Paper Title: Working Together: Family Education and Support Intervention for Young Adults with ASD

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Introduction: A growing population of adults with autism spectrum disorder (ASD) has spurred increased interest in developing interventions to support positive outcomes across the life course. Given the current dearth of formal services for young adults with ASD, it is imperative to offer interventions that increase a family’s capacity to find and create informal supports and activities in the community. We developed a multi-family psychoeducation model, Working Together, designed for disengaged young adults with ASD and their families. The Working Together model adapts an approach commonly used in research and practice with individuals with varying mental health conditions (e.g., schizophrenia, bipolar disorder; McFarlane, 2002) and applies it to families of individuals with ASD. This study presents preliminary data from a study of the Working Together intervention program.

Methods: Data were drawn from the ongoing Working Together study, a randomized waitlist control trial which aims to test a multi-family psychoeducation intervention for young adults with ASD and their families. Young adults were eligible to participate if they coresided with their parents and had no intellectual disability. Of the 33 families who are currently enrolled (estimated total sample of 50), 17 families have completed data through the 6 month follow-up, which was the focus on the present analysis. After baseline assessment, families were randomized into an intervention or waitlist control condition; families in the intervention condition (n=9) immediately received the intervention whereas those in the waitlist control condition (n=8) waited 6 months to receive the intervention. The intervention included 8 weekly group sessions, 2 individual family sessions, 3 monthly group booster sessions, and a method for ongoing resources and referrals. Session topics included goal setting, problem-solving, coping strategies, planning for independence, and employment. Adults with ASD and their parents were assessed at baseline and at 6 month follow up on measures of employment, social interactions, and parental attitudes. Families also reported on satisfaction with the program.

Results: To test for differences between experimental groups at 6 month follow-up, we conducted a series of 2 (group) by 2 (time) repeated measures ANOVAs. Young adults in the intervention group showed improvements in frequency of working for pay based on both young adult and parent report compared to young adults in the control group (partial eta squared = .218 and .154 for parents and young adults, respectively, representing medium effect sizes). Parents in the intervention group also showed more positive attributions about their young adult following the intervention compared to parents in the control group, partial eta squared = .263, reflecting a large effect size. There were no significant differences between groups over time for time spent with friends. Additionally, 100% of parents and adults with ASD were satisfied or very satisfied with the intervention program. Exit interview data from the young adults suggested common themes about program involvement including learning how to solve problems and learning how to help themselves.

Discussion: The Working Together intervention was associated with increased paid employment for young adults with ASD as well as improved positive attitudes of parents toward their son or daughter. Future research will examine the effectiveness of the Working Together model on quality of life and long-term employment and engagement in adults with ASD.

References/Citations: