Intervention

Title of Intervention: Program for Eye Contact Training

Developers of Manual: Jennifer Nehme, Christopher Laskos, Josephine Leddy, Brian Ransom

Summary:

This intervention is used on children with Autism, to establish eye contact, in an instructional setting and in the home setting.

Target and Goal:

The intervention is intended to improve accuracy in eye contact. Having eye contact will allow the child to improve in social interactions. Target goal should be set at 90%.

Training Settings:

Should take place in a quiet room, void of any distractions, with a table and two chairs. Chairs should face each other, and a table should be placed to the side of the therapist's chair. The table is used to record correct and incorrect responses on the tally sheet and to keep the child's rewards out of his reach.

Collection of Baseline:

Before training begins, you should first conduct five baseline observation sessions. Bring the child to the room and sit him/her down opposite you.

1. Say the command. "(Name), Look at me"
2. If child makes direct eye contact with your eyes within a 10 second period, say nothing and do not give him a reward. Just record correct response on the tally sheet by placing a plus sign on the sheet.
3. If child does not make direct eye contact with your eyes within the 10 second period, say nothing and do not give him any reward, just record an incorrect response on the tally sheet by placing a minus sign.
4. After 10 seconds have elapsed, say the command again. Continue these 10 sec. sequences until the designated 5-10 minute treatment time has ended.
5. Be sure to add up the number of correct and incorrect responses for each session. After the session is over, calculate and then record the percentage of correct eye contacts on child's chart and compare child's performance with the previous session.

Material Needed:

1. Stop watch to time sessions
2. A tally sheet to mark correct and incorrect eye contact responses.
3. Graph – to chart progress.
4. 4 food reinforcers

Set up:

Before each treatment period begins, determine which type of reward the child would prefer. Offer the child three or four of his favorite types of food and see which one he seems to like the best at that time. This should be the reward that you start using for that particular session. If the child seems to become bored with that reward, or unresponsive, switch to the next preferred food.

Also you should have the child's tally sheet on the table, the stop watch set at the desired timing of the session, and the reinforcements on hand.

Intervention:

1. Say command "(Name), look at me"
2. If child makes direct eye contact within 10 seconds. Say "very good", or "Good Looking"" and give him a bit or a piece of his favorite food. Record a correct response on the tally sheet with a (plus sign).
3. If Dan does not make direct eye contact when given the command "Dan, look at me" then say nothing and do not give him any treat. Record an incorrect (minus sign) on the tally sheet.
4. This sequence of giving the child a reward or nothing depending on the response each time he looks at you, as well as recording his correct and incorrect responses, should be continued until the 5-10 minute treatment time has ended.
5. After the session is over, add up the number of correct and incorrect responses. Then calculate and record the percentage of correct eye contacts on the Child's chart and compare his progress with the previous sessions.
6. The treatment phase should continue until the child reaches at least 90% or above for correct eye contacts per session for three consecutive sessions.
7. **Note: with some children, it is found that is important in the beginning of treatment to have the therapist "prompt" the eye contact response by holding the reward at the therapist's eye level and /or gently lifting the child's head and saying the command "(Name), look at me."**

Social Validity:

This intervention is best used for low incidence children, who lack social interaction, due to the lack of eye contact. This program can be successfully implemented by psychology students, special education teachers, therapy aid, parents, and psychiatric aids. This intervention can be easily implemented in the home, and classroom experience

Progress Monitoring:

It is important to periodically check to make sure the student is progressing toward their goal. I recommend monitoring progress once a week, before the training session takes place, to make sure there is direct eye contact. To do this, perform the same procedures that you do for baseline. Make sure to tally and graph the outcome.

Reliability:

To determine the accuracy of recording procedures, teachers, and parents when possible, should conduct reliability checks. One of the most commonly used approaches is the assessment of integrated reliability. In this procedure, two observers gather data at the same time and then check the extent to which they agree on what was observed. When collecting reliability there should be 90% reliability agreement.

$$\frac{\text{Number of Agreements}}{\text{Number of Agreements+Disagreements}} \times 100 = \% \text{ of Agreement}$$

Based On:

Richard, M. J. (1977). A Program For Establishing Eye Contact in Severly And Profoundly Retated Children. *Rehabilitation Psychology* , 236-240.chard, M. J. (n.d.). A program For Establisihing Eye Contact in Severly And Profoundly Retarted Children.

Supported By:

Wolf, M. M., Risley, T., & Hayden. (n.d.). Application of Operant Conditioning Procedures to the Behavior Problems of an Autistic Child.

Foxx, R. M. (1977). Attention Training: The Use of Overcorrection Avoidance to increase the eye contact of Autistic and Retarted childern. *journal of applied behavior analysis* , 489-499.

Kyllia, A. I., & Hietanen, J. K. (2006). Skin COnductance Response to Another Person's Gaze in Children with Autism. *Journal of Autism and Developmental Disorder* .

Roberts, J. E., Leigh, A. H., & Hatton, D. D. (2007). Social Approach and Autistc Behavior in Children with Fragile X Syndrome. *Journal Autism Development Disorders* , 1748-1760.

Program for Eye Contact
Implementation and Treatment Integrity Form

Student Name: _____ Teacher: _____

Correctly Implemented?		Step	Program for Eye Contact
Y	N	1	Teacher appropriately choose reinforcement that child found reinforcing?
Y	N	2	When child gave direct eye contact, teacher gave reinforcement at appropriate time?
Y	N	3	Teacher appropriately recorded correct response after reinforcement?
Y	N	4	Teacher did not give reinforcement when eye contact was not made?
Y	N	5	Teacher continuously for 5- 10 minutes worked with child, and recorded correct and incorrect responses?
Y	N	6	Teacher appropriately after session was over calculated correct and incorrect eye contact responses and recoded the percentage correct eye contact responses on child's chart?

_____ correct x 10 = _____% treatment adherence

OR

_____/(6) X 100 =_____% treatment adherence

TALLY SHEET FOR EYE CONTACT PROGRAM

STUDENT:

GRADE:

AGE:

TEACHER/   PSYCHOLOGIST:

                                        Baseline

Session 1

Session 2

Session3

Session 4

Session 5

Training Phase

Session 1

Session 2

Session 3

Session 4

Session 5

Session 6

Session 7