From Specialized Clinic-based Tertiary Care to Communities & Prevention

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Some of the research to be presented today was supported by:

- NIH: R03 082436 *A Feasibility Study of the Prevention and Safety Training Program*
- Organization for Autism Research *Applied Research Grant*
- NIH R01 MH104363 *Comparing Behavioral Assessments Using Telehealth for Children with Autism*
Although prevalence estimates vary (15%-65%)\(^1\), problem behaviors are more common in individuals with autism spectrum disorder (ASD) than same age peers.

Common problem behaviors include:

- Aggression
- Tantrums
- Self-injury
- Disruptive behavior
- Property destruction
- Pica
- Elopement
- Encopresis

Emerson, (2011)\(^1\)
Examples of Significant Problem Behavior
Examples of Significant Problem Behavior
Problem behaviors directly produce many negative effects on the individual who exhibits them

- Physical harm\(^1\)
- Exclusion from community services and peers\(^2\)
- Stigma

Also negatively affects almost every facet of a caregiver's daily life

- Poorer family functioning\(^1\)
- Lower marital satisfaction\(^1,2\)
- Higher rates of problem behavior in siblings\(^3,4\)
- Parental unemployment\(^5,6\)
- Significant increase in total lifetime costs of care

Current state: often limited to crisis stabilization

- Short-term focus (usually pharmacologic)

Successful long-term outcomes require:

- Function-based treatments
- Levels of service that fit the continuum of severity
- Mediation by caregivers
- Comprehensive/systems approach
- Treatment models that are accessible
Behavioral treatments for problem behavior that are based on the type of problem behavior (e.g., aggression vs. self-injury) are largely hit-and-miss.

Treatment components selected based upon the purpose the behavior serves for the individual (i.e., its “function”) are consistently more effective.

A Continuum of Service Models

Primary
Secondary
Tertiary
A Continuum of Service Models

- Highest severity/lower prevalence
- High investment of resources
- Extremely few providers
- Rooted in applied behavior analysis

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A Continuum of Service Models

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- Lowest severity/highest prevalence
- Small investment of resources
- More providers
- Rooted in clinical psychology

Tertiary

Secondary

Primary
Two groups of clinicians/researchers have been working independently on developing behavior treatments for problem behavior in children with ASD.
Applied Behavior Analysis

Most severe cases

Small-n designs

Individualized interventions

Basic mechanisms & internal validity
Unifying Differing Perspectives/Approaches

Applied Behavior Analysis
- Most severe cases
- Small-n designs
- Individualized interventions
- Basic mechanisms & internal validity

Clinical Psychology
- Less severe cases
- Group designs
- Manualized interventions
- Exportability & external validity

Challenges/Opportunities: Bridge the divide between perspectives
- Address the questions that remain unanswered on each side using whatever methods are most appropriate
A Continuum of Service Models

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A Continuum of Service Models

- Tertiary
  - Highest severity/lower prevalence
  - High investment of resources
  - Extremely few providers
  - Rooted in applied behavior analysis

- Secondary
  - Moderate intensity/high prevalence
  - Relatively modest investment of resources
  - Limited providers

- Primary
  - Lowest severity/highest prevalence
  - Low investment of resources
  - More providers
  - Rooted in clinical psychology
Behavioral treatments for problem behavior are usually caregiver mediated.

Buy-in is almost always high initially, but sometimes degrades.

**Challenge/Opportunity:** Studying factors that affect caregiver buy-in are as important as research on refining treatment procedures.

- Delay to treatment outcome
- Effort required to implement treatment
Behavioral Economic Approaches to the Study of Caregiver Buy-in

\[ V = \frac{V}{(1+kD)} \]

Call, Reavis, McCracken, Gillespie, & Scheithauer (2015)
Comprehensive/Systems Approach

Caregiver implementation of treatments is often limited by extraneous factors

– Poverty, underemployment, lack of social supports

• Pre-admission assessment of the environment and identification of barriers to treatment success

• Care coordination to provide wrap-around services

Challenge/Opportunity: Care coordination is generally unreimbursed
Limited number of providers lead to waiting lists and less availability for rural populations

Telehealth
  • Clinic-to-clinic
  • Clinic-to-home

**Challenge/Opportunity:** poor reimbursement and unclear regulation of telehealth
Thank You

Joanna Lomas Mevers
Mindy Scheithauer
Sarita Miller
Stephanie Kincaid
Jennifer Hodnett
Andrea Reavis
Ally Coleman
Sarah Wymer
Seth Clark
Natalie Parks
Megan Wiggins
Christina Simmons
Courtney McCracken
Scott Gillespie