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*Posters marked with an ** were nominated for a poster award.*

Autism After the Age of 18 Investigating Mothers' Perspectives

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Objectives: Despite 80% of individuals with autism spectrum disorder (ASD) being 18 years of age or older, there remains a lack of research focused on ASD in adulthood, specifically pertaining to the experience of parental caregivers. While a current paradigm shift may be initiating movement away from a deficit-based narrative towards a positive re-framing of disability, limitations remain in policies, services, and resources that address the lifelong challenges facing adults with ASD who 'age out' of formalized supports. Thus, parents are faced with a 'service cliff' along with a dearth of information related to caring for their adult children. Therefore, the purpose of this study was to employ a strength-based perspective while examining the lived experience of mothers caring for their adult child with ASD and an intellectual disability (ID).

Methodology: Ten mothers (M_{age} = 47.2 years; 8 employed, 2 retired) of adult, male children (M_{age} = 27.6) diagnosed with ASD-ID completed a semi-structured interview (1 to 2 hours in duration). Adult children co-resided with their mothers (6), lived in group homes (2), or in alternate living arrangements (2). A strengths-based perspective, which emphasizes abilities and resources, guided the research design. This is in contrast to the traditional, deficits-based approach which tends to focus on problems and pathology and which views ASD-ID as a 'burden'. As such, the interview guide probed mothers to discuss strengths, available resources, and overcoming challenges. Inductive thematic analysis was used to analyze the data.

Results: Interviews yielded two themes, each accompanied by three subthemes, and were given context through participant quotes. The first theme, **Transition to Adulthood,** encompassed: (1) *autism is lifelong* - "People think autism stops at 18, but it doesn't.", (2) *suitability/availability of supportive services* - "They turn 12 and [services] start getting lower. Then these kids turn 18 and there is nothing.", and (3) *cost/funding* - "Day programs cost $140 a day. Add that up... [child] doesn't get anywhere close to that." The second theme, **Uncertainty Regarding the Future**, included: (1) *aging caregivers* - "As I age, it's very scary because I'm not going to be as agile and outgoing.", (2) *residence considerations* - "My goal for him would be to live independently, but one of my boys said they'll take him, but that's not carved in stone.", and (3) *permanency planning* - "You don't know what's going to happen when you're not here and you have to make sure that that's all set in place. So that's a big fear. When I'm gone, who's going to take care of him?"

Discussion/Conclusion: Mothers' lifelong caregiving experiences often involves a delicate balance between their personal aging process and the changing needs of their child throughout adulthood. While this study confirmed the 'service cliff', it also revealed that the mothers' own aging processes were benefited by their adult children who provided close companionship, help with household tasks, and purposeful community engagement through advocacy. The mothers adopted elements of a strength-based approach when caring for their adult children with ASD-ID.

**Core Emotional Regulation Training Combined with Differential Reinforcement for Reducing Escape-Related Emotional Outbursts.

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Objectives: In school settings, individuals with developmental disabilities (DD) often display maladaptive behaviours related to underlying deficits in emotion regulation (ER). These ER deficits may be exhibited in the form of escape-related emotional outbursts, which can significantly interfere with academic achievement. When supporting individuals with DD to reduce emotional outbursts, focusing on core ER deficits is crucial. However, many behaviour-based interventions in school settings neglect the importance of ER training as it is perceived as resource-intensive. ER training may also be overlooked because many individuals with DD struggle to conceptualize abstract material and finding suitable ER training strategies can be difficult. The current study aimed to examine whether the escape-related emotional outbursts of a student with DD could be reduced using a brief intervention that targeted core ER training, in addition to the more commonly used behavioural intervention strategy of differential reinforcement of alternative behaviours (DRA).

Method: The participant in this single-subject study was a 20-year-old male student diagnosed with autism spectrum disorder (ASD), intellectual disability (ID), and attention deficit and hyperactivity disorder (ADHD), who was attending special education at a high school. Prior to data collection, emotional outbursts and adaptive replacement behaviours were operationally defined and revised for reliability. To capture the severity of the behaviours, duration recording was used for data collection. Along with DRA, a brief intervention focusing on core ER deficits was implemented by a training therapist who was acting as an in-class support person during the COVID-19 pandemic. To maintain fluency between professionals, the implementor also acted as a liaison between the participant and the licensed school social worker. The targeted ER techniques taught during the intervention were tailored to the participant using a dialectical behavioural therapy (DBT) skills training manual adapted for individuals with DD. Using an A-B design and the PEM analysis method, treatment durations for emotional outbursts and the use of response modulation were compared to the baseline levels.

Results: In this preliminary study, the participant demonstrated an 83% reduction in emotional outbursts from an average of 60 minutes a day during baseline to 10 minutes a day by the end of the intervention. The participant's use of adaptive response modulation techniques increased from zero minutes a day at baseline, to an average of 5 minutes a day. Qualitatively, it was observed that the participant became increasingly motivated to use the adaptive ER strategies, which resulted in higher engagement in class activities.

Discussion/Conclusions: The findings of the study provide preliminary evidence that decreases in escape-related emotional outbursts can be achieved using brief, targeted interventions focused on core ER training combined with DRA. However, the single-subject design greatly limits the generalizability of the results. More research is needed to determine the long-term effectiveness of ER training with individuals with DD and replicating the findings with a larger sample of participants is an important next step. This study also emphasizes the positive impact in-class support people can have in special education classrooms, which is particularly relevant when managing challenges posed by the pandemic.

Using Social Stories and Differential Reinforcement to Increase Academic Functioning for an Adolescent with Autism Spectrum Disorder

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Objectives: Social impairments are one of the core deficits of autism spectrum disorder (ASD), which can persist and sometimes worsen during adolescence. When adolescents with ASD struggle to communicate effectively with others, not only it impacts their peer relationships socially, but it can also impact their academic functioning with difficulties communicating with and getting support from teachers when they have academic challenges. Social stories are commonly used in school settings to help individuals with ASD improve their social functioning. Given its effectiveness, it is possible that skills coaching using social stories can also be effective in improving academic functioning for adolescents with ASD, especially during the COVID-19 pandemic when in-person school attendance was frequently interrupted. The current study examined the effectiveness of skills coaching to improve academic functioning of an adolescent with ASD, using adapted social stories and differential reinforcement strategies.

Methods: In this single-subject study, the participant was a 14-year-old female high school student diagnosed with ASD who was attending locally developed classes. Social engagement and withdrawal behaviours, as they relate to academic functioning, were operationally defined and revised for reliability for data collection. Frequency was used to accurately and reliably measure the behaviours. During intervention, social story was implemented once per day for 8 days at the beginning of the school period, targeting the specific social impairments that impacted the participant's academic functioning. Differential reinforcement, based on preference assessments, was used on a fixed ratio schedule to encourage correct behaviours and generalize the skills. This study presented an A-B design which compared the baseline data to the intervention results to display the effectiveness of the treatment. The data was analyzed using percentage of data points exceeding the median to show effectiveness of the treatment. Intervention data was collected until it plateaued within 25% of the median to ensure reliability.

Results: The results displayed that there was a significant increase in social engagement and an 84% reduction in social withdrawal in academic functioning. Social withdrawal decreased from an average of 6.25 times a day to once per day. Social engagement increased from an average of 0 times per day to 2.75 timers per day. Qualitatively, it was observed that using a preference assessment with differential reinforcement was crucial and positively impacted the intervention results since the reinforcement chosen was meaningful to the participant and motivated them for behavioural changes in the beginning.

Discussion/Conclusion and Implications: One of the main limitations with this study is that it is a single subject design. As such, drawing conclusions regarding the results are preliminary. The results seem to highlight that adapting social stories to improve academic functioning can have positive impacts for individuals with ASD, particularly when combined with differential reinforcement. For practical implications, this study highlights that strategies that are commonly used in school settings with individuals with developmental disabilities, such as social stories, may be modified to address new areas of skill deficit and coaching. For future research, longer periods of data collection may further improve the validity of the results.

Practices for Inclusive Education in Informal Settings: A Scoping Review of the Literature

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Objectives: Informal educational sites, such as museums, camps, or aquariums, can provide powerful learning opportunities. When designed to be inclusive, these sites support independent thinking and evaluation, and enhance the creation of autonomy (Ayres et al., 2011). Legislation is in place to reduce barriers for people with disability (Ontario, 2020); however, informal educational institutions have primarily focused on physical accessibility disadvantaging individuals with disabilities extending beyond the physical domain (Cho & Jolley, 2016; Kaushik, 2003). A review of research studies and grey literature is necessary to gain a full understanding of the practices for inclusion in informal settings. We conducted a scoping literature review of the practices for inclusive education in informal settings examining 1) practices which have been used to promote inclusion of people with disabilities in informal educational contexts; 2) the theoretical models used to inform policies and practices; and 3) the outcome measures identified in these studies, such as attendance, programming effectiveness, extent of experienced inclusion, and level of engagement.

Method: A comprehensive scoping review of the literature from 2005-2020 was conducted on the following databases: The Education Resource Information Center (ERIC), Web of Science, Academic Search Ultimate, PsycINFO, and ProQuest Dissertations and Theses Full Text databases.

Results: Of the 2445 records retrieved, 46 studies were included into the study for data extraction and analysis. Study designs included but were not limited to mixed method evaluations, quantitative designs, and qualitative designs. The articles centred around informal settings located in various countries including, but not limited to, the United States, Canada, and the United Kingdom. Analysis of the results is currently underway.

Discussion/Conclusions: Although the evidence base is sparse, the implications for this research can inform future policies and practices on informal education and full participation for children with disabilities in informal educational areas.

**Ready2Work Development of a User-Informed Employment Website for Job Seekers with Autism

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Objective: Employment success has been identified as a top priority for people with autism in Canada, both locally and nationally. Despite evidence indicating that people with autism are motivated to obtain employment, unemployment and underemployment rates remain among the highest in the country. Considerable research has focused on personal and social characteristics that contribute to meaningful employment for people with autism; however, an empirical exploration of the complementary skills and tools that job seekers with autism need to engage in the job-seeking process is lacking.

With current COVID-19 restrictions, access to in-person job-seeking resources for people with autism is limited. While online resources to support the job search are appealing, little is known about what people with autism need to effectively engage in job-seeking, networking, and marketing their skills to potential employers. The purpose of this research is to 1) understand what job seekers with autism, caregivers, and employment professionals perceive to be important for job seekers with autism to enter the workforce successfully (Phase 1) and to use this end-user feedback to develop an online employment platform (Phases 2 and 3).

Method: In Phase 1, we conducted five focus groups with a total of 29 participants (i.e., 7 autistic self-advocates, 6 caregivers of people with autism, 16 professionals from relevant vocational and employment organizations) about the employment needs of job seekers with autism that could be addressed through an online platform. We conducted a thematic analysis of the focus group data. The identified themes are currently being used to develop (Phase 2) and refine (Phase 3) an online platform that will be assessed using additional survey, interview, and website analytics data from participants who will be interacting with it.

Results: The participants from the Phase 1 focus groups described various structural (e.g., unavailability of suitable positions) and social barriers (e.g., negative attitudes toward people with autism) that job seekers with autism face. Participants provided several recommendations for helpful website content, including career exploration and assessment, employment accommodations, advocacy and disability rights in the workplace, networking, and job skills training. Participants highlighted the value of including different resources for family members and support persons (e.g., how to support a job seeker in their employment search), job-seekers (e.g., how to dress for an interview), and employers looking to hire job seekers with autism (e.g., understanding job accommodations). Regarding the platform interface, participants indicated a preference for clear and interactive multi-media options to present content (e.g., pictures, videos, straightforward text) in addition to an interactive and dynamic section for networking (e.g., discussion board). Website development, factoring in the findings from our focus groups, is currently underway.

Discussion/Conclusions: This innovative research approach to developing an online employment resource focuses on engaging end-users and key stakeholders throughout the

process. The results of this study will add to the limited knowledge about the work readiness skills and resources that are tailored to the idiosyncratic needs of job seekers with autism.

Effects of Prosocial to Improve Group Cohesion Among Developmental Support Agencies' Management Teams During Coronavirus

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Objective: The Coronavirus pandemic has led to increased stress on management teams within developmental support agencies (DSA) as they determine how to best provide support to adults with developmental disabilities safely. These challenging and unprecedented times have demonstrated the importance of group cohesion and psychological flexibility (e.g., tolerance for ambiguity, emotional regulation, and problem-solving) to facilitate continued quality care. The purpose of this study was to determine if the *Prosocial* process can be implemented to improve group cohesion within the management teams. *Prosocial* is a process-based intervention used to improve psychological flexibility and group functioning rooted in contextual behavioural science (Atkins et al., 2019). It incorporates Ostrom's core design principles to evaluate group functioning and Acceptance and Commitment Training to facilitate change (Atkins et al., 2019).

Method: A quasi-experimental (waitlist-control) design was used to examine the effects of *Prosocial* on improving group functioning across management teams. The *Prosocial* process included the virtual delivery of four sessions to two DSA management teams (n_1=12, n_2=7). We collected data on group functioning and social validity through direct observation and questionnaires. We also conducted direct observations of group engagement, functioning, and progress toward goals during bi-weekly management meetings. Questionnaires assessing the impact of Coronavirus, group functioning, individual and group well-being, and psychological disagreements were distributed before, during, and after the *Prosocial* process. We also obtained agency level service provision data and feedback on the *Prosocial* process from participants as indicators of social validity.

Results: Preliminary analyses indicated progress toward group goal achievement. Improvements in group collaboration and functioning were identified through a content analysis of open-ended survey questions. Participants reported an increased frequency of comments related to their commitment to goals and group connection and a decrease in group compartmentalization following the implementation of *Prosocial.* We found no significant improvements in the group functioning rating scores among the DSA management teams. Following the implementation of the *Prosocial* process, service provision data from the agencies, specifically the administration of chemical restraints, medical administration errors, and client and staff incident reports, showed slight reductions in occurrences.

Discussion/Conclusion: To the authors' knowledge, this study was the first examination of the *Prosocial* process conducted with management teams in the developmental service sector. Results of this study will be used to inform the implementation of *Prosocial* in both agencies on a larger scale.

Mental Health and Copying in the Time of COVID-19: Perspectives of Direct Support Professionals in Canada

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Objectives: Direct support professionals (DSPs) are known to be among the many front-line workers that can experience significant work-related stress. The COVID-19 pandemic has resulted in additional and unique stressors for DSPs as a result of changing roles, conditions, and the ongoing need to implement public health measures (e.g., activity restrictions, social-distancing, masks, hand washing). As the pandemic has progressed, the need to promote the mental health and resilience of all front-line workers has become increasingly recognized, and efforts have been made to support those working in higher-risk conditions (e.g., essential services – healthcare, long-term care, congregate care settings). Currently, there is limited understanding of the current mental health status of DSPs in Developmental Services and there is a need to go beyond mainstream mental health initiatives, to specifically target workplace strategies that recognize the unique conditions, concerns and needs of DSPs in this sector. The aim of this study was to understand the mental health needs of DSPs in the Developmental Services sector during COVID-19, and how these needs change over during the pandemic.

Methods: A longitudinal survey design. Participants were full and part-time workers employed within the Developmental Services sector in Canada. The online survey was distributed through social media and developmental disability community agencies over a 5-week period from July 2nd to August 10th, 2020 (T1) and November 20th to January 8th, 2021 (T2). Demographic information was collected about age, gender, ethnicity, and years of experience in the sector. The survey included both open and closed ended questions. Participants provided information about their mental health, exposure to COVID-19 at work and the impact of COVID-19 on people with developmental disabilities. This poster will report on a targeted analysis of three open ended questions related to staff concerns, current coping strategies and identified needs. Content analysis was the primary analytic approach for these questions.

Results: There were 868 DSPs that participated in the survey at T1 and 170 at T2. Data analysis is in progress. Initial results: DSPs at T1 reported concerns with infection control and procedures, the impact on mental health of people with developmental disabilities, changing work roles, financial impacts and impacts on their own personal health and well-being. Concerns reported by DSPs at T2 have focused primarily on the impact of the pandemic on the mental and physical health of people with developmental disabilities.

Discussion/Conclusions: DSPs continue to face new and changing work demands as a result of the COVID-19 pandemic. However, the health and well-being of people with developmental disabilities have remained at the forefront of DSPs concerns overtime. This study is one of the first in Canada to highlight the mental health needs and concerns of DSPs. Recognition of this group as an essential workforce should include increasing the accessibility for mental health support and a greater emphasis on the mental health needs and wellness of the population they support.

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.

Associations between Transdiagnostic Symptoms and Parent-Child Relationship Quality in Families of Children with Neurodevelopmental Disabilities

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Objective: Parent-child relationship quality is related to outcomes in children with and without neurodevelopmental disabilities (NDDs). Few studies have examined how this relationship is influenced by child symptoms across various NDDs. As these children demonstrate both clinical symptoms (e.g., anxiety), and core symptoms of specific conditions (e.g., social impairments), research is needed to examine whether transdiagnostic symptoms affect parent-child relationship quality in this population. The current study examines these relations between child symptoms and parent-child relationship quality within the context of treatment-seeking families whose children have mental health needs.

Method: 68 parent-child dyads participated in cognitive-behavioural therapy for child mental health problems. Children with an intellectual disability were excluded. Parents were aged 29 to 54 years (85% Female; *M* = 43.8 years, *SD* = 5.7), and children were aged 8 to 13 years (80% Male; *M* = 9.8 years, *SD* = 1.5). Diagnoses included autism spectrum disorder, attention-deficit/hyperactivity disorder, learning disability, and cerebral palsy. Parent-child relationship quality was assessed with the Positive Affect Index (PAI), with higher scores reflecting more positive relationship quality. Child symptoms assessed at baseline included social impairments assessed with the Social Responsiveness Scale – 2nd Edition (SRS-2), academic difficulties assessed with the Wide Range Achievement Test – 4th Edition (WRAT-4), internalizing and externalizing problems assessed with the Behaviour Assessment System for Children – 3rd Edition (BASC-3), IQ assessed with the Weschler Abbreviated Scale of Intelligence – 2nd Edition (WASI-II), executive functioning assessed with the Behaviour Rating Inventory of Executive Function – 2 (BRIEF-2), and attention problems assessed with the Swanson, Nolan, and Pelham Questionnaire – 4th Edition (SNAP-IV).

Results: Baseline PAI scores were negatively correlated with child IQ ($r = -.32$, $p = .01$), SRS-2 social communication ($r = -.38$, $p = .002$) and total scores ($r = -.37$, $p = .003$), and BASC-3 externalizing problems scores ($r = -.41$, $p = .001$). A follow-up simultaneous regression revealed that only child IQ, $t(56) = -2.13$, $p = .04$, and BASC-3 externalizing problems, $t(56) = -2.30$, $p = .03$, uniquely predicted variance in baseline PAI scores. SNAP-IV hyperactivity scores were negatively correlated with positive changes in PAI scores, $r = -.29$, $p = .03$. Children with severe social impairments (SRS-2 total) had lower baseline PAI scores than children with none to moderate social impairments, $t(61) = 2.30$, $p = .03$. Similar patterns were seen for the SRS-2 social communication subscale. Children with clinically significant BASC-3 externalizing problems had lower baseline PAI scores, $t(61) = 2.36$, $p = .02$, whereas children with clinically significant academic difficulties had higher baseline PAI scores, $t(61) = 2.53$, $p = .01$.

Discussion/Conclusion: Children with lower cognitive abilities and fewer clinical symptoms experienced more positive parent-child relationship quality. Future research will explore interactions between cognitive factors (e.g., IQ) and clinical symptoms (e.g., externalizing problems), and their links with parent-child relationship quality in this population.

**Undergraduate Students' Knowledge about Fetal Alcohol Spectrum Disorder Prevention

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Objective: Fetal Alcohol Spectrum Disorder (FASD) is the leading cause of developmental disability among Canadians. Research on student populations across Canada has previously focused on students' knowledge of the broader social impacts of alcohol use, such as impaired driving, rather than knowledge of FASD, specifically. To date, minimal research has been conducted exploring students' knowledge of FASD and FASD prevention initiatives. The goal of the current study was to investigate undergraduate students' knowledge of FASD and FASD prevention, given that students represent a potential high-risk population for alcohol-exposed pregnancies.

Methods: Undergraduate students at UNIVERSITY were recruited to complete an online, self-report questionnaire via Google Forms which included 37 questions about alcohol use, attitudes towards alcohol use during pregnancy, knowledge of FASD, and FASD prevention. This questionnaire was adapted from earlier Canadian surveys conducted by the Environics Research Group (2000, 2006), initially created for the Public Health Agency of Canada, and was updated with current evidence (e.g., language use and diagnostic terminology). 127 UNIVERSITY undergraduate students across various programs, ethnicities, cultural background, and genders responded to the questionnaire. The responses acquired from participants were electronically aggregated and analyzed using primarily descriptive statistical analyses.

Results: At the time of this submission, the data collection is still in progress. However, based on the acquired responses to date, preliminary findings indicate that students recognize that prenatal alcohol exposure can adversely interfere with normal fetal development. Despite this recognition, findings also revealed that 30.3% of participants stated that 'a small amount of alcohol use during pregnancy can usually be considered safe', while another 21% of student participants were unsure. Overall, students indicated that they had heard of FASD; however, participants were unable to apply this knowledge when asked to provide a written definition of FASD in their own words. Moreover, students' knowledge (or lack thereof) concerning a "safe" amount of alcohol use is during pregnancy, as well as their scarcity of knowledge of FASD as a potential consequence of this prenatal alcohol exposure, may demonstrate a lack of education provided to vulnerable high-risk populations, including students of childbearing age.

Discussion: Similar to the results of previous studies regarding students' and professionals' knowledge of FASD and FASD prevention, undergraduate students in this sample also lacked knowledge concerning the adverse effects of FASD and the potential consequences of prenatal alcohol exposure. Further work is needed to enhance students' knowledge of FASD to help students make informed decisions about their drinking behaviours and to reduce the prevalence of FASD among vulnerable demographics, including students of childbearing age who are at risk for alcohol-exposed pregnancies. Sampling this population provides an opportunity to increase students' knowledge of the potential effects of FASD, while in turn, relaying the importance of abstaining from alcohol consumption during and while planning to become pregnant. Overall, the information collected from this study will help inform future FASD prevention initiatives that support the unique geographic and population specific considerations.

Canadian Media Coverage of the Impact of COVID-19 on the Lives of People with Intellectual and Developmental Disabilities: Critical Presences and Absences

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Objective: Systematic exploration of the Canadian media news coverage of the impact of COVD-19 on the lives of people with Intellectual and Developmental disabilities (IDD) remains sparse. Media coverage produces cultural artifacts that reflect commonly held beliefs and "valued" societal issues. Further, the ways in which mass media are developed and disseminated play a significant role in the way that social reality is constructed. Analysis of the media coverage of persons with IDD during the COVID-19 pandemic can provide important insights about how persons with IDD have been supported, valued, and viewed during this unique time in history. This purpose of this study is to examine the Canadian media coverage of people labelled with IDD during COVID-19.

Methods: Frame analysis was used to analyze 50 English-language Canadian news media articles published during the first phase of COVID-19 between March 2020 and October 2020. Purposeful sampling was used to select articles using Nexis Uni and specific search parameters. The articles returned from this search were reviewed by authors using inclusion/exclusion criteria to ensure they met criteria. To attain a more comprehensive list, this search was supplemented by a Google News search and articles supplemented by the authors' own social media search.

Results: Preliminary findings indicate that the voices of people with intellectual and developmental disabilities are largely absent from the media narratives about the impact of COVID-19 and are replaced by narratives presented by family members and community agency "experts". Further, the initial analysis of the media covered demonstrates that COVID-19 seems to be exaggerating already existing concerns for persons with IDD, including access to information, appropriate accommodation, high quality standard of supports/care, limited communication, and lacking resources such as technology.

Discussion/Conclusion: A more nuanced coverage is required to advance the understanding of how the COVID-19 pandemic has exacerbated inequalities experienced by people with Intellectual and developmental disabilities rather than created them. Our findings are also a call to action for journalists to include the voices and thus lived experiences of people with IDD in the Canadian media coverage of issues impacting them and their everyday lives.