

OADD RESEARCH SPECIAL INTEREST GROUP

**26th Annual Research Day
Friday, April 13th, 2018**

**Ambassador Hotel and Conference Centre
1550 Princess Street, Kingston, Ontario**

CONFERENCE PROGRAM



*If you take pictures during the conference or want to live tweet your experiences, please be sure to use the Twitter/Instagram/Facebook hashtag **#OADDRSIG2018** when you post.*

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OADD Research Special Interest Group 26th Annual Research Day

This program contains information about our keynote speaker, as well as abstracts for the two symposium presentations and the six oral presentations. The titles of all poster presentations and authorship are also included in this program. *Full abstracts of poster presentations may be found at <http://oadd.org/affiliate-organizations/rsig-research-day/>.*

Conference Committee

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**It is our sincere pleasure to welcome you to the 26th Annual OADD – RSIG
Conference!**

This conference was designed to bring together researchers, professionals, and other interested individuals working in the field of developmental disabilities to exchange research, ideas, resources, and concerns. The objectives of the conference are to: 1) update research advances in the field and exchange information regarding ongoing research activities; 2) provide networking and collaboration opportunities; and 3) discuss ways to stimulate interest and support for research at the level of institutions, governments, and research funding bodies. To that end, the organizing committee has planned an exciting day of research talks, poster presentations, as well as a round table discussion. We hope you have a great day at the conference!

Abstract Review Process

A subset of the RSIG 2018 Conference Committee reviewed the abstract submissions for both posters and oral presentations. All identifying information was removed from the abstract submission, in order to ensure a blind review by all committee members. Committee members refrained from reviewing abstracts they may have been biased towards to ensure fair review. Abstracts were judged out of a total of 25 points, based on the purpose, methodology, results, conclusions, and clinical or research implications of the submission.

**The RSIG 2018 Conference Committee appreciates all the submissions that were
received for this year's conference.**

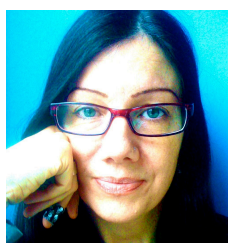
Keynote Address

Nothing About Us Without Us! That Includes Research!



Peter Park, Respecting Rights Co-Founder & Self-Advocate

Peter has dedicated his life to advocating for people who have been labelled with an intellectual disability. He has been involved in research and intellectual disability over a span of 20 years. Peter was institutionalized at age 20, and spent 18 years of his life locked away from the community. From the moment he got out, he has worked to advocate and educate about the rights of all people to make their own decisions and have power in their lives. He has spoken extensively on the realities of living in an institution, the barriers he faced, and the violation of rights that occurred while he was there. After having co-founded People First of Ontario in 1979, Peter has been a leader in Ontario's self-advocacy movement for 40 years. Peter has worked with ARCH Disability Law Centre, and decided in recent years that self-advocacy needed to improve. That's when Peter teamed up with ARCH and co-founded Respecting Rights.



Sue Hutton, MSW

Sue has devoted 25 years to developmental services, working in human rights education for staff, families and people labelled with intellectual disabilities as well as Mindfulness research in the sector. Sue works closely with Peter Park. In 2012 they co-founded Respecting Rights. Respecting Rights is a project at ARCH Disability Law Centre devoted to rights education for people labelled with intellectual disabilities and their support networks across Ontario.

Together Sue and Peter co-published *Rights, Respect and Tokenism: Challenges in Self Advocacy* in 2011 in the *Journal of Developmental Disabilities* as well as *Self-Advocacy: Rising from the Ashes of the Institution* in 2017 in the *Canadian Journal of Disability Studies*.

ABSTRACT

Peter Park brings his 40-year history as a powerful voice for the rights of people labelled with intellectual disabilities to you. He has been actively stirring up change since his release from Oxford Regional Centre in 1978, where he was institutionalized for 18 years.

Peter will be presenting in conversation with MSW Sue Hutton, a collaborator of Peter's in advocacy work and research over the last decade. Peter will share some of his history and discuss the importance of having people labelled with intellectual disabilities actively involved in research. Peter and Sue will speak together about the importance of allies when doing research with people labelled with intellectual disabilities. Issues of inclusion, ethics, consent and capacity will be explored in an interactive presentation. Participants will have an opportunity to explore their own work and find new ways to include people labelled with intellectual disabilities in meaningful ways in research.

SYMPOSIUM 1: MUSIC AND AUTISM: A STRENGTHS-BASED APPROACH TO STUDYING COGNITION AND EMOTION PERCEPTION

*Hadas Dahary, Shalini Sivathanan, Charlotte Rimmer, & Eve-Marie Quintin
McGill University*

MUSIC AND AUTISM: THE RELATIONSHIP BETWEEN EMOTION PERCEPTION AND COGNITIVE FUNCTIONING

*Hadas Dahary & Eve-Marie Quintin
McGill University*

Objectives: Individuals with autism spectrum disorder (ASD) often demonstrate difficulty in processing basic emotions in faces particularly with specific negative emotions, including sadness and fear. However, little research has compared emotion processing of faces to that of other modalities. Music is a powerful emotional vehicle, an area in which individuals with ASD often show great interest and skills, and is thus an alternative (and potentially preferred) domain for measuring emotion processing. Further, studies on emotion recognition with low-functioning adolescents are virtually non-existent, which limit the applicability of findings to individuals with varying cognitive abilities. The purpose of this research is two-fold: 1) To directly compare intensity ratings of music-evoked and facial expressions of emotions, and 2) to extend the applicability of findings to children with varying levels of cognitive functioning.

Methods: Twenty-three adolescents with ASD and low to high scores on the WISC-V Verbal Comprehension Index (50-111) completed three emotion recognition (ER) tasks: A Music ER task and two Facial ER tasks (1. Face Only ER task, 2. Combined ER task). Across the three tasks, the participants identified and rated the intensity of emotions (i.e., happy, sad, or fearful) in music excerpts (Music ER task) and in faces (Facial ER tasks). The Face Only ER task presented each face without the accompaniment of music, while the Combined ER task presented each face simultaneous to music that evoked the same emotion presented on the face. Each ER task included 18 trials (6 trials per emotion) of 4 seconds in length and took about 2-3 minutes to complete.

Results: Participants with lower cognitive ability (VCI: ≤ 80 ; $n=12$) rated emotions more intensely than those with higher cognitive ability (VCI: >80 ; $n=11$) across Music and Facial ER tasks ($p < .01$). However, cognitive ability did not have a significant effect on intensity ratings of specific emotions and intensity ratings of emotions within any of the three ER tasks ($p < .05$). Across participants, a main effect of emotion revealed that happy and fearful were rated more intensely than sad ($p < .01$). A marginal main effect of task showed that participants rated emotions more intensely in the Combined ER tasks than in the Music ER task ($p = .07$). A two-way interaction between task and emotion was also found such that in the Music ER task, fearful and sad were rated more intensely than happy, but in the Combined ER task, the reverse was found ($p < .05$).

Discussion/Conclusions: Adolescents with ASD with lower cognitive ability appear to be more sensitive to emotions presented in faces and music than adolescents with ASD with higher cognitive ability. Higher intensity ratings for arousing emotional stimuli (happy and fearful) may support previous accounts of atypical development or connectivity of limbic brain areas including the amygdala. Findings provide important implications for using strengths-based music education to teach emotion processing skills to adolescents with ASD and to facilitate the inclusion of these children in their classrooms.

**MUSIC AND AUTISM:
ASSOCIATIONS BETWEEN RHYTHM PERCEPTION AND COGNITIVE FUNCTIONING**

*Charlotte Rimmer, Hadas Dahary, Tania Fernandes,
Shalini Sivathanan, & Eve-Marie Quintin
McGill University*

Objectives: Individuals with Autism Spectrum Disorder (ASD) have demonstrated strength in perceiving musical stimuli, with most studies focusing on pitch and melody perception and memory (Heaton, 2009). Few studies have assessed musical rhythm perception of individuals with ASD and found typical performance when processing and producing simple and complex rhythms, which seems associated with visual perceptual skills. However, rhythm perception has not been investigated in relation to ASD symptomology. Further, previous studies have focused on individuals with high cognitive functioning. Thus, the relationship between rhythm perception, ASD symptomology, and cognitive skills remains to be investigated across levels of functioning. The purpose of this research is to assess whether ASD symptomology is related to musical rhythm perception and to examine the influence of varying levels of cognitive functioning on performance of a music rhythms task.

Methods: To date, twenty-seven adolescents with ASD and varying levels of cognitive functioning (WISC-V Verbal Comprehension Index: 45-111; Visual Spatial Index: 57-144) completed a rhythms perception task: an adapted version of the Beat Alignment Test (Iversen & Patel, 2008). Participants listened to short musical excerpts with overlaid beeps (on or off the musical beat) and identified whether the beeps matched the musical beat. Performance was analysed by calculating Hits (number of correct responses for off beat trials/number of off beat trials) minus False Alarms (number of incorrect responses for on beat trials/ number of on beat trials) (HiFA as per Tillman, Schulze, & Foxton, 2009). Teachers completed the Social Responsiveness Scale-2 (SRS-2) questionnaire as a measure of ASD symptomology.

Results: The participants' performance, based on HiFA, was significantly better than chance, $p < .01$. A regression analysis revealed that VSI but not VCI predicted task performance. Regression coefficients indicated that individuals with a lower VSI score performed the Beat Alignment Test less accurately than those with a higher VSI score, $p < .01$. A regression also showed that scores on the SRS-2 Social Motivation Scale predicted performance on the Beat Alignment Test, such that higher difficulties in social motivation resulted in less accurate performance, $p < .05$.

Discussion/Conclusions: Our results are consistent with previous findings showing preserved rhythm perception for individuals with ASD, and that this ability is related to visual spatial skills. Our results support previous research showing that there is a perceptual association between auditory rhythm and visual spatial frequency in the typical population. These results also suggest that music interventions should be approached differently when working with individuals with ASD that have varying symptomology and lower cognitive skills compared to those with higher cognitive skills, particularly in terms of visual spatial skills. The current findings could also help guide the development of music interventions that target cognitive functioning; for example, improving rhythmic skills may be associated with improvement in visual spatial abilities. Given previous reports of musical strengths, we suggest music education including a rhythmic component as a strength-based approach to promote inclusion of this population within the school system.

MUSIC AND AUTISM: AN EXAMINATION OF THE LINK MUSICAL WORKING MEMORY AND COGNITIVE FUNCTIONING

*Shalini Sivathanan¹, Gwenaëlle Philibert-Lignieres¹, Barbara Tillmann²,
Armando Bertone¹, & Eve-Marie Quintin¹*

¹McGill University, ²Université Lyon

Objectives: Individuals with Autism Spectrum Disorder (ASD) often experience social and executive functioning difficulties, and demonstrate strengths and weaknesses in visual-spatial and verbal cognitive skills, respectively. Further, music perception tends to be a strength of people with ASD, who often show comparable levels of interest and responsivity to music with typically developing peers. Most studies in music perception involve the study of music-evoked emotions, pitch melody, and long-term musical memory. On the other hand, one aspect of music-related cognition that has yet to be systematically assessed in people with ASD is musical working memory. Our aims of this research are to: 1) assess whether a short-term musical working memory task can be used to measure working memory, and 2) investigate the relationship between cognitive skills (i.e., visual-spatial, verbal and executive functioning skills), ASD symptomatology, and short-term musical working memory in young people with ASD.

Methods: To date, twenty-seven adolescents with ASD and varying levels of cognitive ability (WISC-V Verbal Comprehension Index [VCI]: 45-111; Visual Spatial Index [VSI]: 57-144) participated in this study. To assess short-term musical working memory, sequences of 3, 4, and 5 pitches were presented in pairs to participants, who were asked to identify whether sequence-pairs were the same or different. Performance on the musical working memory task was calculated using Hits minus False Alarms (HiFA). Teachers completed the Social Responsiveness Scale-2 (SRS-2) and the Behaviour Rating Inventory of Executive Function-2nd Edition (BRIEF-2) questionnaires.

Results: Performance of adolescents with ASD based on a Hits – False Alarms calculation, was significantly above chance on the short-term musical working memory task for the 3- and 4-pitch sequences conditions, and below chance-level on the 5-pitch sequence condition. Further, a hierarchical linear regression revealed that overall task performance was associated with higher VSI and fewer Restrictive and Repetitive Behaviours (SRS-2). There was no significant relationship of performance with VCI or with the Global Executive Composite of the BRIEF-2.

Discussion/Conclusions: These findings add to the growing evidence of preserved or enhanced music perception skills of individuals with ASD. Results reveal that these strengths extend to musical working memory, specifically for 3 and 4 pitch sequences. Results are in line with those of previous work showing an association between (non-musical) short-term working memory and visual-spatial skills of people with ASD. Findings also suggest that music tasks can tap into working memory while minimizing reliance on verbal skills, which can be an area of challenge for some people with ASD. Additionally, these findings lend support toward the use of strengths-based music education and music interventions that incorporate pitch discrimination (e.g., working memory tasks).

SYMPOSIUM 2: THE USE OF FOCUS GROUPS TO ENGAGE PERSONS WITH INTELLECTUAL DISABILITIES IN RESEARCH AND KNOWLEDGE MOBILIZATION PROCESSES

*Virginie Cobigo, Lynne A. Potvin, Hajer Chalghoumi, Rawad Mcheimech, Casey Fulford, & Natasha Plourde
University of Ottawa*

Focus groups are considered as one of the most inclusive method for conducting research compared to other methods of data collection such as interviews. Focus groups have been successful in previous research with persons with intellectual and development disabilities (IDD). Focus groups tend to lower “the researcher’s symbolic power by giving him/her the role of moderator and shifting the focus on the topic and less on him/her. In this context, participants also benefit from the support of their peers. Focus group discussions are also flexible and adaptable as they are based on open-ended questions and allow for the exploration of novel ideas brought forward in the group interaction. Finally, focus groups offer a sense of security and a genuine opportunity for the participants to meet other persons who are interested in their opinion. Despite all these advantages, focus groups are not used as often as other research methods when it comes to engaging persons with IDD in research. Our research team employs diverse research methods, including focus groups. Our experience has shown us that focus groups are, generally, well suited to engage persons with IDD in research and knowledge mobilization processes; however, specific accommodations are needed for a successful inclusive project. This symposium will identify successes and challenges we faced when using focus group as an inclusive research method with persons with IDD. Each of the 3 presentations will illustrate different accommodations we used to make focus group more efficient. They will cover the following topics: 1) recruiting and obtaining free and informed consent, 2) moderating and conducting focus groups, and 3) focus groups as part of the knowledge mobilization process.

ETHICAL CONSIDERATIONS AND THE FOCUS GROUP: RECRUITMENT, VOLUNTARY AND INFORMED CONSENT, AND CONFIDENTIALITY

*Lynne A. Potvin & Virginie Cobigo
University of Ottawa*

Despite that many persons with intellectual and developmental disabilities (IDD) are capable and want to be included in research, information about this population is often indirectly acquired through third parties, such as caregivers. Persons with IDD may be vulnerable to harm, exploitation, and exclusion; however, this should not limit their inclusion in research activities. As researchers, it is therefore our ethical duty to implement strategies to facilitate participation in research and safeguards to limit harm in the same context.

This presentation will provide examples of good practices, which are based on ethical principles, for including persons with IDD in focus groups for research. We will focus on themes of recruitment, voluntary and informed consent, and confidentiality.

Our exemplified strategies will draw upon various research projects conducted by our research team members with persons with IDD.

Much like conducting research interviews, good practices include rendering information accessible to prospective participants with IDD to facilitate recruitment and promote inclusion in research. Accessible information also increases participant autonomy and supports their right to make informed choices regarding research participation. With focus groups, however, confidentiality and consent warrant additional measures as research participants are exposed to a variety of sources of personal information and influence.

CONDUCTING FOCUS GROUPS WITH PERSONS WITH IDD
Hajer Chalghoumi, Rawad Mcheimech, and Virginie Cobigo
University of Ottawa

We will present the lessons learned in a project that used focus groups with persons with IDD and their caregivers as the method of data collection. Our project aimed to develop and validate a framework on ethical factors that impact technology adoption by aging persons with IDD and their caregivers. We studied the ethical dilemmas arising during the development of a mobile application to promote safe and rational medication use by persons with IDD. A series of 5 semi-structured focus groups were conducted with 6 persons with IDD.

This presentation will illustrate proposed accommodations to the focus group method in 3 major categories: 1) Preventing biases; 2) Simplifying research materials, including research questions; and 3) Adapting the logistics and organization of the focus groups to the participants' needs.

Focus groups appear to be an inclusive research method, as long as they allow for the participants' needs to be met. In addition, the moderating skills of the focus group facilitator and his/her understanding of the participants' needs emerged as the most crucial factor affecting the success of the focus groups.

**FACILITATING PARTICIPATION OF INDIVIDUALS WITH IDD AND THEIR CAREGIVERS IN
THE KNOWLEDGE MOBILIZATION PROCESS AT COMMUNITY-BASED SERVICE
AGENCIES**

Casey Fulford, Natasha Plourde, & Virginie Cobigo
University of Ottawa

We have used focus groups as a method to involve persons with IDD in a knowledge mobilization process. The aim of this research was to conduct a process evaluation of two community-based knowledge mobilization interventions that focus on facilitating social relationships for individuals with intellectual and developmental disabilities (IDD). Community-based settings typically value the collaboration of a variety of stakeholders in decision making (Kothari & Armstrong, 2011). Therefore, in addition to working with staff at service agencies, we placed great importance on obtaining feedback from individuals with IDD and their family caregivers. We conducted 8 focus groups with adults with IDD, 2 focus groups with support staff, and 2 focus groups with family caregivers, at two community-based service agencies. We discussed evidence-based strategies for supporting social relationships and obtained suggestions for improving and implementing these strategies. During the focus groups, participants also discussed the current social supports that they receive and they provided feedback and suggestions on how to best provide social support for adults with IDD. After the focus groups, we engaged in follow-up member checking meetings to ensure the validity of the findings.

In this presentation, we will illustrate how focus groups can be used as a way to involve persons with IDD in a knowledge mobilization process, and discuss the facilitators and barriers to self-advocacy for individuals with intellectual disabilities when participating in such a process.

There are a number of stakeholders involved in the knowledge mobilization process in community-based settings. It is crucial that individuals with IDD are provided with opportunities to express their opinions and advocate for themselves. Researchers must be sensitive to the capacities and desires of individuals with IDD when conducting inclusive research. It is also crucial to manage expectations of all stakeholders throughout research and knowledge mobilization processes.

PRESENTATION 1:
TRAINING IN DEVELOPMENTAL DISABILITIES IN CANADIAN
PSYCHIATRY RESIDENCY PROGRAMS

Rob Nicolson & Sarah O'Flanagan
Western University

Objectives: Numerous studies have found that mental health in people with developmental disabilities is a significantly underserved clinical area. Although the Royal College of Physicians and Surgeons of Canada (RCPSC) requires that "Patients with developmental delay across the life span, with or without comorbid psychiatric disorder, must be included" during training in the PGY 2 and PGY 3 years, the type and extent of this experience is not defined. The purpose of this study is to identify the similarities and differences in curricula related to developmental disabilities in Canadian Psychiatry Residency programs.

Methods: This study used a survey with 3 multipart questions. The surveys were sent to Psychiatry Residency directors at all 17 medical schools in Canada. It begins with a question asking participants to identify which University they work at. The identifying data was submitted separately from the 3 multipart questions, thus de-identifying each participant from their subsequent answers.

Results: All respondents report that some form of formal teaching happens in their programs specific to developmental disabilities. The amount of time dedicated to teaching in developmental disabilities varies significantly, from 1 hour of didactic teaching all the way to 21 + hours of didactic teaching. The broad topics covered by each school vary significantly. Some focus on broad Intellectual Disability, some focus on specific diagnoses like Autism Spectrum Disorder, while others do not. Some focus didactic teaching on diagnosis and assessment, while others do not. Only 5 schools require residents in the Psychiatry program to complete a rotation in developmental disabilities, while 12 report that electives are available. These required and elective rotations vary significantly in length, from 1 week to 52 weeks. All schools report that the faculty members and/or lecturers doing didactic teaching and supervising residents are either expert researchers in the field of developmental disabilities, or they are clinicians working with people with developmental disabilities. Each school also differs in where in the patient lifespan rotations in developmental disabilities occur. Most schools report opportunities with exposure to both children and adults with developmental disabilities, but some schools only report rotations specific to developmental disabilities available in child psychiatry.

Discussion/Conclusion: The amount of time dedicated to training Psychiatry residents in Canada varies significantly in both didactic teaching and in clinical opportunities. Depending on at which school a resident completes their training, their exposure to people with developmental disabilities may be significantly different than a graduate from another Canadian Medical School. Differences in requirements may have a significant impact on skills, levels of confidence in treating this population, and quality of care for future psychiatrists working with people with developmental disabilities.

PRESENTATION 2:
**CREATING A 'WELLNESS RESOURCE': UNDERSTANDING HEALTH AND WELLNESS
GOALS FOR YOUTH WITH INTELLECTUAL AND
DEVELOPMENTAL DISABILITIES**

Yani Hamdani & Amy McPherson
Bloorview Research Institute, University of Toronto

Objectives: Youth with intellectual and developmental disabilities (IDD) are more likely to experience diminished wellness across multiple dimensions and decreased quality of health compared to their peers without disabilities. Yet, little is known about how wellness is understood, promoted and addressed for this population. Most research to date has focused exclusively on one wellness dimension (e.g. physical wellness), with limited success in promoting overall wellness. Our research team has been working with Special Olympics (SO) to explore the health and wellness needs of their athletes, who all have IDD. Our current study aims to understand: 1) what contributes to a sense of wellness for athletes, 2) what wellness goals are relevant and important in their everyday lives; and, 3) what resources and supports are needed by SO coaches to promote and support athletes' wellness. Our results will inform the co-creation of a 'Wellness Resource' for athletes, parents/caregivers and coaches.

Methods: This qualitative project (in progress) involves interviews with participants from three stakeholder groups – SO athletes aged 14-25 years old, parents/caregivers and coaches. Our target is 12 to 15 participants per stakeholder group. To date, 5 athletes, 5 parents, and 6 coaches have participated in interviews that explore their perspectives on wellness goals, and the activities and settings associated with a sense of wellness. Athletes participate in a second 'go-along' interview, which involves going on an athlete-guided tour of an activity and setting within which the athlete associates with being and feeling "good" or "well". Data analysis involves a thematic, descriptive analysis of the interview transcripts and the interviewer's observational memos. Similarities and differences between stakeholder groups will be examined. An analytic summary report will be generated for feedback and interpretation at a stakeholder meeting, which will inform the key elements of the Wellness Resource.

Results: Our preliminary results indicate that promoting wellness through physical activity is what attracts athletes and families to SO programs initially. However, participation in these programs impact on many other areas of wellness (e.g., social connection, autonomy, sense of belonging/of being accepted for who they are and what they can do). Athletes' goals include having fun, being with friends and achieving sport-related goals. Parents' goals are around broader wellness issues (e.g., inclusion and belonging, mental wellness, and building confidence). Coaches tend to promote health by focusing on ways to improve athletic performance (e.g., eat healthy, drink water) but would like guidance on wellness promotion.

Discussion/Conclusion: Participation in SO programs offers opportunities to promote health and wellness in multiple dimensions. Athletes, parents/caregivers and coaches have common, but also some different wellness goals, which can be taken into account in developing health and wellness promotion programs and tools. Coaches do not have specific training in health and wellness promotion or about common health issues for people with IDD. Enhancing coach training and creating a Wellness Resource tailored to the wellness goals and learning styles of the key stakeholders can contribute to improving health and wellness outcomes for youth with IDD.

**PRESENTATION 3:
A SYSTEMATIC REVIEW OF POST-SECONDARY TRANSITION INTERVENTIONS FOR
YOUTH WITH DISABILITIES**

**Sally Lindsay^{1,2,3}, De-Lawrence Lamptey^{*1}, Elaine Cagliostro¹, Dilakshan Srikanthan^{1,4},
Neda. Mortaji¹ & Leora Karon¹**

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⁴Neuroscience, University of Toronto

Objectives: Youth with disabilities are less likely to attend higher education, to stay enrolled, and to secure meaningful employment. Consequently, their educational and employment pathways may be disrupted which can have devastating long-term impacts on their career and income. The objective of this systematic review was to understand the best practices and effective components of post-secondary transition interventions for youth with disabilities.

Methods: Systematic searches in six international databases were conducted. Articles needed to meet the following inclusion criteria: (1) at least 50% of the sample has a disability, defined as an impairment in body structure and function; (2) included participants who are between 15-30 years of age; (3) an empirical study reporting on a post-secondary education preparation program or intervention; (4) published in English, from 1997-September 2017 in a peer-reviewed journal. Studies included in the review were analyzed with respect to the participant characteristics, methodology, results, and quality of the evidence. The analysis involved a structured synopsis of the main findings and patterns observed across the studies.

Results: Of 1597 articles found in our search, 18 met the inclusion criteria for this review. These 18 studies were conducted across three countries and represented 2385 participants (aged 13-28, mean 17.7 years). The overall assessment of the rigor of the studies and quality assessment revealed that post-secondary transition interventions are possibly effective. Although the outcomes of the interventions varied across the studies, all of them reported an improvement in at least one of the following: college enrollment, self-determination, self-confidence, social and vocational self-efficacy, autonomy, social support, career exploration, and transition skills. The interventions varied in duration, number of sessions, and delivery format which included curriculum-based, online, immersive residential experience, mentoring, simulation, self-directed, technology-based and multi-component.

Discussion/Conclusions: The findings highlight that post-secondary education interventions can have a beneficial influence on post-secondary and related transition outcomes in youth with disabilities. Notably, the majority of the studies in this review included higher proportions of people with cognitive disabilities (e.g., intellectual and learning disabilities) than other types of disabilities (e.g., sensory impairments). Thus, the positive influence of interventions on post-secondary and related transition skills may be more pronounced in youth with cognitive disabilities than other types of disabilities. Research shows that although youth with disabilities generally have poor transition outcomes, those with cognitive disabilities are more severely affected. Clinicians and educators should consider having multiple components, involving several sessions that include a curriculum, immersive college residential experience, mentoring and/or simulations in their interventions for optimum effectiveness.

PRESENTATION 4: INCOME SECURITY AMONG PEOPLE WITH INTELLECTUAL DISABILITIES: COMPARING STRENGTHS-BASED AND TRADITIONAL EMPLOYMENT SERVICES

**Kelly Carr¹, Laura Chittle¹, Nancy Wallace-Gero², Sean Horton¹,
Patricia Weir¹, & Chad A. Sutherland¹**

¹APEX Research Group, University of Windsor, ²Community Living Essex County

Objectives: Traditional employment services have resulted in employers hiring people with intellectual disabilities (ID) for charitable reasons, with the intent of 'doing the right thing', or as a corporate-social responsibility, which devalues the contribution of these employees. As such, innovative strategies for meaningful incorporation into the labor force are necessary to improve the employment outlook for people with ID. One such approach is strength-based employment services, where job seekers are marketed for their ability to contribute to the workplace. Therefore, the objective of this study was to evaluate these services in terms of obtaining income security among people with ID.

Methods: Income security was operationally defined by three dependent variables: (1) duration of employment, (2) hours worked per week, and (3) hourly wage. Data for each variable were collected from participants receiving support from developmental service agencies that offer strength-based employment services (experimental group; $n = 101$; males = 62, females = 38, unidentified gender = 1) or traditional employment services (control group; $n = 101$; males = 62, females = 35, unidentified gender = 4); which represented the independent variable. A MANOVA was performed to determine if participants receiving support from strength-based or traditional employment services differed in terms of income security. Outliers were removed from the dataset, and appropriate multivariate statistical assumptions were assessed. Significant results yielded from the MANOVA were further examined using discriminant analysis.

Results: Using Pillai's trace, there was a significant difference between type of employment service on the three dependent variables of income security, $V = 0.156$, $F_{(3, 198)} = 12.188$, $p < 0.001$, $\omega^2 = 0.151$. The discriminant analysis identified that the discriminant function, income security, accounted for 15.6% of the variance associated with employment service type, and significantly differentiated between strength-based and traditional employment services, $\Lambda = 0.844$, $\chi^2_{(3)} = 33.638$, $p < 0.001$. The correlations between the discriminating variables and the discriminant function revealed that hourly wage was highly related to income security ($r = 0.884$), which corresponded to the standardized canonical discriminant function coefficient, as hourly wage was given a weight of 0.785. Descriptive statistics evidenced the direction of this finding, as participants supported by strength-based employment services reported a higher hourly wage ($M = \$12.28/\text{hour}$, $SD = \$1.73/\text{hr}$) when compared to participants supported by traditional employment services ($M = \$11.35/\text{hour}$, $SD = \$0.10/\text{hour}$). The remaining discriminating variables did not reveal noteworthy weights or correlations on the discriminant function, and therefore duration of employment, and hours worked per week did not differ between types of employment services.

Discussion/Conclusion: People with ID who obtained strength-based employment experienced increased income security, by means of receiving a higher hourly wage when compared to individuals with ID who obtained work through traditional employment services. Differences in hourly wage corresponded to an 8% pay increase, which supports attainment of financial well-being. However, further investigation is necessary to understand the impact of additional employment characteristics (i.e., hours worked per week, duration of employment) in relation to achieving income security.

PRESENTATION 5: INDIVIDUALLY FUNDED SERVICES AND SUPPORTS IN ONTARIO: WHAT'S AVAILABLE AND HOW IS IT WORKING

Barry Isaacs¹, Frances MacNeil², & Amelia McIntyre¹

¹Surrey Place Centre, ²Community Living Toronto

Objectives: Individualized funding is a way of flowing money directly to individuals so that they can purchase services of supports. It is designed to enhance choice and self determination. In Ontario adults with developmental disabilities (DD) have access such funding through the 'Passport Program'. This funding is designed to increase community participation. Some agencies also develop individualized budgets for their clients and flow money directly to them for services and supports, including residential supports. Although many agencies in Ontario provide Individually Funded Services and Supports (IFSS) to adults with developmental disabilities, there is no provincial framework to support and guide agencies in developing, delivering and evaluating this type service and support. Absent is a clear understanding of how clients, families and agencies define IFSS, how the IFSS provided look, what is working and not working or the results. The purpose of this research was to understand what is happening in the delivery of IFSS in Ontario and what peoples' experiences are. The results were used to develop recommendation for the expansion IFSS in Ontario to maximize the benefits for adults with DD.

Method: Conducted 73 semi-structured interviews with people across Ontario that use or provide support to those using Individually Funded Services and Supports. The participants included 24 adults with developmental disabilities, 31 family members and 18 representatives from agencies that provide IFSS. Interviews were transcribed and coded using Nvivo Software. We also held four regional focus groups with interview participants to discuss the results and develop recommendations on improving the delivery of IFSS in Ontario.

Results: The interview participants identified many benefits to IFSS for adults with developmental disabilities, families, agencies and the community. They included but were not limited to:

- Better understanding of needs and wants when person directed planning is included in the process of developing services and supports
- Increased flexibility, creativity and opportunity in creating services and supports
- Improved quality of life for adults with developmental disabilities
- Several benefits for families were identified such as respite and peace of mind that their family member was getting support that met their needs.

Even though IFSS benefits individuals and families, many challenges were identified. Challenges fell into 3 categories.

- Context Variables (e.g. challenges specific to small communities)
- Limitations in System Capacity (e.g. long wait times)
- Administrative Policy and Procedure (lack of clarity in finding rules)

These issues limit the effectiveness of the funds in meeting the needs of adults with DD.

Discussion/Conclusions: Adults with developmental disabilities are experiencing many benefits from IFSS. There are, however, challenges with using the funds. Recommendation for improving the effectiveness of individualized funds focus on ways to making IFSS more affordable, providing more information about the funding and how to use it effectively, and making it less complex to access and use funds.

PRESENTATION 6: NUTS AND BOLTS OF HEALTH CARE FOR DIRECT SUPPORT PROFESSIONALS

Heather Hermans¹, Mais Malhas², Erin Orr, & Lauren Zaretsky², & Janet Durbin¹

¹Vita Community Living Services, ²Centre for Addiction and Mental Health

Objectives: Adults with developmental disabilities have higher rates of chronic disease and mental illness than other adults (Lunsky et al., 2014). Despite this, they experience challenges accessing appropriate health care services. This project is a partnership between Vita Community Living Services (CLS), Health Care Access Research and Developmental Disabilities, Centre for Addiction and Mental Health, and the National Alliance for Direct Support Professionals to work directly with DSPs at Vita. At Vita CLS, direct support professionals (DSPs) work directly with adults with DD to support them in various ways, including supporting them in accessing and managing their health care. Vita has identified a need to build the capacity of DSPs to better support the health care needs of the individuals they serve. In addition, research indicates that DSPs report lacking education and training in health issues and practices (Dooren, Dean, Boyle, Taylor-Gomez, & Lennox, 2016; Ziviana, Lennox, Allison, Lyons, & Del Mar, 2004).

The first two objectives of this study will be presented here. These include: (1) identifying key gaps in the knowledge and skills of DSPs related to the health care needs of adults with DD, and helping DSPs to develop the capacity of the individuals they are supporting to advocate for their own health care needs; and (2) creating a toolkit comprised of resources that will increase the capacity of staff to prepare for healthcare visits and interact effectively with healthcare providers.

Method: An Implementation Science framework, comprised of Exploration, Installation, Initial Implementation, and Full Implementation phases, will be used. Data from the first two phases will be included in this presentation. The *Exploration phase* will first involve engaging DSPs and adults with DD in the project to increase awareness and involvement in the study. Interviews and focus groups will then be conducted with DSPs (n=50) and adults with DD (n=12) at Vita to gain their perspectives on the challenges they experience around accessing and managing health care. Data from interviews and focus groups will be transcribed and coded to identify key themes. As part of the *Installation phase*, resources for DSPs will be created based on the data obtained through the interviews and focus groups. Feedback from DSPs and individuals with DD will then be sought on these resources in order to improve and finalize the toolkit.

Results: Results regarding staff skills, knowledge, challenges, and needs with respect to health care issues and navigating the health care system from the perspectives of DSPs and members with DD will be presented, along with key themes that were identified.

Discussions/Conclusions: The identified gaps in health care knowledge and training will inform the development of the Nuts and Bolts of Health Care Toolkit. This toolkit will eventually be available to all developmental services agencies in Ontario. Importantly, being able to use these resources will build the capacity of DSPs to better support adults with DD to access, manage, and coordinate their health care.

Awards

Awards Review Process

The 2018 RSIG Conference Awards Committee reviewed all OADD-RSIG Travel Awards and Student Award for Excellence in Research nominations and a recipient was chosen by consensus for each award. Committee members who had known the candidates well (e.g., advisors, lab mates) abstained from participating in the review process.

For the student poster awards, five nominated candidates (nominated by RSIG Abstract Review Committee based on submitted abstracts) were invited to give two-minute presentations to members of the RSIG committee who did not have conflicts of interest, who will judge the posters and candidate presentations at the conference. Prizes will be awarded to two candidates at the RSIG Conference. *Poster award nominees are indicated with an ** in the program.*

2018 Award Recipients:

Student Award for Excellence in Research (\$250 prize)

Dr. Kelly Harding received her PhD in Interdisciplinary Rural and Northern Health from Laurentian University (2017) in Sudbury, Ontario, Canada. Dr. Harding is currently the Research Associate for the Canada Fetal Alcohol Spectrum Disorder Research Network (CanFASD). She is a member of the Ontario Association on Developmental Disabilities (OADD) Research Special Interest Group (RSIG) and a community network member of the FASD Network Sudbury/Manitoulin. Her research focuses on health services in rural and Northern Ontario, with a particular focus on health care professionals in training and their preparation regarding FASD. Current Canadian research suggests that health care professionals lack knowledge in areas such as FASD identification, long-term outcomes of prenatal alcohol exposure, diagnostic criteria, and alcohol-use screening tools. Dr. Harding's doctoral research revealed that while students are aware that no alcohol consumption during pregnancy is the safest recommendation, many students noted that this advice is not always conveyed to pregnant women. Additionally, findings indicated that students hold several stereotypical and stigmatic perceptions of FASD and alcohol use during pregnancy in Northern Ontario. Dr. Harding's work will help improve future health care professionals' confidence, perceived competence, and knowledge of FASD, as well as their ability to appropriately counsel pregnant women about alcohol use during pregnancy.

Travel Awards (\$150 prize)

Hadas Dahary – McGill University
Lauryn Conway – University of Toronto
Joey Robertson – Brock University
Rebecca Hansford – Brock University
Alexandre Dionne – Laurentian University

The RSIG Conference Committee would like to thank all applicants for their submissions this year and encourages all students to apply next year. Thesis advisors and professor – don't forget to nominate outstanding students for the Student Award for Excellence in Research next year! Current and recently graduated students are eligible for this award.

All awards information can be found on our website at <http://oadd.org/affiliate-organizations/rsig-awards/>

Data Blitz Talks

Group 1 (9:25 am – 9:45 am)

- 1. Energy Expenditure of Adults with Autism Spectrum Disorder and an Intellectual Disability During and Adapted Physical Exercise (APEX) Program**
Lainee Tillich, Chad A. Sutherland, Nadia Azar, Sean Horton, & Kelly Carr
University of Windsor
- 2. Exploring the Meaning of Summer Camp with teens with Autism Spectrum Disorders**
Jenna Simpson & Nicole Yantzi
Laurentian University
- 3. Influence of Intellectual Disability on Health-Related Quality of Life in a Surgical Sample of Children with Drug Resistant Epilepsy**
Laurny Conway^{1,2}, Elysa Widjaja¹, & Mary Lou Smith^{1,2}
¹Hospital for Sick Children, ²University of Toronto Mississauga
- 4. Feasibility and Effectiveness of a Randomized Controlled Trial of an Adapted Dialectical Behaviour Therapy Group for Persons with Intellectual Disabilities**
Jessica Jones¹, Mary-Jane Mills-Rogers², Laura Hewett², Meg McQueen¹, Ashleigh Blinkhorn¹, Hannah Goetti¹, Daniel Keogh-Lim¹, Layla Hall¹, Madelaine Gierc¹, Chloe Hudson¹, Lujain Althagfi¹, & Muhammad Ayub¹
¹Queen's University, ²Providence Care, Dual Diagnosis Consultation Outreach Team
- 5. Behavioural Treatment for Dangerous Community Behaviour: Teaching Community Safety Using a Token Economy**
Sarah O'Donoghue & Willie Thorman
Community Living Toronto
- 6. A Component Analysis of Behavioural Skills Training for Teaching Volunteers to Teach Motor Skills to People with Developmental Disabilities**
Sarah Davis, Kendra Thomson, & Maureen Connolly
Brock University

Group 2 (1:15 pm – 1:45 pm)

- 1. Students with Autism Spectrum Disorder in the Post-Secondary Environment: Needs and Available Supports**
Kaitlyn Young & Rosemary Condillac
Brock University
- 2. Investigating Imagination in Adults with Autism Spectrum Disorder with Art-Based Assessments**
Olana Darewych¹, Nicky Newton¹, & Kevin Farrugie²
¹Wilfrid Laurier University, ²Woodview Mental Health and Autism Services

3. Top Intervention Research Priorities of the Ontario Neurodevelopmental Disorder Community: A Consensus Study Engaging Patients, Carers and Other Stakeholders

Jessica Jordao¹, Saskia Kwan¹, Jordan Antflick¹, Carla Southward¹, Sue Lynch², Margaret Spoelstra³, Brendan Andrade⁴, Robert Nicolson⁵, Alana Iaboni⁶, Katherine Cowan⁷, & Evdokia Anagnostou

¹Ontario Brain Institute, ²Community Living Toronto, ³Autism Ontario, ⁴Centre for Addiction and Mental Health, ⁵University of Western Ontario, ⁶Holland Bloorview Kids Rehabilitation Hospital, ⁷James Lind Alliance, Southampton, UK

4. Guidelines on Implementing Aerobic Exercise for People with Autism Spectrum Disorder and an Intellectual Disability

Suzanne Ali, Chad A. Sutherland, Nadia Azar, & Sean Horton
University of Windsor

5. Mild Intellectual Disability in Primary Care Settings: An Exploratory Pilot Study

Meg Gemmill, Mary Martin, Nicole Bobbette, Elizabeth Grier, & Ian Casson
Queen's University

6 The Experiences of Children with Intellectual and Developmental Disabilities in Inclusive Schools in Accra, Ghana

Christiana Okyere, Heather Michelle Aldersey, & Rosemary Lysaght
Queen's University

7 Women's health, alcohol use, and pregnancy: Constructing pop culture television narratives and their implications for FASD prevention

Kelly Harding¹, Shelley Watson², & Kerry McGannon²
¹Canada FASD Research Network, ²Laurentian University

Poster Presentations

1. How Drinking While Pregnant is Portrayed on Television: Implications for FASD Prevention

Alexandre Dionne, Kelly D. Harding, & Shelley L. Watson
Laurentian University

2. Medical Students' Attitudes Towards Patients with Developmental Disabilities

Alicia Groom & Shelley L. Watson
Laurentian University

3. Examining Attitudes and Knowledge of Northern Ontario School of Medicine Students on Autism Spectrum Disorder

Alicia Mendes & Shelley L. Watson
Laurentian University

4. Connecting: The Experiences of Fathers of Children with Neurodisabilities

Aline Bogossian¹, Lucyna Lach¹, David Nicholas², & Ted McNeill³
¹McGill University, ²University of Calgary, ³University of Toronto

5. Feasibility of an Adapted CBT Intervention for People with Intellectual Disabilities: What do Service Leaders Think?

Blair Marcellus, Ashleigh Blinkhorn, Meg McQueen, Jessica Jones, Lujain Althagafi
Amina Nasar, & Muhammad Ayub
Queen's University

6. Feasibility and Effectiveness of a Randomized Controlled Trial of an Adapted Dialectical Behaviour Therapy Group for Persons with Intellectual Disabilities

Mary-Jane Mills-Rogers², Laura Hewett², Ashleigh Blinkhorn¹, Meg McQueen¹, Layla Hall¹, Madelaine Gierc¹, Chloe Hudson¹, Joyce Li¹, Lujain Althagfi¹, & Muhammad Ayub¹
¹Queen's University, ²Providence Care

7. Fetal Alcohol Spectrum Disorder: Medical Students' Knowledge of the Diagnostic Process

Autumn Kozluk, Celisse Bibr, Kelly D. Harding, & Shelley L. Watson
Laurentian University

8. Does Anxiety Inflate Autism Severity Measures?

Azin Taheri¹, Busi Ncube¹, Adrienne Perry¹, & Julie Koudys²
¹York University, ²Brock University
 **Nominated for Poster Award

9. First Step in Solving The Puzzle: A Services and Supports Assessment of ASD In York Region

Brittany Davy & Priscilla Burnham Riosa
Brock University

10. Impact of Social Skills Training on The Number of Romantic and Platonic Social Get-Togethers of Young Adults with Autism

Busisiwe Ncube¹, James M. Bebko¹, Nicole Bardikoff², Marilyn Thompson², Margaret Spoelstra², & LB Brown²
¹York University, ²Autism Ontario

11. Affective Theory of Mind in University Students with Learning Disabilities

Caitlyn Gallant & Dawn Good
Brock University

12. Knowledge and Advice of Northern Ontario School of Medicine Students on The Subject of Fetal Alcohol Spectrum Disorder

Celisse Bibr, Shelley L. Watson, & Kelly D. Harding
Laurentian University
****Nominated for Poster Award**

13. Applying the HC-IDD Frailty Index to Developmental Services Agency Chart Data

Clarabelle Lee¹, H  l  ne Ouellette-Kuntz^{1,2}, & Lynn Martin³
¹Queen's University, ²Ongwanada, ³Lakehead University

- 14. HB First® Robotics: Enhancing Social and Stem Skills Among Children with Disabilities**
De-Lawrence Lamptey¹, Elaine Cagliostro², Dilakshan Srikanthan^{2,3}, Sukyoung Hong^{2,3}, Sandy Dief^{2,3}, & Sally Lindsay^{2,3}
¹Holland Bloorview Kids Rehabilitation, ²Bloorview Research Institute, ³University of Toronto
- 15. “My Doctor Says It’s O.K. to Have a Sip of Wine Every Now and Then” Alcohol Use During Pregnancy on How I Met Your Mother**
Eric Harding, Kelly Harding, & Shelley Watson
Laurentian University
- 16. Findings of the Ontario Survey of Provincial Quality Assurance Measures on Behaviour Interventions for Adults with Intellectual Disabilities and Challenging Behaviours**
Evguenia Ignatova, Maurice Feldman, & Rosemary Condillac
Brock University
***Nominated for Poster Award*
- 17. Rate of Occurrence and Predictors of Problem Behaviour in Children Diagnosed with Autism Spectrum Disorder and/or Intellectual Disability**
Jeffrey Esteves & Adrienne Perry
York University
- 18. My Life as an Epic Win: Providing Transitional Support to Youth Diagnosed with High-Functioning Autism Spectrum Disorder – A Pilot Study**
Jeffrey Esteves¹ & Rebecca Ward²
¹York University, ²Phoenix Centre for Learning
- 19. Fetal Alcohol Spectrum Disorder: Diagnostic and Social Support Outcomes in Northern Ontario**
Jessica Burns¹, Shelley L. Watson¹, & Kelly D. Harding^{1,2}
¹Laurentian University, Sudbury Ontario, ²Canada FASD Research Network
- 20. Turning Point: The Impact Functional Analysis on Behavioural Treatment**
Jessica Pearce & Hiedi Keenan
Kerry’s Place Autism Services
- 21. Interview Skills Training for an Adult with Autism Spectrum Disorder- A Case Study**
Joey Robertson & Jessica Cauchi
Atlas Behaviour Consultation
- 22. Community Building and Informal Support: The Friendly Housemates Project**
Judy Versegghy¹, Lynda Atack², Janet Maher², Frances MacNeil³, Matthew Poirier³, Michelle Grimley³, Marilyn Herie², Donald Easson², Dianne MCAuley², Rahul Malik², & Natalie Oakwell-Morgan²
¹York University, ²Centennial College, ³Community Living Toronto
- 23. The Academic Experiences of Individuals Who Have a Sibling with Autism Spectrum Disorder (ASD)**
Katya Gessie & Shelley L. Watson
Laurentian University

- 24. Speech Generating Devices: Comparing the Effect of Teaching Strategies on the Vocalizations of Children with Autism Spectrum Disorder**
Krysten Thompson & Julie Koudys
Brock University
- 25. What's the difference? Impact of Transitioning from PECS to PECS IV App on the Vocalizations of Children with Autism Spectrum Disorder**
Krysten Thompson, Julie Koudys
Brock University
- 26. Energy Expenditure of Adults with Autism Spectrum Disorder and an Intellectual Disability During and Adapted Physical Exercise (APEX) Program**
Lainee Tillich, Chad A. Sutherland, Nadia Azar, Sean Horton, Kelly Carr
University of Windsor
- 27. The Impact of Maladaptive Behaviour on Parents of Children with Developmental Disabilities**
Lucia Chiara Limanni, Rebecca Shine, & Adrienne Perry
York University
- 28. Implementation of Health Links Coordinated Care Plans For Adults With Intellectual and Developmental Disabilities: A Cross-Sectoral Collaboration**
Ian Casson¹, Elizabeth Grier¹, Mary Martin¹, Helene Ouellette-Kuntz¹, Janet Durbin², & Yona Lunskey²
¹Queen's University, ²Centre for Addiction and Mental Health
- 29. Mild Intellectual Disability in Primary Care Settings: An Exploratory Pilot Study**
Mary Martin, Nicole Bobbette, Elizabeth Grier, & Ian Casson
Queen's University
- 30. Describing The Processes and Outcomes of A Progressive, Station-Based Adaptive Physical Activity Program For Adults With Developmental Disabilities**
Maureen Connolly¹, James Hall¹, Kirsten Frank¹, Emma Stevenson¹, Jessica Hammond¹, Chantale Aquin¹, Alvin Fortaleza¹, Joanne Caldwell², & Tom Archer³
¹Brock University, ²Community Living St Catharines, ³Bethesda
- 31. Perceived Social Support and Outcomes in Parents of Children with Developmental Disabilities**
Melissa Miljanovski, Melissa Rourke, & Adrienne Perry
York University
- 32. Looking for Social Information**
Morgan Davies, Jessica Abrams, & James Bebkoo
York University
- 33. The Knowledge and Self-Efficacy of Health Care Professionals Regarding Autism Spectrum Disorder Across Ontario: A Cross Regional Study**
Nathaniel Davin, Shelley Watson, Kelly Harding, & Golnaz Ghaderi
Laurentian University

34. Examining the Impact of Varying Pace of Instruction on Skill Acquisition in Young Children with Autism Spectrum Disorder

Kaitlyn Young¹, Rebecca Hansford¹, & Nicole Neil²
¹Brock University, ²Western University

35. South Asian Immigrant & Canadian Mothers' Experience of Raising a Child with a Developmental Disability

Nidhi Luthra & Adrienne Perry
York University
***Nominated for Poster Award*

36. Increasing Academic Task Completion Without Aggressive Behaviour in a Student with Autism Spectrum Disorder

Rebecca Ensor¹, Kyly Chmiel¹, & Rebecca Ward^{1,2}
¹Phoenix Centre for Learning, ²Brock University

37. Evaluation of Psychotropic Medication Patterns Across Individuals with ID That Transitioned From Ontario Facilities From 2004 To 2009

Rebecca Hansford, Kaitlyn Young, & Rosemary Condillac
Brock University

38. An Exploration of The Influence of Support Needs on Quality of Life After Deinstitutionalization for Adults with Developmental Disabilities

Katelyn Soucie-Vukmanich & Rosemary Condillac
Brock University
***Nominated for Poster Award*

39. Cognitive Profile of Adults with Intellectual Disabilities from Indigenous Communities

Shashi Goyal & Valerie Temple
Surrey Place Centre

40. Guidelines on Implementing Aerobic Exercise for People with Autism Spectrum Disorder and an Intellectual Disability

Suzanne Ali, Chad A. Sutherland, Nadia Azar, & Sean Horton
University of Windsor

41. Affect Regulation Deficits In FASD

Valerie Temple, Shirley McMillan, Ann Lindsay, Josee Casati, Bruce Edwards, & Paula Green
Surrey Place Centre

42. Adaptations of CBT For Individuals with Intellectual Disability and Depression/ Anxiety: A Scoping Review

Whitney Martin, Lauren Mizener, Ashleigh Blinkhorn, Meg McQueen, Jessica Jones, & Muhammed Ayub
Queen's University

43. Comparing Methods of Rating the Strength of Research Methodology

Sarah Laye, Adrienne Perry, Hilda Ho
York University

- 44. The Effect of Productivity-Based Wages on Employment Inclusion of People with Intellectual & Developmental Disabilities- A Scoping Review**
Rosemary Lysaght¹, Nicole Bobette¹, & Agostina Ciampa²
¹Queen's University, ²NECO Foundation
- 45. Does the Number of Barriers Experienced by Families of Children with DD Predict Family Quality of Life?**
Melissa Rourke & Adrienne Perry
York University
- 46. Investigating Imagination in Adults with Autism Spectrum Disorder with Art-Based Assessments**
Olena Darewych¹, Nicky Newton¹, & Kevin Farrugie²
¹Wilfrid Laurier University, ²Woodview Mental Health and Autism Services
- 47. Top Intervention Research Priorities of the Ontario Neurodevelopmental Disorder Community: A Consensus Study Engaging Patients, Carers and Other Stakeholders**
Jessica Jordao¹, Saskia Kwan¹, Jordan Antflick¹, Carla Southward¹, Sue Lynch², Margaret Spoelstra³, Brendan Andrade⁴, Robert Nicolson⁵, Alana Iaboni⁶, Katherine Cowan⁷, & Evdokia Anagnostou
¹Ontario Brain Institute, ²Community Living Toronto, ³Autism Ontario, ⁴Centre for Addiction and Mental Health, ⁵University of Western Ontario, ⁶Holland Bloorview Kids Rehabilitation Hospital, ⁷James Lind Alliance, Southampton, UK

8:00 am - 8:30 am	Registration
8:30 - 9:15 am	Poster Session 1; Poster Judging
9:15 – 9:25 am	Opening Remarks
9:25 – 9:45	3-Minute Data Blitz Talks – Group 1
9:45 – 11:00 am	Keynote: NOTHING ABOUT US WITHOUT US! THAT INCLUDES RESEARCH! <i>Peter Parks in conversation with Sue Hutton</i>
11:00 – 11:15 am	Break
11:15 – 11:55 am	SYMPOSIUM 1: MUSIC AND AUTISM: A STRENGTHS-BASED APPROACH TO STUDYING COGNITION AND EMOTION PERCEPTION <i>Hadas Dahary, Shalini Sivathasan, Charlotte Rimmer, & Eve-Marie Quintin</i> <i>McGill University</i>
11:55 – 12:15 pm	PRESENTATION 1: TRAINING IN DEVELOPMENTAL DISABILITIES IN CANADIAN PSYCHIATRY RESIDENCY PROGRAMS <i>Rob Nicolson & Sarah O’Flanagan</i> <i>Western University</i>
12:15 – 12:35 pm	PRESENTATION 2: CREATING A ‘WELLNESS RESOURCE’: UNDERSTANDING HEALTH AND WELLNESS GOALS FOR YOUTH WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES <i>Yani Handani & Amy McPherson</i> <i>Bloorview Research Institute, University of Toronto</i>
12:35 – 1:15 pm	Hosted Lunch
1:15 – 1:45 pm	3-minute Data Blitz Talks – Group 2
1:45 – 2:05 pm	PRESENTATION 3: A SYSTEMATIC REVIEW OF POST-SECONDARY TRANSITION INTERVENTIONS FOR YOUTH WITH DISABILITIES <i>Sally Lindsay, De-Lawrence Lamptey, Elaine Cagliostro, Dilakshan Srikanthan, Neda Mortaji, & Leora Karon</i> <i>Holland Bloorview Kids Rehabilitation Hospital; University of Toronto</i>
2:05 – 2:25 pm	PRESENTATION 4: INCOME SECURITY AMONG PEOPLE WITH INTELLECTUAL DISABILITIES: COMPARING STRENGTHS-BASED AND TRADITIONAL EMPLOYMENT SERVICES <i>Kelly Carr¹, Laura Chittle¹, Nancy Wallace-Gero², Sean Horton¹, Patricia Weir¹, and Chad A. Sutherland¹</i> <i>¹APEX Research Group, University of Windsor, ²Community Living Essex County</i>
2:25 – 2:45 pm	PRESENTATION 5: INDIVIDUALLY FUNDED SERVICES AND SUPPORTS IN ONTARIO: WHAT’S AVAILABLE AND HOW IS IT WORKING <i>Barry Isaacs¹, Frances MacNeil², & Amelia McIntyre¹</i> <i>¹Surrey Place Centre, ²Community Living Toronto</i>
2:45 – 3:00 pm	Break
3:00 – 3:40 pm	SYMPOSIUM 2: THE USE OF FOCUS GROUPS TO ENGAGE PERSONS WITH INTELLECTUAL DISABILITIES IN RESEARCH AND KNOWLEDGE MOBILIZATION PROCESSES <i>Virginie Cobigo, Lynne A. Potvin, Hajer Chalghoumi, Rawad Mcheimech, Casey Fulford, & Natasha Plourde</i> <i>University of Ottawa</i>
3:40 – 4:00 pm	PRESENTATION 6: NUTS AND BOLTS OF HEALTH CARE FOR DIRECT SUPPORT PROFESSIONALS <i>Heather Hermans¹, Mais Malhas², Erin Orr, & Lauren Zaretsky², & Janet Durbin¹</i> <i>¹Vita Community Living Services, ²Centre for Addiction and Mental Health</i>
4:00 – 4:30 pm	Awards Presentation
4:30 – 5:15 pm	Poster Session 2 Wine and Cheese Event