Critical Review: Is peer mediated intervention effective in increasing social communication in children with Autism Spectrum Disorder who use Alternative and Augmentative Communication?

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This critical appraisal examined published literature for evidence that peer mediated augmentative and alternative communication (AAC) intervention is successful in increasing the frequency of social communication in non-verbal children with autism spectrum disorder (ASD). An electronic literature search resulted in identification of seven articles which met inclusion criteria. Overall, findings indicate that there is emerging evidence for the efficacy of peer mediated AAC interventions. The clinical significance and limitations of the current research are discussed.

This study showed evidence that utilizing peer networks may be an effective intervention to increase social interactions of children with ASD. The authors included high-status peers in the formation of peer groups, used a combination of structured and unstructured activities based on the target students' preferences and peers were taught a variety of communicative strategies. Overall, this study has compelling clinical importance and shows compelling validity that peer mediated intervention increases the frequency and duration of social interactions.

Kravtis, Kamps, Kemmerer and Potucek (2002)

investigated the efficacy of training picture exchange AAC with and without social skills training on increasing the duration of social communication in a 6 year old girl with severe ASD. The participant's mother, classroom teacher and TD peers at home and school served as facilitators. During social skills training TD peers were trained to facilitate turn taking, sharing, extending play turns and asking wh- questions during journal and center activities over 10 minute sample periods. The frequency and duration of social interactions were monitored. Visual analysis of the results indicated that AAC training alone resulted in increases in all variables compared to baseline. The results of AAC combined with social skills training resulted in an additional increase in the duration of social interactions.

Social skills training was an adjunct to this study, added as follow-up sessions. No information was provided regarding who served as peer facilitators at school, whether peers were consistent across sessions, nor the quantity of training provided. Further, the peers only participated in the follow-up sessions, the student's teacher and mother facilitated the initial AAC training. These variables limit the conclusions which can be drawn from the efficacy of the social skills training. As the authors did not provide sufficient information to replicate the peer intervention, this study has equivocal clinical importance and shows equivocal validity that peer intervention will increase the duration of social interactions.

Strasberger and Ferreri (2013) investigated whether a peer mediated intervention is effective in increasing social communication of four nonverbal males with ASD (age 5-12 years). Participants were trained to use a SGD in an analog setting. A TD peer attended one training session to learn how to use the he

intervention approach used by Trembath and colleagues (2009), demonstrating that the same intervention is effective in both environments. Combined, these studies provide further support that teaching social strategies to TD peers can be effective in both push-in and pull-out models of speech-language pathology (SLP) intervention.

Many of the interventions outlined required an acceptable amount of training and resources in order to be implemented within a school setting where there is an SLP and paraprofessional support (Chung & Douglas, 2015; Strasberger & Ferreri, 2015; Trembath et al., 2009; Trottier et al., 2011). Additionally, Chung & Douglas (2015) demonstrated that paraprofessionals could successfully facilitate a peer mediated intervention after a single training session, reducing the amount of direct SLP involvement required to adequately support the communication of a child with ASD. These findings are significant as most school board SLPs have large caseloads, limiting the time available to deliver therapy to individual students.

Limitations

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