**Project Title:** Parent-Mediated vs Center-Based Intervention for Toddlers with ASD: An RCT **Principal Investigator Name:** Rebecca Landa, Ph.D., CCC-SLP **Applicant Organization Name:** Hugo W. Moser Kennedy Krieger Research Institute, Inc.

An ever increasing number of toddlers are identified as being at high risk for ASD. This translates into an increasing demand for Part C Early Intervention services. The importance of intervention for toddlers with ASD is considerable, given the role that early experience plays in the establishment of early neuronal networks and the establishment of appropriate connectivity. Yet early intervention services for toddlers with ASD are highly variable, resulting in disparity across children in the nature of intervention options. This variability in intervention services for toddlers with ASD is due in large part to the general lack of empirical data regarding efficacious interventions for very young children with ASD. Existing intervention studies involving 2-yearolds with ASD primarily have employed descriptive or quasi-experimental designs and have included samples consisting of at least 80% Caucasian children (when ethnicity and race is reported). Thus, the generalizability of findings for toddlers with ASD in general, especially those from diverse ethnic and cultural backgrounds, is unknown. Parents from diverse ethnic and cultural backgrounds may differ from Anglo-American parents in their priorities for intervention targets and views regarding acceptability of different types of intervention strategies. Therefore, research is needed to identify efficacious early interventions for minority and underserved toddlers with ASD in order to reduce disparity of access to high quality intervention and to guide efficient use of public funds (Ramey & Ramey, 1998).

The goal of the proposed research is to challenge existing intervention paradigms for young minority and underserved children with ASD and their families. At present, most Part C services for children at risk for ASD are provided in the home where a parent-mediated model is emphasized. Research is needed to evaluate whether parent-mediated intervention and centerbased intervention provided by a clinician yield comparable outcomes for minority and underserved toddlers with ASD. To address this need, 60 2-year-old minority and underserved toddlers with ASD will be randomized to one of the two 6-month intervention conditions: Parent-Mediated, where parents will be trained in responsive, child-contingent interaction strategies to be used at home; or Center-Based, where children receive intervention in a nursery school classroom for 10 hours per week. We anticipate that children in the Center-Based intervention will show greater gains in cognitive and language functioning compared with children in the Parent-Mediated intervention, but gains in joint attention and shared positive affect will be comparable in the two groups. Parents in the Parent-Mediated intervention are expected to utilize more child-contingent, responsive interaction strategies, and show greater gains in self-efficacy, but not reduced levels of stress compared with parents of children in the Center-Based intervention. Data collection methods will include direct child assessment using standardized and experimental measures of social and communication development. Parent measures are questionnaires that assess stress, self-efficacy, and 'buy-in' to the intervention, as well as direct measures of child contingent behavior. It is anticipated that the results of the RCT will **impact** Part C intervention paradigms, and initiate a series of studies aimed at determining active ingredients of early intervention, moderators and mediators of treatment response, and how best to translate evidence-based findings into community practice involving young minority and underserved children with ASD. **Key words:** autism, caregivers, early intervention, minority groups, early childhood development, developmental disabilities, parent education, toddlers.