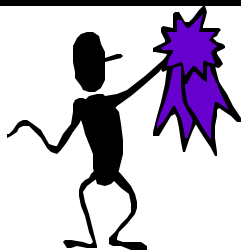


AUTISM

AND RELATED DEVELOPMENTAL DISABILITIES

VOLUME 19, ISSUE 4

NOVEMBER 2003



ABA AUTISM SIG 2003 STUDENT RESEARCH CONTEST WINNER

CONGRATULATIONS TO
LISA TULLY !!!

Do Group Level Patterns of Speech Sound Development Apply to the Individual with Autism?

Lisa Tully¹, Joseph McCleery¹, L. Robert Slevc², & Laura Schreibman¹

¹Autism Research Laboratory, ²Language Production Laboratory, University of California, San Diego

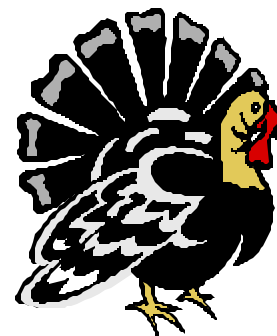
INTRODUCTION

Researchers have documented speech sound production patterns in typically developing infants and children. The data indicate that, at the group level, certain consonants are generally produced earlier in development (e.g., **d, b, h, m, n**) than other consonants (e.g., **j, l, r, s, t**) (Robb & Bleile, 1994). These same speech sound production patterns have also been documented in children with language-learning impairment in the absence of autism or other neurological disorder (see Leonard, 1998). To our knowledge, however, no one has evaluated speech sound production patterns in young non-verbal and minimally verbal children with autism.

Research on behavioral interventions for speech skills in children with autism indicates that utilizing methods to increase child motivation (e.g., incorporating child choice, reinforcing directed attempts) significantly increases learning (Koegel, O'Dell, & Koegel, 1987). Employing a child's pre-existing speech sounds may be one technique of increasing speech motivation. In a clinical study of non-verbal children with autism, Koegel and Traphagen evaluated the effects of speech sound vocabulary on word learning and showed that the children were significantly more successful in learning to produce new words comprised of sounds they were already producing than new words comprised of sounds they were not yet producing (Koegel & Traphagen, 1982).

If children with autism present with the same speech sound production patterns as typically developing and language-learning impaired children, the selection of speech sounds for behavioral intervention based on developmental level should be able to be used to increase child motivation and, thereby, increase treatment efficacy.

The current study is an on-going evaluation of speech sound development in young non-verbal and minimally verbal children with autism/PDD-NOS, in which we are comparing the speech sound development of these children with documented patterns of speech sound development in typically developing and language-learning impaired children.



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PARTICIPANTS

Ten children with autism, eight boys and two girls, age 2- to 6-years, have participated thus far. According to parent report (MacArthur Communicative Development Inventory, Fenson et al., 1993), all participants were producing fewer than 15 words upon entering the study. None of the children had oral motor or hearing abnormalities.

# of Participants	Chronological Age Range	Verbal Production Range
10	2 yrs, 3 mo - 6 yrs, 2 mo	0 - 12 words

METHODS & DESIGN

Over the course of 6 videotaped laboratory visits, spontaneous and imitated speech sounds were recorded during a naturalistic play-based assessment. During the first 2 - 3 visits, the therapist attempted to engage the child in play to provide opportunity for spontaneous babble and/or word production. During the following 3 - 4 visits, the therapist randomly administered 10 verbal prompts (e.g., "buh") for each consonant scored.

Videotaped sessions were scored in 15-second intervals for the production of the following consonants.

b, d, g, h, m, n, w, p, t, k, j, l, r, s

Proportions of production for each consonant were created for each child via a ratio of intervals in which each particular consonant was produced divided by all intervals in which any consonant scored was produced by that particular child.

Within-subjects statistical analyses were then conducted in an effort to determine whether or not the well-documented speech sound development patterns found in both typically developing and language-learning impaired children (see Leonard, 1998, Robb & Bleile, 1994) are present in children with autism. Of particular interest is the relationship of those sounds known to be produced early in speech development (e.g., **d, b, h, m, n**) and those known to be produced later (e.g., **j, l, r, s, t**).

RESULTS

Developmentally Easier versus Developmentally More Difficult Consonants

A matched-pairs *t*-test was conducted to determine if the speech sound development patterns of typically developing children also apply to children with autism. Subsets of the consonants we scored were categorized according to their developmental difficulty as documented in the phonological literature.

These groupings are as follows:

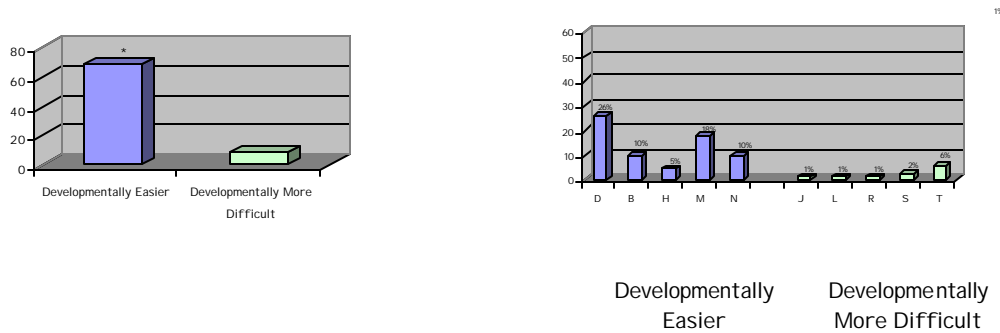
Developmentally Easier: **d, b, h, m, n**

Developmentally More Difficult: **j, l, r, s, t**

The matched-pairs *t*-test yielded significant results ($t(9) = -6.67, p < .0001$). Since proportions are not normally distributed, a Wilcoxon Signed-Rank test was conducted as this test does not assume normality. This test was also significant ($z = -2.70, p < 0.01$). The consistent results of these two tests indicate that developmentally easier sounds represent a higher proportion of the children's consonant production than do developmentally more difficult sounds. *See Figure 1*

Figure 1

Developmentally Easier vs. Developmentally More Difficult Consonants Across 10 Subjects

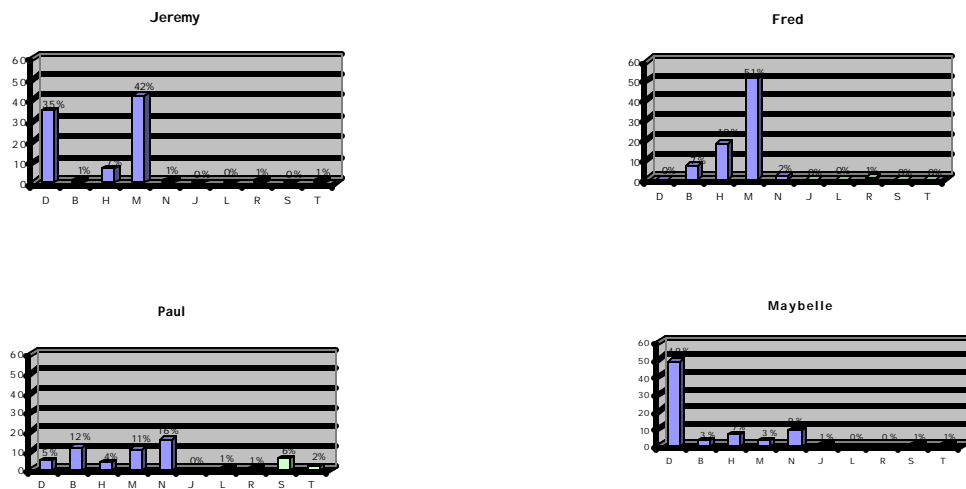


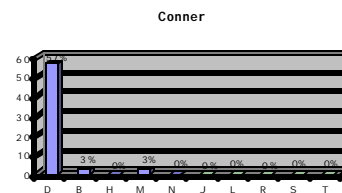
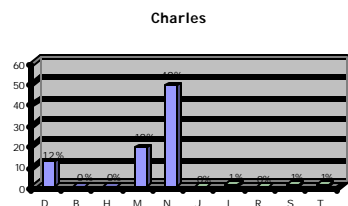
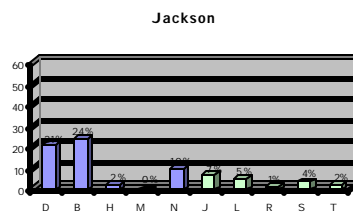
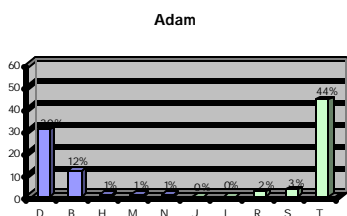
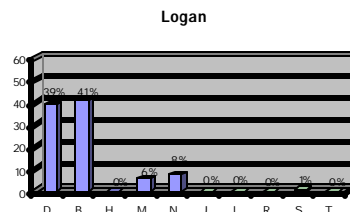
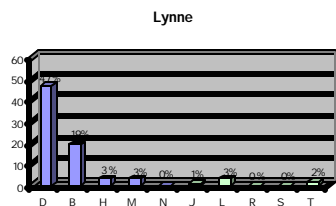
Speech Sound Profiles of Individual Subjects

The variability of speech sound production within and between subjects was considered using the speech sound profiles of individual subjects. Dissociation's were found within the developmentally easier category, such that many of the children produced most, but not all, of the easier sounds and there was no consistency as to which sound was absent. For example, Lynne and Conner produced 'd' but not 'n' while the opposite was true for Fred. Jackson, the oldest subject, emitted the highest rate of developmentally more difficult sounds, yet he lacked the developmentally easier sound 'm'. A similar phenomenon was noted with Adam, who produced a developmentally more difficult sound ('t') at a high rate before producing developmentally easier sounds ('h', 'm', 'n'). See Figure 2.

Figure 2

Speech Sound Profiles of 10 Subjects





DISCUSSION

Thus far, our results indicate that children with autism present with the same group level developmental speech sound production patterns as typically developing and language-learning impaired children. The distinction between developmentally easier and developmentally more difficult sounds is fairly consistent across children. However, individual variability is present. There appears to be no concrete hierarchy of sounds within the developmentally easier category, such that each of the five easier sounds were absent from at least one child's profile, but not from all of the children's profiles. Also, for some children, the production of individual developmentally more difficult sounds preceded that of developmentally easier sounds.

Our results also provide support for the common practice of a number of clinicians, particularly speech-language pathologists and developmental psychologists, who propose the teaching of developmentally easier sounds (e.g., **d, b, h, m, n**) before the teaching of developmentally more difficult sounds (e.g., **j, l, r, s, t**) in young and/or severely language-impaired children with autism. This methodology is likely to increase child motivation and maximize learning by capitalizing on developmental patterns. However, consideration must be taken for each individual child's speech sound vocabulary.

This study is being conducted in partial completion of the requirements for Departmental Honors in Psychology at UCSD, and is funded in part by a Psi Chi Undergraduate Research Grant and a UCSD Undergraduate Scholastic Research Grant awarded to Lisa Tully.



ADVERTISEMENTS

The Douglass Developmental Disabilities Center is seeking a Staff Trainer to work with staff in the implementation of ABA teaching methods. Duties include didactic and hands-on training, especially modeling of instructional skills and the provision of feedback to staff on skill demonstration. Prefer master's degree and ABA certification. Competitive salary and excellent benefits. Send resume to:

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**Association for the Advancement of Behavior Therapy
37th Annual Convention
Boston, MA**

Schedule of Autism and Developmental Disabilities Events

Friday, November 21, 2003

8:45-10:15 am

SIG Meeting

Autism and related Developmental Disabilities

Nantucket Room

Jan Handleman, SIG Leader

After reviewing recent SIG activities and business, there will be a talk on working with families of children with autism when there are complicating factors such as mental illness or stress.

10:30-12:00 pm

Panel Discussion 6

From Research to Treatment: Issues and Challenges in Working with Individuals with Developmental Disabilities

Boston University Room

Moderator: Paul Deal, The University of Mississippi

Panelists: Lara S. Head, The University of Mississippi
Kolleen E. Hurley, The University of Mississippi
Jennifer V. Wood, The University of Mississippi

1:00-4:00 pm

Workshop 9

Natural Setting Therapeutic Management: A Multiple Model Approach to Maintain Individual with Developmental Disabilities and Severe Behaviors in Community Settings

Tufts Room

Michael R. Petronko, Russell J. Kormann, & Doreen DiDomenico
Rutgers University

6:30-8:30 pm

SIG Exposition and Cocktail Party

Grand Ballroom

Autism Related Posters:

Establishing the Effects of Fluency-Based Instruction on Adolescents and Adults with Autism: A Pilot Study

Marlene Cohen, Donna Sloan, & Jacqueline Wright,
Douglass Developmental Disabilities Center

Stress & Autism: Assessment & Intervention

Groden, J., Goodwin, M., Baron, G., Diller, A., Groden, G., Velicer, W., Lipsitt, L., & Hofman, S., The Groden Center

Fear Potentiated Startle and Autism

Raphael Bernier, & Geraldine Dawson, University of Washington

Home-Based Treatment Package to Reduce Throwing Behavior in a Three-Year-Old Autistic Boy

Jodie Regan, Raegan Quigley, & Michael Apolito, The Groden Center

Follow-Up Study on the Reliability of the Detailed Behavior Report (DBR) in Documenting Functional Assessment Observations

Gerald Groden, Stephen Porter, & Andrea Pingitore, The Groden Center

The Treatment of the Behavioral Sequelae of Autism with Dextromethorphan: A Case Report

Cooper Woodard, Cori Shanower, Joanne Bianco, June Groden, & Matthew Goodwin, The Groden Center

Identifying Benchmarks of Social Competence to Evaluate Autism Treatment Outcome

Megan Martins, Lara Delmolino, & Jennifer Branin, Rutgers, the State University of New Jersey

Exploring Relationships Between Stereotypical Behavior Patterns and Heart Rate in a Person with Autism

Matthew S. Goodwin & Stacey Considine, The Groden Center

Saturday, November 22, 2003

9:15-10:45 am

SIG Meeting

Developmental Disabilities

Yarmouth Room

Russell J. Kormann, SIG Leader

We will meet to discuss the influence that AABT can have on the field of DD. Issues that affect individuals with a DD and their families have historically been the focus of the DD SIG as well as policy issues that shape the field. AABT can play an increasingly important role in the provision of quality services to one of the most vulnerable populations. The SIG meeting will address these roles.

1:00-2:00 pm

Clinical Roundtable 10

Cognitive Behavior Therapy for Individuals with Cognitive Deficits: Challenges, Process, and Future Directions

Boston University Room

Moderator: Michael R. Petronko, Rutgers University

Panelists: Russell J. Kormann, Rutgers University
Kathleen Hadley-Martinez, Rutgers University
Julia Turovsky, Rutgers University

2:15-3:45 pm

Panel Discussion 21

Use of Cognitive Behavior Therapy With a Population of Autism Spectrum Disorder

Boston University Room

Moderator: June Groden, The Groden Center, Providence, RI

Panelists: Gerald Groden, The Groden Center
Kelley Harrison, The Groden Center
Patricia Le Vasseur, The Groden Center
Amy Diller, The Groden Center

2:15-3:15 pm

Poster Session 11

Developmental Disabilities and Autism

University of Massachusetts Exhibit Hall

Discriminant, Convergent, and Discriminative Validity of the Asperger's Syndrome Diagnostic Scale

Koren M. Boggs, Brenda J. Benson, Rebecca S. Griffin, Amy G. Chapman, & Alan M. Gross, University of Mississippi

A Preliminary Investigation of Teacher's Beliefs About Autism: Impact on Classroom Intervention Acceptability

Robert Brubaker, Myra Beth Bundy, Teri Cox, Matthew Winslow, & Gene Wolf, Eastern Kentucky University

Differential Diagnosis of Children with Pervasive Developmental Disorders: The Use of Autism Specific and General Measures

Carla A. DiSalvo & Donald P. Oswald, Virginia Commonwealth University

Introducing the L.U.N.C.H. Group Program: A Time-Limited Group Treatment for Children and Adolescents with Asperger's Syndrome and Related Social Challenges

Bruce M. Gale & Julie A. Yamashita, Cedars-Sinai Medical Center, Los Angeles and UCLA

Social Skills Deficits in Children with Asperger's Disorder: Factors Influencing Effectiveness of Motivational Systems

Jennifer M. Gillis & Stephanie B. Lockshim, SUNY at Binghamton

Peer-Mediated Behavior Change: Application to Asocial Behavior in Children with Autism

Jennifer M. Gillis, Catherine Perna, & Stephanie B. Lockshim, SUNY at Binghamton

Social Skills Training for Individuals with Mental Retardation: Implications for Behavioral Functioning in Group Home and Supervised Workshop Settings

Lara S. Head & Paul Deal, The University of Mississippi

Stress and Stress Vulnerability: A Review of the Generic Stress Literature With a Developmentally Disabled Population Toward Integration and Synchrony

Katherine Hadley-Martinez & Michael Petronko, Rutgers University

Modifying Cognitive Behavioral Interventions for Individuals with Developmental Disabilities and Comorbid Mental Illness

Robin A. Chapman & Karen J. Shedlack, McLean Hospital, Belmont, MA & Harvard Medical School & Tommy Stoddard, McLean Hospital, Belmont, MA & Vinfen, Cambridge, MA

Multiple Effects of Family-Centered Positive Behavior Support on Young Children with Autism/PDD and Their Families

John F. Innis, SUNY at Stony Brook, Emily A. Jones & Kathleen M. Feeley, Long Island University-Southampton, & Edward G. Carr, SUNY at Stony Brook & Developmental Disabilities Institute

Teaching Self-Control Strategies to Children with Developmental and Emotional Disabilities: An Examination of Factors Contributing to Active Refusal of Generalization

Sara White, Betty Horng, & Stephanie Lockshin, SUNY at Binghamton

Anxiety and Autism: Expanding the Behavioral Treatment Approach

Karla J. Doepke, Holly J. Zumpfe, & Eric E. Pierson, Illinois State University

Sunday, November 23, 2003

8:45-10:15 am

Symposium 82

Behavioral Medicine in the Developmental Disabilities: Issues in Assessment, Intervention, and Behavioral-Pharmacology
MIT Room

Chair: Joseph N. Ricciardi, May Institute for Early Childhood Education

Treatment and Management of Complicated Elimination Disorders in Children with Developmental Disabilities

Joseph Ricciardi & Lori McCann Sawyer, The May Center for Early Childhood Education, & James Luiselli, The May Center for Applied Research

Descriptive Assessment of Sleep Patterns Among Community-Living Adults with Developmental Disabilities

James Luiselli, The May Center for Applied Research, & Christine Magee & James M. Sperry, The May Center for Adult Services.

The Interaction Between Behavior Therapy and Pharmacology: Models of Care and Case Examples

Jeffery J. Skowon, The May Institute and The Center for Children and Families at St. Anne's Hospital, Fall River, MA

AABT Reminders!!!!

Attention Students: If you are the first author on a poster accepted at AABT, you may be eligible to enter the AABT Autism SIG Student Research Contest!! Contact the editor for more information or come to the Autism SIG Meeting at AABT.

If you want to continue your classification as an AABT SIG member, you must become an AABT member as well. Please see the website for membership information:

www.aabt.org



PIPELINE PUBLICATIONS

Listed below are recently published behaviorally oriented articles focusing on assessment and treatment for individuals with autism and related disabilities.

- Ahearn, W. H. (2003). Using simultaneous presentation to increase vegetable consumption in a mildly selective child with autism. *Journal of Applied Behavior Analysis, 36*, 361-367.
- Becker-Cottrill, B., McFarland, J., & Anderson, V. (2003). A Model of Positive Behavioral Support for Individuals with Autism and Their Families: The Family Focus Process. *Focus on Autism and Other Developmental Disabilities, 18*, 113-124.
- Boettcher, M., Koegel, R.L., McNeerney, E. K., & Koegel, L. K. (2003). A family-centered prevention approach to PBS in a time of crisis. *Journal of Positive Behavior Interventions, 5*, 55-59.
- Buschbacher, P. W., & Fox, Lise. (2003). Understanding and intervening with the challenging behavior of young children with autism spectrum disorder. *Language, Speech & Hearing Services in the Schools, 34*, 217-227.
- Campbell, J. M. (2003). Efficacy of behavioral interventions for reducing problem behavior in persons with autism: a quantitative synthesis of single-subject research. *Research in Developmental Disabilities, 24*, 120-138.
- Crosland, K. A., Zarcone, J. R., Lindauer, S. E., Valdovinos, M. G., Zarcone, T. J., Hellings, J. A., & Schroeder, S. R. (2003). Use of Functional Analysis Methodology in the Evaluation of Medication Effects. *Journal of Autism & Developmental Disorders, 33*, 271-279.
- Galiatsatos, G. T., & Graff, R. B. (2003). Combining descriptive and functional analyses to assess and treat screaming. *Behavioral Interventions, 18*, 123-138.
- Hastings, R. P. (2003). Behavioral adjustment of siblings of children with autism engaged in applied behavior analysis early intervention programs: The moderating role of social support. *Journal of Autism & Developmental Disorders, 33*, 141-150.
- LeBlanc, L. A., Coates, A. M., Daneshvar, S., Charlop-Christy, M. H., Morris, C., & Lancaster, B. M. (2003). Using video modeling and reinforcement to teach perspective-taking skills to children with autism. *Journal of Applied Behavior Analysis, 36*, 253-258.
- Lerman, D. C., Kelley, M. E., Vorndran, C. M., & Wan Camp, C. M. (2003). Collateral effects of response blocking during the treatment of stereotypic behavior. *Journal of Applied Behavior Analysis, 36*, 119-123.
- Mithaug, D. K., & Mithaug, D. E. (2003). Effects of teacher-directed versus student-directed instruction on self-management of young children with disabilities. *Journal of Applied Behavior Analysis, 36*, 133-136.
- Pelios, L. V., MacDuff, G. S., & Axelrod, S. (2003). The effects of a treatment package in establishing independent academic work skills in children with autism. *Education & Treatment of Children, 26*, 1-21.
- Polirstok, S. R., Dana, L., Buono, S., Mongelli, V., & Trubia, G. (2003). Improving functional communication skills in adolescents and young adults with severe autism using gentle teaching and approaches. *Topics in Language Disorders, 23*, 146-153.
- Reese, R. M., Richman, D. M., Zarcone, J., & Zarcone, T. (2003). Individualizing functional assessments for children with autism: The contribution of perseverative behavior and sensory disturbances to disruptive behavior. *Focus on Autism & Other Developmental Disabilities, 18*, 89-94.
- Reese, R., Richman, D. M., Zarcone, J., & Zarcone, T. (2003). Individualizing Functional Assessments for Children with Autism: The Contribution of Perseverative Behavior and Sensory Disturbances to Disruptive Behavior. *Focus on Autism and Other Developmental Disabilities, 18*, 89-94.
- Rehfeldt, F. A., & Chambers, M. R. (2003). Functional analysis and treatment of verbal perseverations displayed by an adult with autism. *Journal of Applied Behavior Analysis, 36*, 259-262.
- Rehfeldt, R. A., & Chambers, M. R. (2003). Functional analysis and treatment of verbal perseverations displayed by an adult with autism. *Journal of Applied Behavior Analysis, 36*, 259-261.
- Rehfeldt, R. A., Latimore, D., & Stromer, R. (2003). Observational learning and the formation of classes of reading skills by individuals with autism and other developmental disabilities. *Research in Developmental Disabilities, 24*, 333-358.
- Ricciardi, J. N., Luiselli, J. K., Terril, S., & Reardon, K. (2003). Alternative response training with contingent practice as intervention for pica in a school setting. *Behavioral Interventions, 18*, 219-226.
- Roane, H. S., Fisher, W. W., & McDonough, E. M. (2003). Progressing from programmatic to discovery research: A case example with the overjustification effect. *Journal of Applied Behavior Analysis, 36*, 35-46.
- Schoen, A. A. (2003). What potential does the applied behavior analysis approach have for the treatment of children and youth with autism? *Journal of Instructional Psychology, 30*, 125-130.
- Symons, F. J., Hoch, J., Dahl, N. A., & McComas, J. J. (2003). Sequential and matching analyses of self-injurious behavior: A case of overmatching in the natural environment. *Journal of Applied Behavior Analysis, 36*, 267-270.
- Whalen, C., & Schreibman, L. (2003). Joint attention training for children with autism using behavior modification procedures. *Journal of Child Psychology & Psychiatry & Allied Disciplines, 44*, 456-468.



SERVICES FOR FAMILIES

We are continuing a series focused on services for families in which we will provide descriptions of programs for individuals with autism and the family services and programs that they provide. If you are interested in submitting information about your program, please contact the editor.

AN OVERVIEW OF THE DOUGLASS SCHOOL

The Douglass School, a division of the Douglass Developmental Disabilities Center (DDDC), is a center-based, college operated program providing comprehensive services for families with individuals (ages three to twenty-one) having an autistic spectrum disorder. The DDDC, and, in turn, the Douglass School, is affiliated with the Graduate School of Applied and Professional Psychology (GSAPP) at Rutgers, the State University of New Jersey, and a member of the Center for Outreach and Services for the Autistic Community (COSAC). COSAC, a non-profit organization, is a resource center providing information to parents and all interested persons about schools, services and programs available for individuals with autism in the state of New Jersey.

The Douglass School provides specialized educational services to learners with autism and their families utilizing state-of-the-art techniques based on the principles of Applied Behavior Analysis. We focus our attention on teaching individuals to compensate for the effects of their disorder. To this end, the school emphasizes the need for cooperative involvement of family members in every aspect of the educational process including decisions regarding planning, programming, and evaluation.

Family Services

Many types of services are offered to the parents and families of Douglass School students. These include:

- * Two Saturday parent-training sessions that are provided when students initially enter the program. These sessions introduce parents to the science of Applied Behavior Analysis and the many strategies used to implement behavioral technology.
- * On-going parent training provided through home-based consultation, seminars, and visits to the center.

In addition, regularly scheduled evening meetings allow guest speakers to present on topics of importance to the families of students with autism. Two parent support groups are offered, generally on a monthly basis. One group is comprised of parents of preschool students, the other of parents of upper school students. Clinical psychologists typically facilitate these groups. Finally, sibling groups are run for both children and adolescents who have brothers or sisters with autism. These groups allow the siblings to interact with peers who share similar experiences and to address issues and express feelings related to having a brother or sister with autism.

Home-based consultation is the heart of our support services. The DDDC recognizes the vital role parents/guardians play in teaching their child appropriate behaviors and in assuring the generalization and maintenance of skills acquired in the school setting. Therefore, a solid working partnership between parents/guardians and professionals is necessary. Four senior staff members, called home-school consultants, work specifically on developing and maintaining such a partnership.

At the Douglass School, two home-school consultants split each of three preschool classrooms. Two other home-school consultants work in the four upper school classrooms with two assigned classrooms per consultant. Preschool home visits are available twice per month and upper school visits occur once each month. Typically, home-school consultants meet with classroom teachers weekly to get programming updates, schedule time to work in class to keep current on (each child's) programming, and to work with the teacher to incorporate a broader perspective on functional programming for individual students. During home visits, home-school consultants train parents/guardians to use behavioral technology to help their child learn new skills, generalize and maintain acquired skills, and decrease challenging behaviors. In addition to designing interventions and modeling techniques, they assist parents/guardians in procuring and developing materials (e.g., visual cues, photo activity schedules, and social stories), integrating a child into community activities (e.g., gymnastics, karate, religious education, etc.), and supporting parents/guardians in accessing medical intervention (e.g., dentists, hospital visits, etc.).

The overall goals for DDDC home-school consultation are as follows:

- To educate parents/guardians in the concepts and methods of applied behavior analysis.
- To assist the parents/guardians in creating a structured environment in the home.
- To consult with parents/guardians on the development, implementation, and monitoring of programs to create behavior change.
- To assist parents/guardians in accessing additional help from agencies and other professionals.
- To assist parents in integrating their child into the community.

DDDC home-school consultants are a vital part of the team working with each student. They act as a link between a student's two main environments: home and school. They provide parents and teachers with important information necessary to build a total educational environment.

Please send your suggestions of topic ideas for possible inclusion in an upcoming issue of the SIG newsletter to:

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