Autism Research

2 staff of the ~10 years experience working with children and/or autism (n=53 families reported high rates of satisfaction with the program, The Social ABCs virtual training model may be an effective, low No modifications were made to the original Canadian Centre For Child Development and Family observation of Canadian All training took place virtually via Zoom for Healthcare Parents in India reported enjoying the program and is a manualized, evidence based, caregiver mediated intervention for toddlers showing social communication challenges, developed and researched in Canada • A community implementation model of training has been developed to expand access to intervention services in Canada, but was not offered clinically anywhere else in the world prior to this work • Following an intro workshop in India supported by KBHN and the I-CAN network, the Canadian team partnered with a child development centre in Goa to pilot remote training of Indian staff using the Canadian training model, and clinical delivery of the Group Social ABCs model in India

Objectives
• To determine feasibility and acceptability of remotely training staff at a child development centre in Goa, India to implement the Social ABCs, using the Canadian training and certification model • To co-create a locally sustainable train-the-trainer program for India

Method
Participants • 2 staff of the Sethu child development centre in Goa • Masters- and bachelors-level education in behaviour science and occupational therapy • ~10 years experience working with children and/or autism • No formal training in any other evidence-based NBDBI’s
Training Model • 6 month learning: (1) 4-day workshop, (2) observation of Canadian team, (3) virtual co-delivery with Canadian team, (4) independent delivery with meta-coaching/observation, (5) independent delivery, • 6 months implementing with local families • 6 months trainer training of new staff • Weekly 1-2 hour supervision meetings throughout • All training took place virtually via Zoom for Healthcare

Key Findings
• Remote training can be used successfully as a cost-efficient method of training international teams in the Social ABCs • No modifications were made to the original Canadian Social ABCs coach or parent training materials or training, suggesting that virtual training and delivery may be effective in other countries and settings • Parents in India reported enjoying the program and demonstrated comparable fidelity of implementation to Canadian parents • Children in India demonstrated comparable gains in the program targets

Results
• Following the 6-month training, both trainees achieved > 85% coaching fidelity with 3 three parent-child dyads and were certified as Social ABCs parent coaches • No adaptations to the program materials or parent coach evaluations were made • To date the India team has completed 10 Social ABCs group cycles, seeing 53 families with high parental satisfaction

Training For Local Sustainability
• Moving towards a trained-trainer model, the newly certified coaches identified and led the training of 2 new staff at the centre using the same model (staggered start), under the supervision of the Canadian team • Having in-house staff trained to a trainer level sets up the centre for sustainability and growth, ensuring consistent and increased access for local families, at a much lower cost than obtaining ongoing training from the Canadian team • Trainer certification will be achieved in the Fall of 2022, with training provided to an external Indian centre

Implications
• The Social ABCs virtual training model may be an effective, low-cost option for training international groups in evidence-based intervention programs, including low resourced areas, across a variety of professional backgrounds and experience levels • More similarities than differences were found across Canadian and Indian families and programs, suggesting that the program can be adapted to various cultures and settings • Families reported high rates of satisfaction with the program, suggesting that providing quality, cost-effective caregiver-mediated intervention to lower-resourced areas is a powerful option

REFERENCES

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