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# Training Parents in JASP-EMT: Using Empirical Benchmarks to Evaluate Generalization and Maintenance of EMT Strategies



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## Introduction

- JASP-EMT (Joint-Attention, Structured Play, Enhanced Milieu Teaching) is a social communication intervention that blends a naturalistic language intervention, EMT (Enhanced Milieu Teaching), with a joint attention/symbolic play intervention, JASPER (Joint-Attention, Structured Play, Engagement, Behavior Regulation).
- Both interventions have been found effective in improving communication and related skills in young children with autism (Kaiser & Trent, 2007; Kasari, Freeman, & Paparella, 2006).
- Interventions that employ both skilled therapists and parents may help children accelerate their language development and use (Hancock & Kaiser, 2002); thus, determining the extent to which parents can learn, generalize and maintain use of the strategies is important.
- The current study examined the effects of JASP-EMT with parent training with minimally-verbal children with autism.

## Research questions

- Can parents of minimally verbal children with autism learn the JASP-EMT intervention at fidelity levels?
- Can parents generalize use of JASP-EMT strategies to a novel setting?
- Can parents maintain use of JASP-EMT strategies following intervention?

## More Information

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## Methods

- The participants in this study were the parents of 20 minimally-verbal children with autism.
- The parents received parent training as part of a larger randomized trial of JASP-EMT (Kasari et al, 2014).
- Child participants received intervention during 1-hour play sessions twice per week with a trained JASP-EMT therapist for a total of 48 sessions.
- Parent training occurred in two phases: 1) Parents observed the sessions while children received the intervention from a therapist (24 sessions), & 2) Parents were trained individually by practicing with their child while receiving therapist coaching and feedback (24 sessions).
- Parent fidelity in strategy use was measured during each intervention session.
- Generalization was measured in Caregiver-Child Interaction sessions (CCX) administered at the end of the intervention (session 48).
- Maintenance was measured in CCX sessions at a 3-month follow up visit.

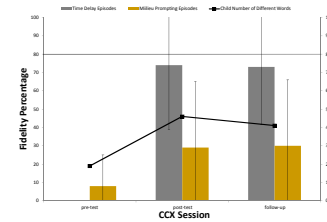
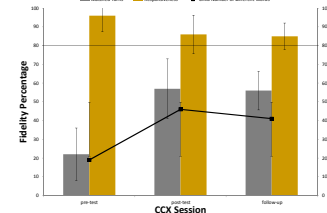
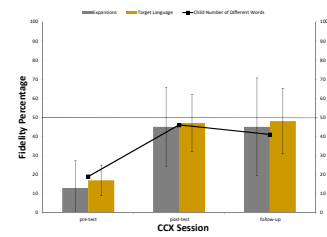
Participants	Mean child age in months (sd)	Mean IQ (sd)	Mean parent age in years (sd)	% Parent education level
20	75.7 (11.1)	63.7 (18.6)	38 (6.5)	30% Graduate/professional training 25% College Graduate 35% Some College 5% High School 5% Junior High

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## Results

- Parents significantly improved their use of five of six strategies from pre-test to end of intervention ( $p=.000$ ).
- Parents generalized the use of strategies to the CCX and maintained use of these strategies at the 3-month follow-up visit.
- Five of six strategies were generalized and maintained at or near criterion levels.
- Percentage of correctly utilized milieu prompting episodes was below criterion at post-intervention and follow-up.

Parent Fidelity Across Key Strategies



\*Black lines indicate criterion levels

## Discussion

- Over the course of 24 sessions, parents met criterion levels for 5 of the 6 EMT strategies.
- Responsiveness showed a slight reduction at the end of intervention and follow-up, but maintained above criterion level throughout the intervention.
- Parent training was highly effective for teaching parents strategies to support their child's communication, although they may require additional training for long-term use of milieu prompting episodes.

## Conclusions

- Future studies should focus on improving generalized performance by training across settings and providing more training for strategies that haven't met criterion.
- Future studies also should examine the unique contribution of parent training to communication improvements in children with ASD.

## References

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