

An adapted social communication intervention at home and education to promote social communication change in children with severe autism: the PACT-G RCT

Jonathan Green,^{1,2,3*} Kathy Leadbitter,¹ Ceri Ellis,¹
Lauren Taylor,⁴ Heather L Moore,^{5,6}
Sophie Carruthers,⁴ Kirsty James,⁷ Carol Taylor,¹
Matea Balabanovska,¹ Sophie Langhorne,¹
Catherine Aldred,¹ Vicky Slonims,⁸
Victoria Grahame,^{9,10} Jeremy Parr,^{5,9,11}
Neil Humphrey,¹² Patricia Howlin,⁴
Helen McConachie,^{6,7} Ann Le Couteur,^{5,6}
Tony Charman,⁴ Richard Emsley⁷ and Andrew Pickles⁷

¹Division of Neuroscience & Experimental Psychology, University of Manchester, Manchester, UK

²Royal Manchester Children's Hospital, Manchester, UK

³Manchester Academic Health Science Centre, Manchester, UK

⁴Department of Psychology, Institute of Psychiatry, Psychology and Neuroscience, King's College London, London, UK

⁵Population Health Sciences Institute, Newcastle University, Newcastle upon Tyne, UK

⁶Sir James Spence Institute, Royal Victoria Infirmary, Newcastle upon Tyne, UK

⁷Department of Biostatistics and Health Informatics, Institute of Psychiatry, Psychology and Neuroscience, King's College London, London, UK

⁸Evelina London Children's Hospital, Guy's and St Thomas' NHS Foundation Trust, London, UK

⁹Complex Neurodevelopmental Disorders Service, Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust, Newcastle upon Tyne, UK

¹⁰Walkergate Park, Centre for Neurorehabilitation and Neuropsychiatry, Newcastle upon Tyne, UK

¹¹Great North Children's Hospital, Newcastle upon Tyne Hospitals NHS Foundation Trust, Newcastle upon Tyne, UK

¹²Manchester Institute of Education, University of Manchester, Manchester, UK

*Corresponding author jonathan.green@manchester.ac.uk

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Plain English summary

The PACT-G RCT

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Plain English summary

Our previous trial, the Preschool Autism Communication Trial, showed how video-feedback discussions with a therapist in a clinic helped parents to adapt their interaction style, resulting in improved child communication and long-term reductions in autism symptom severity. The Paediatric Autism Communication Trial – Generalised project hypothesised that offering parallel therapy at home and in the child's educational setting might have even greater effects on overall symptom outcome than those seen in the Preschool Autism Communication Trial.

We randomly allocated 249 children who were aged 2–11 years with severe autism to receive Paediatric Autism Communication Trial – Generalised therapy in addition to normal care (i.e. treatment as usual) or to receive normal care alone. The intervention lasted 7 months, with about two-thirds of the sessions taking place face to face with the therapist and the rest taking place online. At home, the therapist worked with one parent. In educational settings, the therapist worked with a staff member, usually a learning support assistant. The therapist and parent/learning support assistant reviewed and set targets for the communication strategies that they observed together in video-recorded interactive play with the child. Analysis looked at the direct treatment effect on children's outcomes, and also tested whether or not a change in adult–child interaction led to a change in the child's autism symptoms.

The main analysis showed that Paediatric Autism Communication Trial – Generalised therapy did not produce a greater effect than normal care on child autism symptoms, language, social adaptation or well-being. Paediatric Autism Communication Trial – Generalised therapy did produce a greater improvement in parent–child and learning support assistant–child social communication skills, parents' rating of their own well-being, and parent/learning support assistant ratings of children's disruptive behaviour. Improved child social communication in home and educational settings was linked to the improvements in interaction style made by parents and learning support assistants.

The Paediatric Autism Communication Trial – Generalised therapy did not change autism symptoms in the way that we saw in the original Preschool Autism Communication Trial; however, we did find the effects seen in the Preschool Autism Communication Trial on parent–child interaction, although not as strongly. We consider possible reasons why the Paediatric Autism Communication Trial – Generalised did not show original symptom effects, including a reduced number and different delivery of therapy sessions, and challenges from intervention settings in the context of other research.

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