?

lack, scarcity, need, want, incompleteness, fraction, part

Thesaurus.plus
Parental reports and observations

| High levels of escape from simple instructions |
| Loss of independence and communication skills (appropriate mands) |
| Significant reduction in the time children spent with favorite items (satiation) |
| Increase in problematic interactions between parents and all children |
| Unmanageable levels of mands for attention (both appropriate and inappropriate) |
| Increased irritability in parents, marital conflict, mental health decline |
Duty of care and scope of practice

- Very few in ABA are trained clinical psychologists or psychotherapists
- Definition of Applied Behaviour Analysis
  - A scientific approach to improving socially significant behaviour through the systematic application of procedures derived from the principles of learning. Experimental demonstration that the procedures employed were responsible for the behaviour change.
- None of the As in ABAs stands for autism
- The environment acts upon behaviour – we need to understand the environmental variables and behaviour, the current contingencies of all members of the household context
Risk Assessment and Interview form

Semi structured

Engage parent in a conversation

Ask for examples of incidences (look for ABCs)

Ask for examples of typical day (routines, structure, self-entertainment skills, NCR)

I have seen a negative change in parents’ behaviour during the initial meeting from parents (parents who started after 2 weeks, parents who started after 8 weeks)
<table>
<thead>
<tr>
<th>N</th>
<th>Questions</th>
<th>Responses</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Is the parent a single parent?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>2</td>
<td>Is the parent alone most of the day?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>3</td>
<td>Is one of the two parents working from home?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>4</td>
<td>Are both parents working from home?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>5</td>
<td>Are there other supportive adults living in the household? Who?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>6</td>
<td>Are there siblings? How many?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Does the sibling have a disability?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>8</td>
<td>Is the sibling attending online schooling?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>9</td>
<td>Is the sibling an infant or toddler?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>10</td>
<td>Can the sibling engage in solitary activities without demanding parental attention for one hour or longer?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>11</td>
<td>For half an hour?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>12</td>
<td>Is the child 2 to 5 years of age?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>13</td>
<td>Would the child be able to engage in direct sessions online?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>14</td>
<td>Does the child need constant supervision and instruction?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>15</td>
<td>Can the parent tolerate not intervening if the child engages in non-dangerous levels of self-stimulation?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>16</td>
<td>How long can the child spend by himself without requiring parental intervention (e.g., self-stimulation or tangible reinforcer)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>17</td>
<td>Can the child engage in an independent appropriate activity for 30 minutes without adult supervision?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>18</td>
<td>For 15 minutes?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>19</td>
<td>Is the parent able to interrupt the child from a reinforcing activity without problem behaviour?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>20</td>
<td>Does the child cooperate with simple instructions without problem behaviour?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
Direct observation

What things do you do together during the day? What did you do together yesterday?

Can we see an example?

- Self-care (something child needs help with)
- Instructional activity (work sent from school)
- Shared Activity with parent and sibling
- Household chores
- Independent activity (attention removal)
- Solitary reinforcement (attention removal)
- Reinforcement interruption (saying no, give me)
- Fun activity for child with parent
What are we looking for?

Quality of interaction: Assessing both the parent and the children's behaviour (child and sibling)

It is likely that some precursor problem behaviour will occur, look at how the parent deals with it. Provided it is safe (ask the parent if this is what normally happens) let the parent deal with it the way they typically do to calm the child down. It is likely that they will reinforce it and it will cease.

Interaction: shared engagement and communication. How do they all communicate with one another? (Watch for siblings’ whining, voices raised, sibling being directive)

How parent delivers demands: instruction repetition, name overuse, how assistance if provided

Listening and attending: parent responding to changes in child's motivation to maintain engagement. Use of commenting and declarative language

Tolerance of self-stimulation
<table>
<thead>
<tr>
<th>Parent alone</th>
<th>Both parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Only child</td>
<td>Sibling</td>
</tr>
<tr>
<td>Sibling (below 10)</td>
<td>Very young sibling</td>
</tr>
</tbody>
</table>

Below age 6

Able to sustain verbal interaction

Limited verbal skills

Risk evaluation
## Parental burn out and challenging behaviour

<table>
<thead>
<tr>
<th></th>
<th>Parent alone</th>
<th>Both parents</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Only child</td>
<td>Sibling (below 10)</td>
</tr>
<tr>
<td>Below age 6 (preschool)</td>
<td>Yellow</td>
<td>Red</td>
</tr>
<tr>
<td>Able to sustain verbal interaction</td>
<td>Green</td>
<td>Yellow</td>
</tr>
<tr>
<td>Limited verbal skills</td>
<td>Yellow</td>
<td>Red</td>
</tr>
</tbody>
</table>

### Notes:
- **Parent alone**
  - Only child
  - Sibling (below 10)
  - Very young sibling
  - Sibling with autism
- **Both parents**
  - Only child
  - Sibling
  - Very young sibling
  - Sibling with autism

- **Below age 6 (preschool)**
  - Below age 6 (preschool)
  - Able to sustain verbal interaction
  - Limited verbal skills

- **Able to sustain verbal interaction**
  - Able to sustain verbal interaction

- **Limited verbal skills**
  - Limited verbal skills
What you will see

You will see application of a holistic and comprehensive household management system with high risk families.

These are not new families.

You will not see direct telehealth sessions with the verbally interactive children given the time constraints and that there are many examples available either online or discussed in papers.
Remote support

DIRECT

COACHING

PROBLEM SOLVING
General organisation

- Structuring the whole day for all household members (siblings included)
- Contextually appropriate activities
- Classification of high and low risk times
- Reducing waking time
- Household reinforcement system (closed economy): token vs activity
- Contingent reinforcement
- Daily objectives
- Frequent contact with consultant and lead tutor
## Morning

<table>
<thead>
<tr>
<th>TIME</th>
<th>ACTIVITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>08:00 - 08:30</td>
<td>Waking up, washing, getting dressed</td>
</tr>
<tr>
<td>08:30 - 09:00</td>
<td>Breakfast</td>
</tr>
<tr>
<td>09:00 - 10:00</td>
<td></td>
</tr>
<tr>
<td>10:30 - 11:00</td>
<td>Outing</td>
</tr>
<tr>
<td>11:00 - 11:30</td>
<td></td>
</tr>
<tr>
<td>11:45 - 12:15</td>
<td>Snack</td>
</tr>
<tr>
<td>12:15 - 13:30</td>
<td></td>
</tr>
<tr>
<td>13:30 - 14:00</td>
<td>Lunch</td>
</tr>
</tbody>
</table>

### RISK Indicators
- [ ] RISK
- [ ] RISK
- [ ] RISK
## Afternoon

<table>
<thead>
<tr>
<th>TIME</th>
<th>ACTIVITY</th>
<th>RISK</th>
</tr>
</thead>
<tbody>
<tr>
<td>14:00 – 15:30</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15:30 – 16:00</td>
<td>Outing</td>
<td>RISK</td>
</tr>
<tr>
<td>16:00 – 17:00</td>
<td></td>
<td>RISK</td>
</tr>
<tr>
<td>17:00 – 17:15/30</td>
<td>Breakfast</td>
<td>RISK</td>
</tr>
<tr>
<td>17:30 – 19:00</td>
<td></td>
<td>RISK</td>
</tr>
<tr>
<td>19:00 – 19:30</td>
<td>Bath, pyjamas</td>
<td></td>
</tr>
<tr>
<td>19:30 – 20:15</td>
<td>Supper</td>
<td></td>
</tr>
<tr>
<td>20:30 – 21:00</td>
<td>Bedtime</td>
<td></td>
</tr>
</tbody>
</table>
Reducing risk

If both parents home, household tasks must be shared

If only child with both parents: parents take turns to be with the child or divide the activities between them

If one parent with one child with limited skills, and especially with a history of problem behaviour, close the economy

If one parent with two children, the daily structure is applied to sibling. Objective is to alternate parent-led activities with reinforcement times for all (maximum 30 minutes)

Restricting free reinforcement access fundamental for all children
Siblings

Age of siblings significant

If preschool age, structure is fundamental for them too.

If primary school age, evaluate self-entertainment skills. Time with parents must be of undivided attention towards them, help them with school work or involved in housework (e.g., cooking together) that need to be carried out. This is the time when our child is in prolonged reinforcement.

If two parents with very young children: one child per parent and swap.

Avoid a situation in which the sibling becomes problematic because parent is present and giving attention to the other child and sibling has nothing to do.
Closing the economy

The COVID-19 restrictions created the conditions for a closed economy in each household, where each unit had suddenly had to become self-reliant in every aspect of daily living: household care, self-care, education, protection of oneself and others, entertainment, exercise.

We aimed to help parents establish a closed economy based on positive reinforcement for all members: engaging with parent-led reinforcement contingencies was the only way in which to access highly valued stimuli (Kodak, Lerman, & Call, 2007; Reed, Niileksela, & Kaplan, 2013).

Structuring activities enabled parents to have some time to themselves without fear of problem behaviour, but also potentially to contact with the children maintained by positive reinforcement.
THE MEASUREMENT AND REINFORCEMENT OF BEHAVIOR OF PSYCHOTICS

T. Ayllon and N. H. Azrin

Anna State Hospital

An attempt was made to strengthen behaviors of psychotics by applying operant reinforcement principles in a mental hospital ward. The behaviors studied were necessary and/or useful for the patient to function in the hospital environment. Reinforcement consisted of the opportunity to engage in activities that had a high level of occurrence when freely allowed. Tokens were used as conditioned reinforcers to bridge the delay between behavior and reinforcement. Emphasis was placed on objective definition and quantification of the responses and reinforcers and upon programming and recording procedures. Standardizing the objective criteria permitted ward attendants to administer the program. The procedures were found to be effective in maintaining the desired adaptive behaviors for as long as the procedures were in effect. In a series of six experiments, reinforced behaviors were considerably reduced when the reinforcement procedure was discontinued; the adaptive behaviors increased immediately when the reinforcement procedure was re-introduced.
Many studies have used token reinforcement programs for the management of classroom behavior (Benbow, Wolf, Kallier, and Tang, 1969; McKenzie, Clark, Wolf, Kohers, and Benson, 1968; O'Leary, Bedos, Evans, and Swadling, 1969). In these studies, token reinforcers were dependent upon back-up reinforcers such as candy, toys, and comic books which are not available in the natural classroom. The cost for such token programs can be an important factor when considering whether to use or employ such a program. Wolf, Gilia, and Hall (1968) estimated an average cost of $256 per subject. Other studies, more appropriately mental programs than classroom settings, have reported much lower costs (Stasau and Barrientos, 1965; Stasau, Miller, Goodwin, and Lauber, 1959).

Most of the past studies that employed token programs took place in non-typical educational settings such as: (a) an advanced-mathematics class, (b) a remedial classroom (Wolf, et al., 1968), or (c) a special education class (Zimmerman and Zimmerman, 1961). Also, in most cases the number of subjects receiving reinforcement contingencies was small when compared with the typical classroom in a public school.

Recently, one-on-one group contingencies manual to the classroom have been studied. Osborne (1965) used a free-response contingency to eliminate out-of-class responses in a classroom of six. Bursch, Swanson, and Wolf (1965) employed a group technique that reduced work and talking/behavior in a class of 24.

The present paper investigated the effects of various contingencies on assignment completion for an entire class. The methods used were: (a) dependent one-on-one-back-up reinforcers in the form of privileges, (b) employed in a public school setting, (c) applied to the whole class, and (d) managed by a single teacher.

**METHOD**

Subject and Setting:
Members of a combination fifth and sixth grade classroom located in a low-income socioeconomic area of Seattle, Washington were used. The class size ranged from 25 to 29. The senior au-
### Table 1
Behaviors and the number of points that they earned or lost.

<table>
<thead>
<tr>
<th>Behaviors That Earned Points</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Items correct</td>
<td>6 to 12</td>
</tr>
<tr>
<td>2) Study behavior 8:50-9:15</td>
<td>5 per day</td>
</tr>
<tr>
<td>3) Bring food for animals</td>
<td>1 to 10</td>
</tr>
<tr>
<td>4) Bring sawdust for animals</td>
<td>1 to 10</td>
</tr>
<tr>
<td>5) Art</td>
<td>1 to 4</td>
</tr>
<tr>
<td>6) Listening points</td>
<td>1 to 2 per lesson</td>
</tr>
<tr>
<td>7) Extra credit</td>
<td>Assigned value</td>
</tr>
<tr>
<td>8) Neatness</td>
<td>1 to 2</td>
</tr>
<tr>
<td>9) Taking home assignments</td>
<td>5</td>
</tr>
<tr>
<td>10) Taking notes</td>
<td>1 to 3</td>
</tr>
<tr>
<td>11) Quiet in lunch line</td>
<td>2</td>
</tr>
<tr>
<td>12) Quiet in cafeteria</td>
<td>2</td>
</tr>
<tr>
<td>13) Appropriate noon hour behavior</td>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Behaviors That Lost Points</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Assignments incomplete</td>
<td>Amount squared</td>
</tr>
<tr>
<td>2) Gum and candy</td>
<td>100</td>
</tr>
<tr>
<td>3) Inappropriate verbal behavior</td>
<td>15</td>
</tr>
<tr>
<td>4) Inappropriate motor behavior</td>
<td>15</td>
</tr>
<tr>
<td>5) Fighting</td>
<td>100</td>
</tr>
<tr>
<td>6) Cheating</td>
<td>100</td>
</tr>
</tbody>
</table>

### Table 2
Weekly Privileges

<table>
<thead>
<tr>
<th>Privilege</th>
<th>Price in Points</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sixth</td>
</tr>
<tr>
<td>1) Sharpening pencils</td>
<td>20</td>
</tr>
<tr>
<td>2) Seeing animals</td>
<td>30</td>
</tr>
<tr>
<td>3) Taking out balls</td>
<td>5</td>
</tr>
<tr>
<td>4) Sports</td>
<td>60</td>
</tr>
<tr>
<td>5) Special writing on board</td>
<td>20</td>
</tr>
<tr>
<td>6) Being on a committee</td>
<td>30</td>
</tr>
<tr>
<td>7) Special jobs</td>
<td>25</td>
</tr>
<tr>
<td>8) Playing games</td>
<td>5</td>
</tr>
<tr>
<td>9) Listening to records</td>
<td>5</td>
</tr>
<tr>
<td>10) Coming in early</td>
<td>10</td>
</tr>
<tr>
<td>11) Seeing the gradebook</td>
<td>5</td>
</tr>
<tr>
<td>12) Special projects</td>
<td>25</td>
</tr>
</tbody>
</table>

<sup>a</sup>Privilege costs were determined separately for the two grades. Also, fifth-grade children were in the room less time per day than were the sixth-grade children.
Parent-child problems within the home are frequently reported to be instances in which children refuse to help with household chores,icker among themselves, or engage in verbally inappropriate behavior toward their parents. The present study investigated the effects of a token reinforcement program administered by the parents in ameliorating these problems. Two sets of parents, with a total of five children between the ages of 5 and 10 yr., were taught to administer a token economy within their homes. The parents received instruction in specifying desired social and chore behaviors, communicated these behavioral goals to their children, recorded data on their occurrence, and managed a point system backed with reinforcers normally found in the home. The token reinforcement program was shown to have successfully modified 15 problem behaviors in Family 1 and six in Family 2. In addition, the parents rated all 21 behavior changes as significant improvement. These studies indicated that some cooperative parents need only a small amount of professional help to learn to manage their children's behavior problems with token reinforcement procedures.
Why?

If no deprivation, no Establishing Operation...

Limit satiation when novel reinforcers not available.

Instantly provides parents with instructional control (what they say now can become Sds)

Simple, efficient and effective

Must be applied to siblings as well (assess age, level of independence, if involved in remote schooling)

Engaging with parent-led reinforcement contingencies was the only way in which to access reinforcers (Kodak, Lerman, & Call, 2007; Reed, Niileksela, & Kaplan, 2013)
Example of two siblings

CHILD (6 YEARS)

Solitary: Ipad, trampoline, train, lining up objects, books

Adult mediated: playdough, sand play, scooter, tickles, songs, parent drawing specific shapes

SIBLING (3 YEARS)

Solitary: Puzzles, books, farm animals, dinosaurs, sand, playdough, colouring, trains, watching a film, building blocks

Adult mediated: worksheets, songs, making cookies, garden, help with chores, scooter
Setting up the shop

Parent goes through each room of the house and identifies things child and sibling likes, might like or items with which they had witnessed their child spend some time. Not just the session reinforcers.

Every item is removed and placed in boxes, inside wardrobes or bags or whatever container was available to create a “shop”. If a lot of toys, they are rotated daily.

Photo menus of the various items.

When it is time for reinforcement, the child mands for the item using whatever communication modality he typically employs (e.g., vocal, sign, PECS, pointing).
“How much richer would the whole world be if the reinforcers in daily life were more effectively contingent on productive work?” (Skinner, 1986, p. 30)
Activity based

Mainly when parent is alone with child and sibling

Engagement in a less-preferred activity (i.e., contextually appropriate activities) produced access to a more preferred activity

Manipulation of motivational blocks: for example: high attention (shared activity) activity followed by solitary reinforcement, a competing reinforcer. High energy activity (running in the garden) followed by a sit-down activity.
Token based

3 interrelated schedules:

1. Token production (the schedule by which responses earn tokens): FR1 then VR set by parent
2. The exchange-production schedule (the schedule by which exchange periods are earned): FR10
3. The token-exchange schedule (the schedule by which the tokens were cashed in for preferred items or activities): FR1 handing token board - CHOICE

2 types of reinforcement consumption interval: brief (1-3 minutes) and prolonged (up to 30 minutes).

If child mands for a change of reinforcer, new token board is run. If parent needs more time off, still must interrupt after 30 minutes. No more than 2 consecutive 30-minute slots per day (1 hour)
Now Playing: Session 87 – Token Reinforcement: Bridging the Gap between Science and Application

Session 87
Token Reinforcement: Bridging the Gap between Science and Application

http://legacy.wpsu.org/live/2012_player/69542
What to do during high risk times
Choosing objectives

One target per day in any of the activities, one-week objectives, and three-month objectives.

What would be helpful for you that your child learned right now?

What do you want to teach your child today?

What do you want to have taught your child in one week?

When all this is over, what would you want your child to be able to do? In one month? In three months?
**Activity classification**

**Independent activity:** Any instructional activity without adult support (e.g., puzzles and shape sorters, worksheets, coloring, educational computer programs, domestic skills).

**Household chores:** Chores that need to be done and that the parent feels able to carry out with their child or children, giving them things to do.

**Table-top discrete trial teaching (DTT):** Maintenance targets to teach parent basic rules of discrete trial teaching, prompting, transfer trials and error correction. Gradually parent learns to teach new skills.

**Adult-led or shared activity (not DTT):** These included activities that required the parent to engage one or both children, in which responses could be more loosely defined. Examples of shared activities were completing simple crafts or making cookies.
<table>
<thead>
<tr>
<th>Time</th>
<th>Child</th>
<th>Sibling</th>
<th>Parent 1</th>
<th>Parent 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>08:00 - 08:30</td>
<td>Wake up, washing, dressing</td>
<td>Wake up, washing, dressing</td>
<td>Child</td>
<td>Sibling</td>
</tr>
<tr>
<td>08:30 - 09:00</td>
<td>Breakfast</td>
<td>Breakfast</td>
<td>Both children</td>
<td>Unavailable</td>
</tr>
<tr>
<td>09:00 - 09:30</td>
<td>Adult-led activity</td>
<td>Adult-led activity with child or independent skill</td>
<td>Both children</td>
<td>Unavailable</td>
</tr>
<tr>
<td>09:30 - 10:00</td>
<td>Reinforcement</td>
<td>Reinforcement</td>
<td>Free</td>
<td>Unavailable</td>
</tr>
<tr>
<td>10:00 - 10:30</td>
<td>Adult-led activity</td>
<td>Adult-led activity with child or independent skill</td>
<td>Both children</td>
<td>Unavailable</td>
</tr>
<tr>
<td>10:30 - 11:00</td>
<td>Garden</td>
<td>Garden</td>
<td>Both children</td>
<td>Unavailable</td>
</tr>
<tr>
<td>11:00 - 11:30</td>
<td>Garden</td>
<td>Garden</td>
<td>Both children</td>
<td>Unavailable</td>
</tr>
<tr>
<td>11:30 - 12:00</td>
<td>Snack</td>
<td>Snack</td>
<td>Both children</td>
<td>Unavailable</td>
</tr>
<tr>
<td>12:00 - 12:30</td>
<td>Adult-led activity</td>
<td>Adult-led activity with child or independent skill</td>
<td>Both children</td>
<td>Unavailable</td>
</tr>
<tr>
<td>12:30 - 13:00</td>
<td>Reinforcement</td>
<td>Reinforcement</td>
<td>Free</td>
<td>Unavailable</td>
</tr>
<tr>
<td>13:00 - 13:30</td>
<td>Reinforcement</td>
<td>Meal preparation with parent 1</td>
<td>Meal preparation with sibling</td>
<td>Unavailable</td>
</tr>
<tr>
<td>13:30 - 14:00</td>
<td>Lunch</td>
<td>Lunch</td>
<td>Lunch</td>
<td>Unavailable</td>
</tr>
<tr>
<td>Time</td>
<td>Activity</td>
<td>Sibling Activity</td>
<td>Parent 1 Activity</td>
<td>Parent 2 Status</td>
</tr>
<tr>
<td>--------------</td>
<td>-----------------------------------</td>
<td>-------------------------</td>
<td>----------------------------</td>
<td>------------------------</td>
</tr>
<tr>
<td>14:00 – 14:30</td>
<td>Chores with parent</td>
<td>Nap</td>
<td>Child</td>
<td>Unavailable</td>
</tr>
<tr>
<td>14:30 – 15:00</td>
<td>Reinforcement</td>
<td>Nap</td>
<td>Free</td>
<td>Unavailable</td>
</tr>
<tr>
<td>15:00 – 15:30</td>
<td>Independent skill teaching</td>
<td>Nap</td>
<td>Child</td>
<td>Unavailable</td>
</tr>
<tr>
<td>15:30 – 16:00</td>
<td>Reinforcement</td>
<td>Activity with parent</td>
<td>Sibling</td>
<td>Unavailable</td>
</tr>
<tr>
<td>16:30 – 17:00</td>
<td>Snack</td>
<td>Snack</td>
<td>Both children</td>
<td>Unavailable</td>
</tr>
<tr>
<td>17:00 – 17:30</td>
<td>Walk</td>
<td>Garden</td>
<td>Supervision</td>
<td>Walk with child 1</td>
</tr>
<tr>
<td>17:30 – 18:00</td>
<td>Walk</td>
<td>Reinforcement</td>
<td>Free</td>
<td>Walk with child 1</td>
</tr>
<tr>
<td>18:00 – 18:30</td>
<td>Reinforcement</td>
<td>Activity with parent 2</td>
<td>Free</td>
<td>Activity with Sibling</td>
</tr>
<tr>
<td>18:30 – 19:00</td>
<td>Activity with parent 2</td>
<td>Reinforcement</td>
<td>Free</td>
<td>Activity with child</td>
</tr>
<tr>
<td>19:00 – 19:30</td>
<td>Reinforcement</td>
<td>Meal preparation with parent</td>
<td>Meal preparation with sibling</td>
<td>Free</td>
</tr>
<tr>
<td>19:30 – 20:15</td>
<td>Meal</td>
<td>Meal</td>
<td>Meal</td>
<td>Meal</td>
</tr>
<tr>
<td>20:15 – 21:00</td>
<td>Bath, pyjamas, bedtime Parent 1</td>
<td>Bath, pyjamas, bedtime Parent 2</td>
<td>Child</td>
<td>Sibling</td>
</tr>
</tbody>
</table>
Two children – parent alone

**Adult-led or shared activity (not DTT):** semi-structured activities

**Parent objectives: applied to both children**

- Declarative language, commenting
- Shaping appropriate mands for attention (kind voice)
- Giving contingent attention on-task behaviour
- Giving closed choices within the activity (heart or flower?)
- Extinction and redirection of inappropriate social behaviour
- Following through

Credit: GETTY - CONTRIBUTOR
Videos: “Shared 1” and “Intro to DTT”

One parent alone most of the day, second parent in smart working

Two children: 3 year old typical child and 6 year old with autism

Shared parent led activity

Structured teaching
Videos “Shared 2” and “DTT 2”

Your thoughts

What has changed?
Household chores

- Not only what the child can already do or could do, but all domestic chores
- Reduces effort to create new activities and source materials
- Based on what the environment naturally demands and provides
For each room, the parent lists every single thing that needs to be done.
Examples

**Bedroom:** making beds, changing sheets, putting clothes away, folding clothes, tidying wardrobes, dusting surfaces, cleaning windows, cleaning skirting boards, vacuuming, mopping

**Bathroom:** tidying cabinets, cleaning drawers, cleaning sink, bath, bidet, toilet, cleaning windows, vacuum, mopping, changing mat

**Kitchen:** emptying the dishwasher, drying, emptying rubbish bins, emptying and putting away the shopping, setting table, clearing table, getting ingredients, preparing a snack, making a toast, spreading, cutting, cooking, cleaning the stove, cleaning the worktop, feeding the dog, change pets water, vacuum

**Balconies / Garden:** watering plants, collecting leaves, sweeping
Video “household teenagers”

One parent alone most of the day

2 teenagers with autism

Combination of direct online sessions and activity-based system and pocket money for eldest for completing chores
Videos “assessment” and “household”

One parent alone most of the day

9 year old child with challenging behaviour
Data collection

- Parental report of challenging behavior (conversation)
- Parental report of their ability to maintain the agreed structure (conversation)
- Direct measurements of children's adherence to parental instructions (observation)
- Direct measurement of challenging behavior during the coaching session (observation)
- Parents' procedural fidelity (observation)
- Data are taken by the professionals (tutors, senior tutors, consultants) during the remote meetings or sessions
Contact

The first session with the parent takes 2 to 3 hours. The structure of the session depends on the type of intervention selected (direct telehealth sessions conducted by the tutors, coaching the parent) and family variables (siblings, both parents).

All household adults are present

Tutor-led sessions: consultant meets weekly with tutor/s and parent/s

Parent coaching sessions: direct coaching to the parent 1 to 3 times a week by the behaviour analyst

In between, senior tutors connect with the parent every day for additional support.
Intervention today

Engagement in household chores and generalization in naturalistic contexts

Shared parent-led activities with siblings

Structured table work

Independent play or living skills

Independent worksheets

Contingent tangible reinforcement and appropriate social contact between all household members
Behaviour and interaction
Some positive outcomes

More realistic expectations from parents
Greater engagement with their child
Greater instructional control
Empowerment
Reduced escape behaviour from social contact for both parent and child
Challenging behaviour with parent significantly reduced

“A parent is willing to do anything for their children. This experience is giving me so much: self-awareness, courage and confidence... our present has completely changed” (G mother of C)
What we do not know

- How exactly restrictions will be lifted
- When restrictions will end completely
- How life will be when it goes back to normal
But we can learn

What lessons can we learn from this experience as professionals?

**My take-home points**

This intervention was developed to respond to a crisis:

- How can parents’ motivation to engage with their child be maintained once life resumes to normal? What kinds of experiences can be provided so that attempts to engage are reinforced by the child?
- What kinds of experiences can be engineered for new parents to achieve and maintain these positive outcomes once normal life resumes?
So, for now

- Live a day at the time
- Stay in the moment
- Forgive ourselves
- Be kind
- Be close even if at a distance
Grazie!!!

Please complete the feedback questionnaire that you will receive via email.