

Benefits of an Online Small Group Cognitive Behaviour Therapy Program for Autistic Children During the Pandemic: Evidence from a Community-based Implementation Study

Lee, V.¹, Vashi, N.², Sellitto, T.², Roudbarani, F.², Tablon Modica, P.², Pouyandeh, A.², Ibrahim, A.², Ameis, S.H.³, Elkader, A.⁴, Gray, K.M.⁵, Kerns, C.M.⁶, Lai, M-C.³, Lake, J.³, Thomson, K.⁷, & Weiss, J.A.².
¹Carleton University, ²York University, ³Centre for Addiction and Mental Health, ⁴Kinark Autism Services, ⁵University of Warwick, ⁶University of British Columbia, ⁷Brock University

BACKGROUND

- Emotion regulation and mental health problems frequently impact the wellbeing of autistic children
- Outside of the COVID-19 pandemic, 40-70% of autistic children and youth are estimated to have significant emotional and behavioural challenges, including anxiety, depression, and anger (Simonoff et al., 2008)
- Virtually delivered socio-emotional interventions including The Secret Agent Society: Small Group Program (SAS:SG; Beaumont, 2016) may help with these difficulties in *controlled settings*
- Limited understanding of how effective the SAS:SG program is under real world, ecologically valid conditions, where autistic children and youth receive most of their services

OBJECTIVES

- Evaluate the **clinical utility of the SAS:SG program** for improving emotion regulation and social skills, and symptoms of mental health challenges
- Explore **child-level factors associated with the magnitude of change** in intervention outcomes after participating in the program

SECRET AGENT SOCIETY: Small Group Program

Agencies:

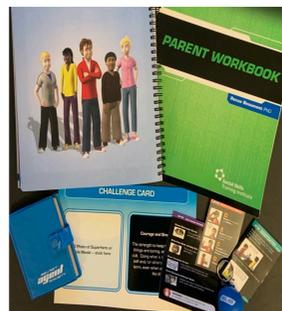
- Seven community-based autism service providers in Ontario
- Each agency provided SAS:SG to 12 families
- SAS:SG included a 10 or 20 week program with a 3-month "booster session"

Child Group Sessions:

- 60-90 minute weekly virtual sessions
- Focused on developing friendships, recognizing emotions, coping with negative feelings

Parent Group Sessions:

- 30-60 minute weekly virtual sessions
- Reviewed concepts and materials from child sessions



PARTICIPANTS

Inclusion criteria:

- Vocal verbal child/youth 8-13 years of age with autism
- Clinically significant levels of mental health challenges
- Family access to quiet working area, technology (i.e., computer or tablet), and high-speed internet
- Parents were available to monitor online group sessions with therapist

Family Characteristics (n = 77)

CHILD	
Age	M = 9.9 years (SD = 1.3 years; Range: 8-12 years)
Gender	20% Female
CAREGIVER	
Age	M = 42.5 years (SD = 5.7 years; Range: 29-52 years)
Gender	95% Female
Marital status	77% Married
Education	100% High school and above
Ethnicity	36% Ethnically diverse

MAIN OUTCOMES

Parents reported improvements in children's emotion regulation, social skills, and symptoms related to anxiety and depression. Children with more difficulties in emotion reactivity pre-intervention demonstrated the greatest improvements.

RESULTS

Table 1. Pre-, Post-, and 3-month parent-reported child outcomes (Means, Standard Deviation)

Variables	Pre-Intervention	Post-Intervention	3-month Booster
ERSSQ	51.0 (10.7)	58.3 (11.1)	39.2 (11.6)**
EDI			
Reactivity	50.2 (6.8)	48.4 (6.8)	46.6 (7.2)**
Dysphoria	48.9 (8.6)	46.6 (8.0)	44.9 (7.6)**
CASI-5			
Separation Anxiety	59.8 (10.3)	58.6 (9.3)	58.5 (9.5)
Social Anxiety	60.6 (9.3)	59.9 (10.5)	58.3 (9.0)
Generalized Anxiety	67.5 (9.3)	64.4 (9.5)	63.6 (9.7)**
Depression	61.0 (11.3)	58.7 (10.6)	57.4 (9.8)**

Note. Booster: 3-month post-intervention group session. ERSSQ: Emotion Regulation and Social Skills Questionnaire (Total Score), EDI: Emotion Dysregulation Inventory (Total T-Score), CASI-5: Child and Adolescent Symptom Inventory, 5th Edition (Symptom Severity T-Score), ** = $p < 0.001$

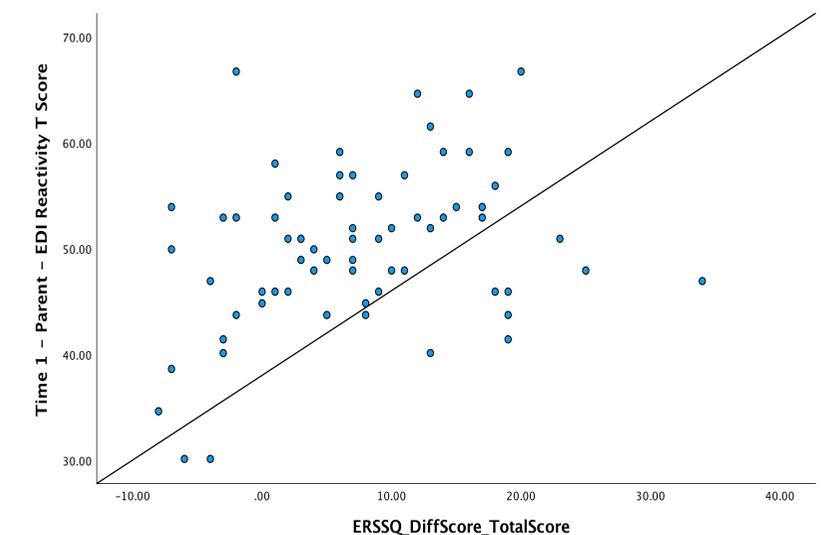


Figure 1. Relationship between scores on pre-intervention EDI Reactivity and ERSSQ change score from pre- to post-intervention. Pearson's $r = 0.32$, $p = 0.01$

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CONTACT: Dr. Vivian Lee (Vivian.lee4@carleton.ca) **TWITTER:** @VivianAprilLee **WEBSITE:** www.carleton.ca/autismlab