**EARLY INTERVENTION RESEARCH IN THE TIME OF COVID: POSSIBILITIES THROUGH TELEHEALTH**

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**Objectives:** The primary objective of this study is to determine if parents can learn to teach new skills to their children at-risk for autism spectrum disorder (ASD) through general case parent training via Telehealth. This research is important for at-risk young children as early signs of ASD manifest and change quickly in the first few years of life. Parents would benefit from a training program that imparts generalized teaching strategies for any new skills that the child needs to learn and over a virtual platform that can allow intervention to continue through the pandemic. Promising results from this study coupled with our previous study (Azzano et al., 2020) could strengthen an external grant proposal for a larger trial. The ultimate goal of this line of research is to prevent or ameliorate early signs of ASD in at-risk children.

**Method:** Six parent-child dyads living across Ontario are participating in the study. All children were between the ages of 11–36 months at the start of the study and were considered at-risk for ASD due to having an older sibling with a diagnosis and a score of at least 70 on the Parent Observation of Early Markers Scale (POEMS; Feldman et al., 2012), a validated parent report tool. Two multiple baseline across participants designs were used over the course of the study to demonstrate experimental control of the intervention on parent teaching skills for trained and untrained child target behaviours (Cooper et al., 2020). Parents in baseline were asked to demonstrate their teaching procedures for a variety of child skills. Data were collected on parent and child behaviours across baseline, intervention, and follow-up phases. During the intervention phase, parents were trained across nine exemplars in rapid rotation using Behaviour Skills Training (BST; Sarakoff & Sturmey, 2004) and General Case Training (GCT; Ward-Horner & Sturmey, 2007). IOA was collected on 41% of sessions (M=88%, range=63%–100%).

**Results:** All parent and child data were scored by a primary observer and analyzed by visual inspection. Parents in the first training group showed moderate stable baselines (M=57%), and all three parents showed a significant level increase in both trained and untrained skills immediately after the implementation of the intervention phase (M=96%) and maintained an average of over 80% in follow up. Child scores were variable from baseline to follow-up with two children showing significant increases in responding. The second group of data collection is underway.

**Discussion/Conclusion:** This is the first known study to combine the use of GCT and BST in an applied behavioural analytic early intervention for young children at-risk for ASD and the first one to do so via Telehealth. The preliminary results indicate that this system may be an effective approach to teach parents ABA strategies in a general way that can be applied to any skill that the child may need to learn over time to meet their developmental goals and can be done safely throughout the pandemic. This approach is a cost-effective, efficient, and socially validated approach to early intervention.

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