Title: Coaching Parents of Children with Autism Spectrum Disorder to Embed Social Skills Instruction during Playdates

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Introduction: Children with autism spectrum disorder (ASD) may experience difficulty forming friendships or poorer quality of friendships, increased loneliness, peer rejection, and bullying. Many interventions for children with ASD have focused on social skills within school contexts. Children need opportunities to practice social skills outside of school, and a common means for this is through playdates. Children with ASD who participate in playdates hosted in their homes may display better social skills, such as joint engagement, during recess or other recreational settings. There are few studies examining methods to teach children with ASD social skills designed for use during home playdates and have included children with advanced language skills, such as the ability to ask questions to peers (Frankel et al., 2010; Koegel et al., 2005). In the current study, we examined a parent-implemented packaged intervention aimed at embedding instruction in early social skills (i.e., requesting turns or items from a peer, responding to peer’s requests) during playdates in the home of the child with ASD.

Method: A concurrent multiple-probe single-case design was employed. Three children with ASD, their parent, and a typically-developing peer participated. Triad 1 consisted of a father (Caucasian, 39 years old, graduate degree); his son (6:1 years old, CARS – 2 score = 31.5); and a male peer (Asian, 6:2 years old). Triad 2 consisted of a mother (Caucasian, 29 years old, bachelor’s degree); her daughter (Caucasian, 3:5 years old, CARS – 2 score = 33.5); and her female cousin (Caucasian, 4:8 years old). Triad 3 consisted of a mother (African American, 30 years old, bachelor’s degree); her son (African American, 6:4 years old, CARS – 2 score = 40); and a female peer (Caucasian, 5:5 years old). Data were collected on parent treatment fidelity and frequency of child and peer behaviors, including child and peer requests (e.g., requesting a turn) and child and peer responses (e.g., passing the die). During the coaching phase, parents were taught the steps of the packaged intervention, which included a social narrative, activity schedule, environmental arrangement, prompting, and reinforcement strategies. Parents were taught to embed social skills instruction within the context of game play based on child and peer preference.

Result: During baseline, low levels of treatment fidelity, child, and peer behaviors were observed for all 3 triads. Upon implementation of coaching, an immediate increase in level of independent correct steps of treatment fidelity was observed for tiers one and two. An immediate increase in level and trend was observed for child behavior (Tau-U = 1, p = .03) and peer behavior (Tau-U = 1; p = .03) in tier one. An immediate increase in level and trend was observed for child behavior (Tau-U = 1, p = .01) and peer responses (Tau-U = 1; p = .01) with moderate changes observed for peer requests (Tau-U = .92, p = .02) in triad 2. A small change in level was observed for parent, child, and peer behaviors in triad 3. Due to emergence of child challenging behavior and a decreasing trend in target behaviors for triad 3, a procedural modification was employed. The procedural modification included a change in location to the club house at the apartment complex, addition of non-contingent access to preferred foods and drinks for the child and peer, and a change in the prompting hierarchy. Following the procedural modification, an immediate increase in level was observed in parent treatment fidelity, and moderate changes in level for child requests (Tau-U = .83; p = .03), peer responses (Tau-U = 1; p = .01), peer requests (Tau-U = 1; p = .01), and child responses (Tau-U = .83; p = .03).

Discussion: To our knowledge, this is the first study that has examined methods to train parents of children with ASD and complex communication needs to embed early social skills instruction within the context of playdates in their home setting. The intervention was effective in increasing social interactions between the child with ASD and a peer during game play facilitated by the parent for all three triads. The intervention was more effective for triads one and two. For triad three, challenging behavior (including self-injury and aggression toward his mother) appeared to be a barrier for immediate uptake of the intervention procedures. This pilot study suggests that training parents of children with ASD to implement evidence-based strategies with their child and a peer may be an effective means to support early social skills, but that child challenging behavior and communication needs are likely to affect outcomes.

References/Citations: