17th Seattle Club Programme

Department of Psychology,
Centre for Developmental Disorders,
Durham University

18th & 19th December 2017

http://seattleclubconference.org/conferences.html
Welcome

We are really pleased to be able to welcome you to the Department of Psychology for the 17th annual Seattle Club conference for research on intellectual and developmental disabilities. We hope that the two-day programme will provide you with the ideal opportunity to hear about new research within the field of developmental disabilities and to network with colleagues working in this field. We have tried to schedule the talks and posters to provide as much opportunity for networking as possible and the conference meal on Monday evening also provides the perfect chance to make new connections and forge future collaborations (as well as catch up with old friends!).

In keeping with the Seattle Club theme, we have kept the conference small (we are expecting just over 80 delegates), we have only active researchers at the conference, we have supported some excellent early career researchers to attend on studentships, and the conference has just one session (not parallel sessions) so that everyone can attend all presentations. This year we have increased from one to two poster sessions to allow us to accept more posters to be presented, so that there is sufficient time to see as many of the posters as possible, and so that there are also additional opportunities for networking.

We hope that you will find the conference intellectually stimulating and will also enjoy your time in Durham. We have an excellent team of postgraduate helpers who are on-hand to assist you during the two day conference so please just ask if you have any questions or need assistance.

Conference Meal

Your conference registration includes the conference meal on the evening of Monday 18th December and this will take place in the dining hall of Collingwood College at Durham University. We are pleased to be able to bring you a 3-course sit down meal (with wine!) that will begin at 7.30pm and for this to be in one of the central Durham colleges. This will give you another social opportunity during the conference and we hope that this will be enjoyable. Note that the College bar is open before the meal if you wish to get there a bit earlier and get yourself a drink! See further details (e.g. map) for the conference meal on page 45 of this programme.

Best wishes

Debbie Riby
Mary Hanley
Organising team
## DAY 1: Monday 18th December

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<th>Event</th>
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<tr>
<td>9.30AM</td>
<td>Arrival and registration</td>
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<tr>
<td>10AM</td>
<td>Welcome: Debbie Riby</td>
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<tr>
<td><strong>SESSION 1</strong> Chair: Dave Dagnan (room L50)</td>
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<tr>
<td>10.10AM</td>
<td>Emma Groves - “It’s good, they’re like me; the same but different.” An Interpretive Phenomenological Analysis of the identities of Women with Down’s Syndrome.</td>
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<td>11.10AM</td>
<td>Tea/coffee (room L68)</td>
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<td><strong>SESSION 2</strong> Chair: Chris Hatton (room L50)</td>
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<td>Emma Morgan - Autism, Mentalising and the Effect of Social Presence</td>
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<td>11.50AM</td>
<td>Debbie Riby - Why do people with Williams syndrome develop high anxiety?</td>
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<td>12.10PM</td>
<td>Serena Tomlinson - Young people with learning disabilities / autism leaving residential education – what happens and where do they go?</td>
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<td>12.30PM</td>
<td>Lunch (room L68)</td>
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<td><strong>SESSION 3</strong> Chair: Jacqui Rodgers (room L50)</td>
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<td>1.30PM</td>
<td>Samantha Flynn - Trainer and trainee experiences of engaging with the Who’s Challenging Who? staff training course.</td>
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<td>1.50PM</td>
<td>Nikita Hayden - The psychological wellbeing of children who have a brother or sister with Intellectual Disability: A secondary analysis of the Millennium Cohort Study</td>
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2.10PM Mark Brown - “I wish I had learnt to keep myself safe” Sexuality and Relationships Education (SRE) for People with Autistic Spectrum Disorder

2.30PM Tea/coffee (room L68)

SESSION 4  2ND DAVID FELCE LECTURE  Chair: Debbie Riby  (room L50)

3PM Dr Jacqui Rodgers - Facing the unknown: Intolerance of uncertainty and Anxiety in Autism and Williams Syndrome

3.50pm Comfort break

SESSION 5  Chair: Richard Hastings  (room L50)

4PM Sam Brice - Conceptualising depression in children with autism spectrum disorders

4.20PM Chloe Lane - Memory in Sotos syndrome

SESSION 6  POSTER SESSION 1  (room L68)

Please add your posters to poster boards, or give your poster to a member of the organising team, at the end of lunch (12.30pm – 1.30pm).

4.40PM Poster session commences (with wine)

Evening meal arrive for 7.15pm to be seater for 7.30pm meal – Collingwood College, Durham University

DAY 1 POSTERS: Monday 18th December

Magdalena Apanasionok - Teaching Science Skills and Knowledge to Students with Developmental Disabilities: A Systematic Review

Claire Bates - Breast Screening, Mental Capacity and Women with Intellectual Disabilities

Tina Cook - Mindfulness and Acceptance and Commitment Therapy as a means of reducing stress for family carers of adults with a learning disability and behaviour that challenges: Voices, viewpoints and validation

Dave Dagnan - Systematic review of staff based interventions and support systems to improve the well-being of staff that provide care to people with intellectual disabilities
Michael-John Derges - Cross-cultural study of the Development of Face Expertise in Autism

Karri Gillespie-Smith - Brining methods into focus: How task demand and scene complexity drives attention allocation in Autism.

Chris Hatton - Participant, supporter and therapist experiences of psychological interventions for people with mild/moderate intellectual disabilities and depression in the Beat It trial: a qualitative analysis

Anne Johnston - A pilot feasibility study of a school-based walking intervention for young people with intellectual disabilities

Peter Mulhall - Barriers to conducting ID RCTs - experiences of international experts

Martin McMahon - The relationship between subjective socioeconomic status and health in adults with intellectual disabilities.

Mark Oliver - The initial development of a psychological flexibility measure for people with intellectual disabilities.

Emily Scott - Working with People with Intellectual Disabilities and Behaviour that Challenges: Perspectives from Clinical Psychologists

Hannah Shackleton - The measurement of suggestibility in adults with intellectual disabilities: Adaptation of the Gudjonsson Suggestibility Scales and an exploration of the influence of cognitive variables.

Sian Thomas - Examining the Feasibility of Teaching Early Reading Skills to Non-Vocal Children with Intellectual Developmental Disabilities using an Online Reading Program

Tim Williams - Treatment of Dog Phobia in Nonverbal individuals with Autism and Intellectual Disabilities
# DAY 2: Tuesday 19th December

## SESSION 7
**Chair:** Mary Hanley  (room L50)

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<tr>
<th>Time</th>
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<tr>
<td>9.30AM</td>
<td>Samuel Chawner</td>
<td>Intellectual Disability and Mental Health: Assessing the Genomic Impact on Neurodevelopment</td>
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<td>9.50AM</td>
<td>Emily Grew</td>
<td>Divided attention predicts maths achievement in children with an Autism Spectrum Disorder</td>
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<tr>
<td>10.10AM</td>
<td>Erica Ranzato</td>
<td>Development of mathematical abilities in ASD</td>
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<td>Tea/coffee  (room L68)</td>
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## SESSION 8
**POSTER SESSION 2**  (room L68)

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<tr>
<td>11.00AM</td>
<td>Poster session commences (please put your poster up before the first session of talks)</td>
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## SESSION 9
**Chair:** Sinead Rhodes  (room L50)

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<tr>
<th>Time</th>
<th>Speaker</th>
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<tr>
<td>12.00PM</td>
<td>Andrew Jahoda</td>
<td>The BeatIt trial outcomes: comparing the effectiveness of behavioural activation for depression in adults with learning disabilities with an attention control intervention</td>
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<td>12.20PM</td>
<td>Biza Stenfert Kroese</td>
<td>Trauma-focused cognitive behaviour therapy for people with mild intellectual disabilities: Outcomes of a pilot study.</td>
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<td>12.40PM</td>
<td>Lisa Richardson</td>
<td>Development of a psychosocial intervention to increase the Capacity Of people with iNTEllectual disabilities to manage and resist STigma (CONTEST).</td>
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<td>1.00PM</td>
<td>Lunch</td>
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## SESSION 10
**Chair:** Katie Cebula  (room L50)

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<th>Time</th>
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<tr>
<td>2PM</td>
<td>Sinead Rhodes</td>
<td>Peer relationships in children with Williams syndrome: Parents’ and teachers’ insights</td>
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<tr>
<td>2.20PM</td>
<td>Rebecca Gibb</td>
<td>“Evaluating the effect of a focused training intervention upon the quality of positive behaviour support plans for persons whose behaviour is designed as challenging”</td>
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2.40PM  Madeline Donnachie - An exploratory study of what people with intellectual disabilities find attractive about romantic partners and how they perceive themselves as romantic partners

3PM  Thanks for coming: Richard Hastings

DAY 2 POSTERS: Tuesday 19th December

Marie Alkan - Investigating the development of Episodic memory (EM) using a minimally verbal task

Susannah Baines - What do JSNAs tell us about people with learning disabilities and people with autism?

Gemma Barlow - Football teams for people with Intellectual Disabilities in secure settings and in the community: “Something different and probably once in a lifetime chance to have”

Greta Brunskill - Using Positive Behavioural Support as a multi-disciplinary inpatient team: clinical outcomes and reflections on a case example from a specialist young people’s service

Katie Cebula - The role of family dynamics and relationships in the psychological wellbeing and adjustment of children with Williams syndrome, their parents and siblings

Emine Gurbuz - Social and Academic Experiences of Higher-Education Students with and without an Autism Spectrum Disorder

Lin Lu - The effects of cultural difference on the rating of ADHD symptoms: A comparison between Chinese and British teachers’ ratings

Ciara Padden - Psychophysiological Measures of Stress in Caregivers of People with Autism Spectrum Disorder: A Systematic Review


Daron Marged Owens - “Everyday lives: exploring the experiences of people with a learning disability in the early stages of the new Social Services and Wellbeing Act (2014) Wales”

Ellen Ridley – Educational Provision and Challenges for pupils with Williams syndrome

Laura Surley - A Review of the Frequency and Nature of Adaptations to Cognitive Behavioural Therapy for Adults with Intellectual Disabilities
Lucy Van Walwyk - Investigating communicative and non-communicative gaze behaviours in children with profound and multiple learning disabilities.

Beckie Whelton - The impact of Transforming Care on the Commissioning of services for people with ID/Autism.
Each year at the Seattle Club conference, organisers allocate a number of non-presenting places for researchers who do not yet have data to present. These individuals are early in their intellectual disability research journey and might include postgraduate students, research assistants, professional trainees engaging in research, and practitioners starting research projects.

This year’s Studentship holders, their academic affiliations, and research interests are listed below:

**Therese Timberlake** [Tizard Centre, University of Kent] – Therese’s research aims to explore the factors that contribute to successfully empowering individuals with severe and profound intellectual disabilities to effectively communicate their opinions, views and future goals, with a particular focus on how advances in technology might provide the means to better communication.

**Elisabeth Gale** [Tizard Centre, University of Kent] - Lizzie’s research aims to answer the question: What are the main differences between males and females, boys and girls with autism and how are current assessment tools contributing to the diagnosis/mis-diagnosis of women and girls. In addition, Lizzie will explore how these tools be adapted to ensure the female phenotype of ASC is adequately assessed and identified.

**Elizabeth Raye** [University of Wolverhampton] - Elizabeth is exploring how resilience is experienced by people with intellectual and developmental disabilities, and how current conceptualisations potentially disadvantage those with IDD. She will also be carrying out quantitative research using a new measure of resilience.

**Phoebe Alonso** [University of Wolverhampton] - Phoebe’s research involves a qualitative investigation of the key issues relating to the therapeutic relationship between people with learning disabilities and their therapists, with additional input from support workers, in an NHS Adult Learning Disabilities Service. In particular, the research focuses on how the therapeutic relationship facilitates empowerment.

**Rachel Harrison** [Tizard Centre, University of Kent] - Rachel’s PhD focuses on the effects of austerity on people with IDD’s social networks. This in the context of a NIHR SSCR project entitled 'Becoming Less Eligible for Care? Learning Disability in an age of Austerity'.

**Jon Dodd** [Oxford Institute of Clinical Psychology Training, University of Oxford] - Jon’s research aims to explore parents’ experiences of supporting their child who has an intellectual disability during the transition to adulthood.

Welcome to Seattle Club, and we look forward to hearing more about your research at future conferences.
Anxiety is a significant problem for many autistic people. There is growing evidence that some aspects of anxiety may present differently in ASD and that ASD related features of anxiety should therefore be considered during assessment and treatment. Furthermore, when anxiety is present it is often complex. Autistic people frequently present with multiple anxiety disorders concurrently, making it difficult to develop tailored packages based on specific anxiety sub-types. Effective interventions that target trans-diagnostic anxiety related mechanisms may be a parsimonious solution offering efficient and inclusive targets for treatment.

This presentation will consider the role that a specific trans-diagnostic mechanism: Intolerance of Uncertainty (IU), may have in an ASD specific model of anxiety. During the talk we will explore potential relationships between anxiety, IU and some of the core features of ASD and consider a model of anxiety, which takes these interactions into account. Building on this work evidence will be presented from two recent intervention programmes targeting IU. The first is a novel parent group intervention targeting IU in autistic children and the second is a single case experimental design study with autistic adults who participated in an individualised treatment programme targeting IU. Finally, we will consider the syndrome specificity of IU to autism by considering some preliminary data examining IU gathered during a new parent group intervention for anxiety in young people with William’s Syndrome.
Abstracts – Oral Presentations (in programme order)

Session 1

Presenter: Emma Groves
Title: “It’s good, they’re like me; the same but different.” An Interpretive Phenomenological Analysis of the identities of Women with Down’s Syndrome.

Email: Emmagroves1@nhs.net
Affiliation: Forensic Learning Disability Service, Roseberry Park Hospital, Middlesbrough
Co-authors: Kelly Rayner (Cumbria Partnership NHS Foundation Trust), Steven Muncer (Teesside University)

Background: For people with disabilities, identity formation is based on responses to hierarchical values determined by able-bodied populations. The way in which people with disabilities are perceived, coupled with society’s gender role expectations tends to render them at best ‘different’ and at worst ‘genderless.’ Some adopt a disability identity, whereas others may seek to conceal their disability. Attempts to conceal disability are more prominent in those with learning disabilities and have significant implications for psychological well-being. No current research has attempted to understand how women with Down’s Syndrome attempt to form an identity in light of these challenges.

Method: Eight women with Down’s Syndrome were recruited from community learning disability teams on a voluntary basis. They each took part in a semi-structured interview and the transcripts were analysed using interpretive phenomenological analysis.

Results: Negative assumptions of others and oppressive, paternalistic care often lead to a lack of ownership over narratives and identities that are largely determined by others. The theme ‘Finding a place in society’ reflects the attempts made by these women to challenge this and gain a sense of ownership over their lives.

Conclusion: This research uncovered the individual and shared identities that women with Down’s syndrome construct. A clear understanding of one’s identity and the concept of womanhood were lacking from the narratives of participants. Thus, services need to be aware of the role they have in supporting women with Down’s Syndrome to develop autonomy and ownership over their lives.

Presenter: Emily Salt
Title: Experiencing the Transition to Adulthood: A qualitative study of young adults with and without intellectual disabilities

Email: e.salt.1@research.gla.ac.uk
Affiliation: University of Glasgow
Co-authors: Andrew Jahoda (University of Glasgow), Craig Melville (University of Glasgow)

Background: Self-determination and self-perceived adulthood are generally considered to be key markers of a successful transition to adulthood (Mitchell 2012; Mann et al. 1989). However, very little research has been undertaken to investigate how young adults with intellectual disabilities' thoughts and feelings towards growing up impact the self-determination of their behaviour - particularly in relation to their typically developing peers. The purpose of the following study was to begin to explore the emotional and socio-cognitive dimensions of transitioning to adulthood as
experienced by young adults with and without intellectual disabilities. Particular focus was paid to participants’ perspectives on autonomy, responsibility, trust, and independence.

Method: Semi-structured interviews were conducted with young adults both with (n=8) and without (n=8) intellectual disabilities. As every individual’s experience of transition is uniquely contextualised, transcripts were analysed using interpretive phenomenological analysis (IPA).

Results: Results from both groups are reported separately. While attitudes and experiences were diverse, participants in both groups judged their own developmental progress relative to their other expectations about what is and is not ‘typical’. Furthermore, there appeared to be a bigger variation in how young adults with learning disabilities conceptualise adulthood in comparison to their typically developing peers.

Conclusion: More research needs to be undertaken to determine how young adults with intellectual disabilities conceptualise adulthood, as well as how important the onset of an adult identity is to them in comparison to their typically-developing peers.

Presenter: Ruth Lee
Title: STOMP: A case study demonstrating how Positive Behavioural Support can be used in conjunction with medication reduction to improve quality of life.

Email: ruth.lee@ntw.nhs.uk
Affiliation: Learning Disabilities Community Treatment Team, Northumberland Tyne & Wear NHS Foundation Trust, Monkwearmouth Hospital, Sunderland
Co-authors: David Gerrard (Northumberland Tyne & Wear NHS Foundation Trust), Jennifer Rhodes (Northumberland Tyne & Wear NHS Foundation Trust).

Background: Stopping over medication of people with a learning disability, autism or both (STOMP) is a project supported by NHS England aimed at reducing the inappropriate prescribing of psychotropic medication to manage behaviour that challenges. In 2015, NICE published a guidance document detailing how behaviour should be more appropriately managed through Positive Behavioural Support (PBS). This study will follow the medication reduction journey of a 39 year old man, with a learning disability, who had been on antipsychotic medication for over 10 years, to manage behaviour which challenges.

Method: A single case design was utilised. Medication was reduced gradually, while PBS was implemented. The implementation of PBS included specific behavioural interventions based on functional assessment. Data was gathered on side effects, incidents of behaviour which challenges, and quality of life indicators. Qualitative data was also captured, pre and post medication reduction, from direct care staff and family members.

Results: There was no increase in incidents of behaviour which challenged during the period of medication reduction. Data showed an increase in quality of life as measured through activity levels, and occasions where the individual communicated preference or choice. There were no adverse side effects observed. Staff and family reported that while they were initially anxious about medication reduction, they have now feel they have a better understanding of the function of the individual’s behaviour.

Conclusion: This study demonstrates how antipsychotic medication can be safely reduced, and how PBS can be used as an alternative, to improve quality of life.
Session 2

Presenter: Emma Morgan  
Title: Autism, Mentalising and the Effect of Social Presence

Email: ejmorgan1@sheffield.ac.uk  
Affiliation: University of Sheffield  
Co-authors: Dan Carroll (University of Sheffield), Megan Freeth (University of Sheffield).

Background: Recent research has shown that neurotypical participants perform significantly better on explicit mentalising tasks when a real person is present, but that participants with autism do not show the same social facilitation effect (Chevallier et al., 2014). Participants with autism show pervasive deficits in implicit mentalising ability (Senju et al., 2009; Schuwerk et al., 2016), however, no previous studies have tested the effect of a social presence on implicit mentalising in adults with autism.

Method: We used a non-verbal second-order theory of mind task to study explicit and implicit mentalising in adults with autism and age, gender and non-verbal IQ matched controls. The task was completed in two conditions: A ‘live’ condition where the task was acted out in real time in front of the participant, and a ‘recorded’ condition where the participant was shown recorded videos of the same task.

Results: The control group were significantly more accurate on the implicit task when it was completed in the live condition, by contrast participants with autism performed comparably in each condition. Further, both groups performed comparably on the explicit and implicit mentalising tasks.

Conclusion: The control group were significantly more accurate on the implicit task in the live condition, suggesting that implicit mentalising was more engaged when real people were present. However, participants with autism were found to be unaffected by a social presence and therefore did not show a social facilitation effect when in the physical presence of others.

Presenter: Deborah Riby  
Title: Why do people with Williams syndrome develop high anxiety?

Email: deborah.riby@durham.ac.uk  
Affiliation: Durham University (Centre for Developmental Disorders)  
Co-Authors: Mary Hanley (Durham), Mikle South (Brigham Young, US)

Background: Williams syndrome (WS) is a relatively rare genetic disorder associated with a range of cognitive, behavioural and medication issues. Individuals often experience mild to moderate levels of learning difficulty (Searcy et al., 2004). Anxiety is the most significant mental health concern associated with this disorder (Stinton et al., 2012). This talk will report data from two studies within a larger programme of research that looks at the potential mechanisms that might underlie heightened anxiety in this group, with the longer term aim of informing intervention. The focus will be on the potential roles of social abilities, cognitive functions, and an intolerance of uncertainty, in the development of anxiety.

Methods: Parent reports were obtained regarding anxiety, social behaviour, daily cognitive functioning and intolerance of uncertainty and the data represent individuals with WS across the lifespan. A range of correlation, regression, and mediation analyses were used to understand the potential mechanisms underlying heightened anxiety.

Results: Facets of the WS cognitive and behaviour profiles were directly linked to heightened anxiety as reported by parents. Although being ‘sociable’ can be good in WS it does not appear to be a protective factor against anxiety. Difficulties with aspects of cognitive regulation (such as shifting
attention) were also related to anxiety. Furthermore, it may be that all of these components are linked through an intolerance of uncertainty.

Conclusion: Further research understanding the nature of the mechanisms underlying anxiety in WS is important to develop evidence-based interventions, and this study is a starting point for targeting where that research should be focused.

**Presenter:** Serena Tomlinson  
**Title:** Young people with learning disabilities / autism leaving residential education – what happens and where do they go?

Email: s.tomlinson@kent.ac.uk  
Affiliation: Tizard Centre, University of Kent, Canterbury  
Co-authors: Peter McGill (Tizard Centre, University of Kent), Nick Gore (Tizard Centre, University of Kent)

Background: A significant number of young people with learning disabilities or autism are placed in residential educational settings (see Pinney, 2004; McGill, 2008), however little is known about what happens when these young people transition to adult services, with existing research instead examining young people’s and family carer’s experiences of this process. The current research aimed to provide information about outcomes following transition from a residential school / college for young people with learning disabilities / autism in England.

Method: Residential schools and colleges were asked to complete anonymised questionnaires about young people with learning disabilities / autism over the age of 16 who had transitioned from the setting within the past 1-3 years. Questionnaires focused on the young person’s characteristics, details about their residential educational placement and subsequent placements following transition.

Results: Questionnaires were returned for 371 young people (274 males, 97 females). Of these, 320 had a learning disability and 227 had an Autism Spectrum Condition. Information is presented about subsequent placements for these young people, and results of correlational analyses examining relationships between the characteristics of the young people or their residential educational placements, and subsequent placements following transition.

Conclusion: These data provide an overview of transition outcomes for a large sample of young people who have recently transitioned from a residential school / college. This information is likely to be useful to residential educational settings and local authorities when supporting young people at the point of transition.

**Session 3**

**Presenter:** Samantha Flynn  
**Title:** Trainer and trainee experiences of engaging with the ‘Who’s Challenging Who?’ Staff training course.

Email: s.flynn.1@warwick.ac.uk  
Affiliation: CEDAR, University of Warwick, Coventry, CV4 7AL  
Co-authors: Richard P Hastings (CEDAR, University of Warwick), David Gillespie (Centre for Trials Research, Cardiff University), Rachel McNamara (Centre for Trials Research, Cardiff University), Elizabeth Randell (Centre for Trials Research, Cardiff University)
Background: The Who’s Challenging Who? (WCW) training aims to improve staff perceptions of people with intellectual disabilities (ID) whose behaviour challenges. The training is co-produced and co-delivered by people with ID. This study aimed to understand how both trainers and trainees experienced the Who’s Challenging Who? training package, and whether there were any perceived long-lasting changes attributable to the training.

Method: Semi-structured interviews were undertaken with managers (n=7), social care staff (n=6), and the WCW trainers (n=4; three had ID). Interviews were transcribed verbatim and analysed using Thematic Analysis. Data from all three groups were analysed separately and themes were compared across all three groups.

Results: Two main themes were drawn from the data: (1) The valued roles of the trainers, within which it was evident that both trainers and trainees benefited from the training being co-produced and co-delivered by people with ID; and, (2) Beyond the training, whereby trainees reported that they were engaging in increased reflection about their past and current practice since the training.

Conclusion: Sharing difficult experiences within the WCW training had a cathartic effect for people with ID, and having a valued role whereby they were paid a fair wage for their expertise was important for the trainers with ID. Being trained by people with ID and challenging behaviour is an effective method, which can improve perspective taking and reflection about supporting people with ID and challenging behaviour. The data provides valuable insights regarding implications for social care and research.

Presenter: Nikita Hayden
Title: The psychological wellbeing of children who have a brother or sister with Intellectual Disability: A secondary analysis of the Millennium Cohort Study.

Email: n.hayden@warwick.ac.uk
Affiliation: CEDAR, University of Warwick, Coventry
Co-authors: Richard Hastings (University of Warwick), Vasiliki Totsika (University of Warwick), Emma Langley (University of Warwick).

Background: Although existing literature in this area is somewhat inconsistent, cognisant of family systems theory, having a brother or sister with intellectual disability (ID) is often considered a risk factor for poor sibling outcomes. Existing research has not used representative samples.

Method: The present research is a secondary analysis of data from the third wave of the Millennium Cohort Study (MCS). We explored group differences between the nearest-in-age older siblings (aged five to 15) of those MCS cohort member children identified as having (n of siblings = 7,246) or not having (n of siblings = 257) ID. Behavioural and emotional well-being was measured using the Strengths and Difficulties Questionnaire (SDQ).

Results:* Chi-square tests indicated that the ID sibling group were more likely to have elevated scores than the non-ID sibling group for SDQ total behaviour problems (p = .031), peer problems (p = .001) and conduct problems (p = .004). No statistically significant group differences were found for hyperactivity (p = .217), prosocial behaviour (p = .269) and emotional problems (p = .500). Logistic regression models were then used to examine elevated SDQ problems once additional potential risk factors, such as socio-economic position, were controlled. No sibling group differences remained except that ID siblings were slightly less likely to be identified as hyperactive (p = .045). Overall, older sibling well-being was predicted mainly by socio-economic factors and primary caregiver mental health as well as being from a single parent household and the sex of the older sibling.
Conclusion: Data suggest group differences in ID and non-ID siblings are not simply a result of having a brother or sister with ID. Rather, group differences are likely related to an array of complex, interacting factors and experiences affecting the families.

**Presenter:** Mark Brown  
**Title:** “I wish I had learnt to keep myself safe” Sexuality and Relationships Education (SRE) for People with Autistic Spectrum Disorder  
**Email:** mb666@kent.ac.uk  
**Affiliation:** Tizard Centre, University of Kent, Canterbury  
**Co-authors:** Glynis Murphy (Tizard Centre, University of Kent), Michelle McCarthy (The Tizard Centre, University of Kent).

**Background:** Nationally, the subject of sex and relationships (SRE) has been integrated into the National Curriculum for schools for decades, but tends to be mainstream orientated. There has been limited research into the appropriateness of present SRE programmes for pupils with ASD, mostly concentrating upon the views and attitudes of parents/carers and teachers rather than pupils with ASD. This study has attempted to explore the effectiveness of SRE programme for pupils with ASD as perceived by the pupils directly, including how programmes were implemented and the effectiveness in providing the pupils with practical skills.

**Method:** A literature review illustrated the lack of research in this topic, and a subsequent interview based study involving 15 head teachers/PSHE co-ordinators in schools catering for pupils with ASD in London, Surrey and Sussex illustrated the need for further programme development. Consequently, the present study was utilised Focus Groups comprising of five groups comprising pupils with ASD who possessed the verbal skills to participate within the study from four of the previous schools.

**Results:** Analysis of transcriptions utilising thematic analysis resulted in a number of themes, including:
- The need for more scenario based teaching,
- Lack of appropriate SRE previously experienced in mainstream schools,
- More information about the socio-sexual aspects of SRE,
- Student attitudinal issues relating to online world.

**Conclusion:** The results of both studies consistently indicate the need for further programme adaptation for students with ASD to increase knowledge and reduce vulnerability. Subsequently a pilot SRE programme was developed and implemented for a later study.

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**Session 5**

**Presenter:** Sam Brice  
**Title:** Conceptualising depression in children with autism spectrum disorders  
**Email:** sjbrice@outlook.com  
**Affiliation:** Newcastle University  
**Co-authors:** Emma Honey (Northumberland, Tyne & Wear NHS Foundation Trust), Jeremy Parr (Newcastle University), Sarah Wigham (Newcastle University), Jacqui Rodgers (Newcastle University).
Background: Children with ASD are acknowledged to have an elevated risk of developing depression. Despite this, it is poorly understood and often underdiagnosed. The lack of reliable and valid measures of depression in this population are likely a factor in this. There is emerging evidence of a relationship between depression and a variety of psychological constructs, including traits of ASD.

Method: This multi-phased study aimed to contribute to the conceptual understanding of depression in ASD by examining the factor structure and psychometric properties of the Children’s Depression Inventory (parent version) in a sample of 127 children with ASD without comorbid learning disabilities. Consultation with parents was then sought in a focus group design before the direct and indirect effects between depression, sensory processing and restricted and repetitive behaviours were explored through mediation analyses.

Results: The results supported a unifactorial depression scale, with the removal of three of the original seventeen items. This scale evidenced promising reliability and validity however further adaptation is advised. Mediation analyses highlighted significant and previously unreported direct and indirect relationships between sensory hyposensitivity, restricted and repetitive behaviours and depression.

Conclusion: The findings constitute the first steps in the creation of a psychometrically robust measure of depression in children with ASD. This can have clinical utility in terms of improved screening for depression in a population whereby it is often missed. The potential roles of sensory processing and restricted and repetitive behaviours in the prediction and maintenance of depression offer new avenues for future research and clinical intervention.

**Presenter:** Chloe Lane  
**Title:** Memory in Sotos syndrome

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Co-authors: Elizabeth Milne (University of Sheffield), Megan Freeth (University of Sheffield).

Background: Sotos syndrome is a congenital overgrowth disorder associated with intellectual disability. Previous research has established that the cognitive profile associated with Sotos syndrome is characterised by relative strength in visuospatial memory but other aspects of memory have not yet been assessed. The aim of this study was to investigate whether individuals with Sotos syndrome display a relative selective strength in visuospatial memory or perform comparably on tasks assessing other memory domains.

Method: Memory was assessed using tasks from the British Ability Scales, third edition (BAS3). Participants were 38 individuals with a diagnosis of Sotos syndrome (mean age = 16.94 years, SD = 9.97; range of 6 – 50 years).

Results: Performance on three memory tasks from the BAS3 was compared in order to assess the core components of the Baddeley & Hitch model of memory: recall of digits forward (phonological loop), recognition of pictures (visuospatial sketchpad) and recall of digits backward (central executive). Participants performed significantly better on the recognition of pictures task, compared with the recall of digits forward and recall of digits backward tasks, demonstrating a relative selective strength in visuospatial memory. In addition, performance on four recall of objects tasks revealed that participants performed significantly better on tasks assessing visuospatial memory, compared with tasks assessing verbal memory.

Conclusion: Overall, the findings indicate that individuals with Sotos syndrome display a relative selective strength in visuospatial memory. This has important implications for considering how individuals with Sotos syndrome process information and the types of strategies which may support effective learning within this population.
Session 7

**Presenter:** Samuel Chawner  
**Title:** Intellectual Disability and Mental Health: Assessing the Genomic Impact on Neurodevelopment

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*Co-authors: Jeremy Hall, Michael Owen, Marianne van den Bree*

**Background:** When a child has a genetic condition parents often ask: “So what does this mean for my child?” The IMAGINE-ID study aims to understand the psychiatric comorbidities in children who have copy number variants (CNV) associated with intellectual disability.

**Method:** To date the IMAGINE ID study has assessed over 1500 children with a CNV referred from NHS medical genetics centres via online assessments. Of these 178 children (mean age = 9.7 years, 62% male) have undergone rigorous face-to-face assessments of cognition and psychiatric disorder. 54 control siblings (mean age = 10.5 years, 58% male) from the same families but who do not have a pathogenic CNV were also assessed. IQ was assessed using the Wechsler Abbreviated Scales of Intelligence and psychiatric diagnosis via the Child and Adolescent Psychiatric Assessment and the Social Communication Questionnaire.

**Results:** Children with genetic conditions had a greater prevalence of psychiatric disorders compared to their unaffected siblings (71.6% vs 19.5%, p<0.001). In particular, diagnoses of ADHD and ASD were elevated (p<0.001). Male CNV carriers were at greater risk of developing these neurodevelopmental disorders. CNV carriers had a deficit of 15.8 IQ points relative to their unaffected siblings with a greater impairment in verbal IQ than non-verbal IQ (7.6 IQ point difference).

**Conclusions:** Children who have a CNV associated with intellectual disability are at high risk of developing psychiatric disorder, in particular ADHD and ASD, and have particular deficits in verbal skills. This indicates the importance of clinical and educational support for this vulnerable group of children.

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**Presenter:** Emily Grew  
**Title:** The role of attention in reading and maths achievement in children with and without an Autism Spectrum Disorder

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*Affiliation: Durham University*  
*Co-authors: Deborah Riby (Durham University), Mary Hanley (Durham University)*

**Background:** Attention abilities provide the gateway for learning in all domains, including reading and maths. Although not a core feature of Autism Spectrum Disorder, attention atypicalities have been well-documented (Ames & Fletcher-Watson, 2010). However, little research has investigated the role of attentional atypicalities in academic achievement in ASD.

**Method:** Twenty-seven children with ASD aged between 6 and 16 years (M = 10.75) and 61 typically developing children aged between 6 and 11 years (M = 8.94) completed standardised assessments of IQ, attention (selective, sustained, and divided attention), and academic achievement (reading and maths achievement).
Results: Correlational and regression analyses revealed that divided attention and sustained attention may play an important role in maths and reading achievement. We also explored the role of divided attention using hierarchical cluster analysis, and found that those with poorer divided attention may have a relative weakness in maths achievement.

Conclusions: The results suggest that the ability to divide attention between two tasks (in this case, auditory and visual) is important for the development of maths skills. Further exploration of this relationship in a real world context, using real-time measures of attention and learning, is required to gain a deeper understanding of this relationship.

Presenter: Erica Ranzato
Title: Development of mathematical abilities in ASD
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Affiliation: Kingston University, London
Co-authors: Jo Van Herwegen (Kingston University London)

Background: Autism Spectrum Disorders (ASD) has often been associated with superior mathematical ability and incredible feats of rapid numerical estimation. However, clinical practice, teachers and therapists often consider mathematics as one of the difficult subject matters for children with ASD (Department for Education and Skills, 2001). To date, only a few studies have examined number development in ASD and have found mixed results (Chiang & Lin, 2007; Mayes & Calhoun, 2003). The current study examined the development of mathematical abilities in ASD.

Method: A cross-sectional study was used to examine the variability and development in mathematical abilities in children with ASD. Twenty participants of various ASD ability and severity, aged 5 to 19 years and forty TD children matched for mental age and chronological age were assessed on a number of domain general (intelligence and working memory) and domain specific factors (Approximate Number Sense (ANS), symbolic knowledge, number-line estimation) that relate to mathematical achievement.

Results: Mixed ANOVA analyses showed no significant differences for the three groups for symbolic abilities. However, the ASD group performed significantly below both groups for the ANS task and ANS abilities are a good predictor for mathematical development in the ASD group in contrast to the other groups.

Conclusion: The impairment on non-symbolic mathematical tasks and strong mathematical abilities suggest that number development in ASD follows an atypical pathway. This could lead to draft different recommendations for educational programs and interventions.

Session 9

Presenter: Andrew Jahoda
Title: The BeatIt trial outcomes: comparing the effectiveness of behavioural activation for depression in adults with learning disabilities with an attention control intervention

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Affiliation: Academic Centre, Gartnavel Royal Hospital, Glasgow
Co-authors: The BeatIt Research Team, Lauren Fulton (Institute of Health and Wellbeing, University of Glasgow).
Background: People with intellectual disabilities are often excluded from psychosocial therapies, which are usually the treatment of choice for people suffering from depression. The reasons for this include a paucity of evidence and the lack of manualised approaches, adapted to the life experience and circumstances of people with learning disabilities.

Method: The trial investigated the effectiveness of behavioural activation (BeatIt) for people with learning disabilities and depression. BeatIt was compared with a guided self-help (StepUp) intervention. This was a single-blind randomised controlled trial, with follow-up at four, eight and 12 months post-randomisation. In total, 161 participants were randomised (BeatIt 64; StepUp 77). They were aged over 18 years and had clinically significant depression. The primary outcome measure was the Glasgow Depression Scale (GDS-LD).

Results: There were no statistically significant group differences in the effects of StepUp and BeatIt on GDS-LD scores at the 12 month primary outcome point. However, there were statistically significant within group reductions in both arms of the study at 12 months (-4.20 for BeatIt and -4.46 for StepUp). Reductions occurred between baseline and four month follow-up, immediately following therapy, and there were no changes between four and 12 months. There was no economic evidence to suggest that BeatIt may be more cost-effective than StepUp. However, treatment costs for both groups were only approximately 4—6.5% of the total support costs.

Conclusion: Primary and secondary outcomes and economic data showed no evidence for BeatIt being more effective than StepUp. Although not supported with a robust experimental design (i.e., a Treatment as Usual comparison is lacking), all data sources are consistent with a conclusion that both BeatIt and StepUp were active and potentially effective interventions.

Presenter: Biza Stenfert Kroese
Title: Trauma-focused cognitive behaviour therapy for people with mild intellectual disabilities: Outcomes of a pilot study

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Co-authors: Paul Willner (University of Swansea).

Background: Trauma-focused cognitive-behaviour therapy (TF-CBT) is the most effective treatment for post-traumatic stress disorder (PTSD). Individuals who present with complex PTSD are among the most complex and challenging patients seen by intellectual disability psychology and psychiatry services. This was a pilot study of a TF-CBT intervention for people with intellectual disabilities (PwID) and complex PTSD.

Method: Three groups of PwID presenting with complex PTSD (n=3, n=5 and n=4) were treated using a 12-week manualized intervention adapted from a procedure routinely used in adult mental health services. Participants completed the Impact of Event Scale as adapted for PwID (IES-ID) before and after the intervention, and interviews conducted to ascertain their experiences of the group were analysed using interpretative phenomenological analysis (IPA).

Results: The ten participants who completed the intervention showed a 27% decrease in median IES-ID scores, equivalent to a medium effect size (d=0.50). Five themes were identified from the interviews: being listened to; it’s nice to know you’re not the only one; being in a group can be stressful; the importance of feeling safe; achieving and maintaining change. Participants also provided constructive feedback to promote improvements to the manual.

Conclusion: This small study has confirmed the potential of TF-CBT as an intervention for extremely vulnerable individuals with ID who present with complex PTSD. A feasibility study followed by
methodologically robust clinical trials is now needed to establish the effectiveness of the intervention and its utility in clinical practice.

**Presenter:** Lisa Richardson  
**Title:** Development of a psychosocial intervention to increase the Capacity Of people with iNTEllectual disabilities to manage and resist STigma (CONTEST).

**Email:** lisa.richardson@ucl.ac.uk  
**Affiliation:** University College London.  
**Co-authors:** Katrina Scior (University College London), Kristina Fenn (University College London), Laurie Poole (University College London), Sophini Logeswaran (University College London).

**Background:** Negative attitudes and discrimination remain everyday realities for many persons with intellectual disabilities (ID). This project developed a five session psychosocial group intervention ‘Standing up for myself’ (STORM) for adults (16 +) with mild to moderate ID, aimed at enhancing their capacity to manage and resist stigma and have a positive effect on their wellbeing.

**Method:** Eleven third sector organisations running groups for people with ID (such as educational, social and self-advocacy groups), undertook the intervention, with existing facilitators running the programme. The research assessed: (1) the feasibility of STORM; (2) preliminary outcomes of self-stigma, self-esteem, wellbeing and empowerment and the relationship between these; and (3) the process of delivery of STORM and its acceptability. Adapted and new measures of self-stigmatisation, perceived stigma, self-esteem, wellbeing, and empowerment were utilised, forming the new ‘Myself and the World questionnaire’. Questionnaires were administered as a group at baseline and after the intervention (follow-up planned). Process data were obtained via weekly feedback and post intervention interviews.

**Results:** The STORM programme elicited a very positive response from group facilitators and participants. Initial findings on the feasibility and acceptability of STORM will be presented.

**Conclusion:** The STORM programme generated interest and commitment from group facilitators and people with ID, demonstrating that the nature of the intervention is broadly acceptable and warrants a robust trial.

**Session 10**

**Presenter:** Sinead Rhodes  
**Title:** Peer relationships in children with Williams syndrome: parents’ and teachers’ insights.

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**Affiliation:** Child Life and Health, University of Edinburgh, Edinburgh.  
**Co-authors:** Amanda Gillooly (University of Edinburgh), Kevin Durkin (University of Strathclyde), Deborah Riby (University of Durham).

**Background:** Although children with Williams syndrome (WS) show a strong motivation to engage in social interactions, accumulating evidence suggests many have difficulties in making and sustaining friendships. The current study employed parent and teacher measures to gain an in depth view of peer relationships and the characteristics underlying any difficulties in children with WS.

**Method:** The parents of 21 children with WS (7-16 years, 12F & 9M) and 18 of the children’s class teachers participated. Children with WS were matched with a typically developing verbal group and with another group on non-verbal functioning. Parents completed the Social Responsiveness
Scale, the ‘socialisation’ domain of the Vineland Adaptive Behaviour Scale, and parents and teachers completed the Strengths and Difficulties Questionnaire. Parents and teachers also completed tailored peer relationship scales developed for the purposes of the current study.

Results: Children with WS were reported to demonstrate moderate to severe impairments in social interactions across parent and teacher measures, and scored poorer on socialisation than typically developing matched children. Children with WS were reported to have difficulties in making and sustaining friendships, although none reported bullying unlike previous research with adults with WS. Children with WS showed heightened tactile behaviour in their peer interactions, difficulties in social communication, lower social awareness and impaired social cognition.

Conclusion: Children with WS show significant difficulties in social interactions with peers that may arise from aspects of the WS phenotype including social communication and awareness, social cognition and tactile behaviour rather than being attributable to Intellectual delay.

**Presenter:** Rebecca Gibb  
**Title:** Evaluating the effect of a focused training intervention upon the quality of positive behaviour support plans for persons whose behaviour is designed as challenging

**Email:** Rebecca.Gibb@nas.org.uk  
**Affiliation:** Roman Fields School, Hertfordshire  
**Co-authors:** Sandy Toogood (Bangor University), Linda Hume (Edinburgh Napier University).

Background: Positive behaviour support (PBS) plans guide interventions to reduce challenging behaviour, but can be rated inadequate in adult services (Hassitosis, 2017). Poor quality plans limit scope of interventions and lead to increased and unnecessary restrictive practice interventions (RPIs) (Webber, Richardson, Lambrick, & Fester, 2012). The Behaviour Support Plan Quality Evaluation Guide II (BSPQEII) assesses plan quality and its use in training and auditing is increasing.

Method: Quality of 18 PBS plans written by nine participants was measured in an UK organisation supporting people with Autism Spectrum Disorder (ASD). All plans were rated weak, only one plan included functionally equivalent replacement behaviours (FERBs) and none met criteria for teaching strategies, reinforcement for skills and measurable behaviour definitions. Competency based training was designed around these four BSPQEII components. A multiple baseline across participants design was used, with group 1 receiving the training a week before group 2. All participants reviewed their plans after each group received training.

Results: Quality of plans significantly improved by a mean of 3.75 points on the BSPQEII and 39% improved to underdeveloped, the rating previously shown to reduce RPIs. Three of four targeted aspects significantly improved post-training (reinforcement showed a non-significant improvement). Despite scores improving only after participants had received training, groups did not differ significantly when only group one had received training, possibly due to the small sample size.

Conclusion: Limitations in the tool and study are identified. Providing focused training appears to improve PBS plan quality and should be incorporated into ongoing professional development.
Presenter: Madeline Donnachie
Title: An exploratory study of what people with intellectual disabilities find attractive about romantic partners and how they perceive themselves as romantic partners.

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Affiliation: Institute of Mental Health and Wellbeing, University of Glasgow, Gartnavel Royal Hospital, Glasgow
Co-authors: Andrew Jahoda (Institute of Mental Health & Well being, University of Glasgow), Benedict Jones (Institute of Neuroscience & Psychology, University of Glasgow).

Background: Whilst romantic or sexual attraction is a major research topic in the general population, little is known about people with intellectual disabilities’ views of attractiveness. Research exploring desirable romantic partner traits has indicated that people with intellectual disabilities appeared to hold less conventional views of physical attraction. This research explored what people with intellectual disabilities found attractive in others, and whether they thought others found them desirable.

Method: Twenty-nine adults with intellectual disabilities and twenty-nine adults without intellectual disabilities, aged between 16 and 40 years, were recruited from Further Education institutions and community organisations across Central and West Scotland. Depending on their sexual orientation, participants were shown 50 images of men or women’s faces and asked to rate their attractiveness. A semi-structured interview explored participants’ reasons for their highest and lowest ratings, their views of themselves as desirable to others and what they considered important qualities in romantic partners.

Results: A strong association was found between what men and women with intellectual disabilities and those without intellectual disabilities considered attractive in romantic partners. With regards to self-perceived desirability as a romantic partner people with intellectual disabilities were more likely to consider themselves desirable or attractive to others compared to their non-disabled peers.

Conclusion: Consideration should be given to how people with intellectual disabilities’ self-perceptions may influence their dating preferences and relationship development. Speaking to people with intellectual disabilities openly about attraction and desirability could provide opportunities to explore who they view as possible partners and to find ways to help individuals develop relationships.

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Abstracts – Poster Sessions (alphabetical order)

Presenter: Marie Alkan
Title: Investigating the development of episodic memory (EM) using a minimally verbal task

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Affiliation: Durham University.
Co-authors: Alexander Easton (Durham University), Deborah Riby (Durham University), Tom V. Smulders (Newcastle University).

Background: Episodic memory (EM) involves recalling the spatial location, and temporal context of personally experienced past events. Most of the tasks used to assess EM in children rely on verbal reports. This can be problematic for young children and children with neurodevelopmental disorders where access through language can be difficult. The objectives of this study were: (1) to
develop a portable apparatus that would allow us to behaviourally investigate What-Where-Which EM in children with and without ASD – However, we first explored the methodology with adult students to determine the tenability of the method; (2) to identify EM memory performance for specific binding combinations of the object, spatial location and temporal context within the same task.

Method: We developed a hide-and-seek task using a modified version of the real-world What-where-when memory test by Holland and Smulders (2011). In the task, adults completed two hiding sessions (each separated by 1-hour retention interval) where they hid six easily labelled objects (what) at specific locations within a hiding apparatus (where) situated in two different contexts (which) within the same room. We used two levels of difficulty: ten-box and a six-box hiding condition. At retrieval, adults in both conditions searched for 6 objects yielding 2 trials each of the specific memory combinations: What-where, What-Which and What-Where-Which.

Results: This study found that although accuracy was above chance levels for all binding combinations (WWWhich, What-where, and What-which) in the 10-box condition (chance levels lower), this was not the case for the 6-box condition (performance was only above chance for WW and WWWhich combinations). This finding remained even when the difficulty of the two conditions (chance levels) was included in the analysis as a covariate. We are in the process of collecting pilot data from typically developing (TD) children - their preliminary analysis will be presented at the conference.

Conclusion: Results from adults and pilot data from TD children will be discussed in light of the objectives of the current study.

Presenter: Magdalena Apanasionok
Title: Teaching Science Skills and Knowledge to Students with Developmental Disabilities: A Systematic Review

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Affiliation: Centre for Educational Development, Appraisal & Research (CEDAR), University of Warwick, Coventry
Co-authors: Richard Hastings (CEDAR, University of Warwick), Andreas Paris (CEDAR, University of Warwick), Richard Watkins (GwE School Effectiveness and Improvement Service for North Wales), Corinna Grindle (CEDAR, University of Warwick)

Background: Science has always been an important part of education in the United Kingdom. It provides pupils with many benefits, enhancing their understanding and curiosity about the world and building basis of employment for many students. However, only in the last two decades more guidelines about teaching science to students with learning disabilities have been published. This poster describes findings of a systematic review of literature on teaching science to students with Autism Spectrum Disorder (ASD) and/or Intellectual Disability (ID) in relation to two research areas – students’ science outcomes and students’ and teachers’ experiences of the interventions.

Method: Six databases related to education, psychology or science were systematically searched. Detailed protocol can be viewed on PROSPERO (registration number – 42017057323).

Results: Thirty studies have been identified in relation to science outcomes and sixteen in relation to social validity outcomes. Majority of the studies targeted science vocabulary and concepts. Other targets included inquiry skills, textbook comprehension, listening comprehension and chemical and physical properties. Majority of the interventions used components of the systematic instruction (n=18). Four studies focused on comprehension based instruction, three on self-directed learning, another three on peer tutoring and two on technology based instruction. This poster will also include considerations on social validity outcomes of presented studies.
Conclusion: The findings suggest that components of the systematic instruction might be effective in teaching science content to student with ASD and/or ID. Other teaching approaches will be discussed. The poster will also highlight some limitations and recommendations for future research.

**Presenter:** Susannah Baines  
**Title:** What do JSNAs tell us about people with learning disabilities and people with autism?  
**Email:** s.baines1@lancaster.ac.uk  
**Affiliation:** Centre for Disability Research, Lancaster University  
**Co-authors:** Chris Hatton (Lancaster University), Janet Robertson (Lancaster University), Eric Emerson (University of Sydney)

Background: The Health and Social Care Act 2012 made it a statutory requirement that health should be considered on a local level through Joint Health and Wellbeing Strategies based on Joint Strategic Needs Assessments (JSNAs). This study sought information in JSNAs about people with learning disabilities and compared the data to previous JSNA reports published by IHaL in 2013 and 2014.

**Method:** Between April and October 2017 Joint Strategic Needs Assessments were sought for all 154 authority areas using a search engine. We used a coding template to record for each JSNA the extent and nature of the information they contained on the health and wellbeing of children and adults with learning disabilities, and people with autism.

**Results:** At the time of this abstract submission the data collection is still in progress, however, we will present information on the number of local authorities who included information on people with learning disabilities and compare this with previous years. We will also look at what information the JSNAs contained e.g. did they include data on health and mortality.

**Conclusion:** Without the full data set we are unable to state our conclusions at this stage but we are already able to say that the amount of information held in JSNAs about people with learning disabilities varies widely between local authorities. The type of JSNA also varies considerably between local authorities with some authorities making no mention of people with learning disabilities or autism whereas others publish lengthy needs assessments.

**Presenter:** Gemma Barlow  
**Title:** Football teams for people with Intellectual Disabilities in secure settings and in the community: “Something different and probably once in a lifetime chance to have”  
**Email:** gemma.barlow@cumbria.nhs.uk  
**Affiliation:** Community Learning Disabilities, Workington  
**Co-authors:** Nicholas Hudson (Tees, Esk and Wear Valleys NHS Foundation Trust), Kelly Rayner (Cumbria Partnership NHS Foundation Trust)

**Background:** This study aims to explore the differences between findings from two previous studies into the experiences of individuals with Intellectual Disabilities (ID) of their participation in a Community Football Programme. The benefits of participation in regular exercise on mental health are evidenced in typically developing populations and those with ID. It is recognised that wellbeing should be a key factor in driving recovery and rehabilitation, however in forensic services interventions for risk reduction are often prioritised.

**Method:** Fifteen people who participated in a Community Football Programme were interviewed about their experiences. Eight were detained in secure inpatient services and seven were living in the community. Transcripts were previously analysed and presented separately dependant on
setting. In the current study, Template Analysis was used to reanalyse all transcripts in order to explore the similarities and differences between settings.

Results: Four themes were identified as not consistent in presentation across the different settings within the previous research: Fitness, Nostalgia, Community integration, and Tangible support. All themes were evident across both settings, despite differing in how they were presented within transcripts. This appeared to indicate differences in the perceived benefits of the programme in these areas, not an absence of them

Conclusion: Benefits of the programme discussed by those in secure settings were also discussed by those in the community indicating their continued value regardless of environment. The current study evidences the benefits and importance of non-traditional interventions to be intrinsic throughout someone’s treatment and rehabilitation pathway during and after reintegration into the community.

Presenter: Claire Bates
Title: Breast Screening, Mental Capacity and Women with Intellectual Disabilities
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Co-authors: Paraskevi Triantafyllopoulou (Tizard Centre, University of Kent)

Background: Participation in breast screening is considerably lower for women with intellectual disabilities compared to the general population. Barriers to screening include poor mobility and behavioural difficulties. There is currently no research which examines the impact of mental capacity on the breast screening process for this group.

Method: A cross sectional survey of 131 women with intellectual disabilities supported by eight support provider charities within the England and Wales. The aim was to explore decision making surrounding breast screening, including how the associated risk factors are addressed within this process. Participants, or staff on their behalf if they lacked capacity, completed a specifically created survey.

Results: The findings indicated that women who lack capacity were less likely to engage in breast screening. It also demonstrated that the processes outlined in the Mental Capacity Act (2005) were not always being followed, people were not routinely being assessed if there was doubt regarding their decision-making ability and best interest meetings were not always held if the person lacked capacity regarding breast screening.

Conclusion: Improvements need to be made to ensure that vulnerable women are not being denied access to national screening programs on the grounds of capacity. The Mental Capacity Act needs to become embedded in practice for all health and social care professionals, especially support staff who are often the first involved in the decision making process

Presenter: Greta Brunskill
Title: Using Positive Behavioural Support as a multi-disciplinary inpatient team: clinical outcomes and reflections on a case example from a specialist young people’s service.
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Affiliation: Northumberland, Tyne and Wear NHS Foundation Trust
Co-authors: Tiffany Amsdon (Northumberland, Tyne and Wear NHS Foundation Trust), Lee Booth (Northumberland, Tyne and Wear NHS Foundation Trust), Susan Graham (Northumberland, Tyne and Wear NHS Foundation Trust), Karen Lewis (Northumberland, Tyne and Wear NHS Foundation Trust).
Background: Sam was a 15 year old young man with diagnoses of moderate learning disability and ADHD who was referred to a specialist inpatient service due to escalating physically aggressive behaviour related to his need to access female clothing, incontinence wear and other items. These behaviours were having a significant negative impact on his quality of life, and on admission concerns were so high about risks associated with Sam’s behaviour that transfer to a low secure environment was considered.

Method: A multi-disciplinary approach using a Positive Behavioural Support (PBS) framework supported the implementation of a function-based, multi-element intervention based on a shared understanding of Sam’s behaviour in the context of his vulnerabilities, learning history, and sexual development. The Behaviour Support Plan included building new skills (social stories, calm breathing), planned and safe access to items, and a structured timetable, alongside therapy to support appropriate exploration and self-expression.

Results: Significant reductions in both the frequency and severity of challenging behaviours have occurred. Sam participates in a full daily timetable, accesses a wide range of community activities, and is preparing to move to a community placement that will support his transition into adulthood. His parents describe increased confidence and that as a family they can spend quality time together again.

Conclusion: Reflections are made on some of the challenges of developing a shared understanding of highly complex and emotive behaviour in the context of high levels of concern about risk, and the value of a multi-disciplinary approach to applying PBS to deliver highly individualised interventions.

Presenter: Katie Cebula
Title: The role of family dynamics and relationships in the psychological wellbeing and adjustment of children with Williams syndrome, their parents and siblings

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Co-authors: Deborah Riby (Durham University), Richard Hastings (University of Warwick), Amanda Gillooly (University of Edinburgh), Laura Coulthard (Durham University).

Background: Previous research indicates the role of family dynamics and relationships in the development of children with developmental disabilities and their siblings. However, little research has examined these relationships in children with rare genetic intellectual disability syndromes. The current questionnaire study investigated the associations between the wellbeing and behaviour of family members, specifically exploring the relationships between the child with Williams syndrome (WS), their parents and siblings.

Method: To date, 16 parents and 11 neurotypical siblings (9-16 years; 3M, 8F) to a child with WS (4-17 years; 12M, 4F) have participated in this ongoing study. Parents and siblings completed individual questionnaire packs. The questionnaires measured parental wellbeing, family functioning, behavioural and emotional adjustment of the child with WS and neurotypical sibling and quality of the sibling relationship.

Results: Preliminary findings indicate that the children with WS showed significantly greater behavioural difficulties than the normative population. A positive association was found between the behavioural adjustment of the children with WS and their neurotypical siblings. The siblings’ perceptions of support were negatively associated with their behavioural adjustment. Characteristics of family functioning were also associated with parental wellbeing. Family satisfaction, overall life satisfaction and the quality of the sibling relationship were negatively associated with parents’ symptoms of anxiety and depression.
Conclusion: The current findings support an integral role of family dynamics and relationships in the developmental outcomes of children with WS and their neurotypical siblings and the psychological wellbeing of parents.

**Presenter:** Tina Cook  
**Title:** *Mindfulness and Acceptance and Commitment Therapy as a means of reducing stress for family carers of adults with a learning disability and behaviour that challenges: Voices, viewpoints and validation.*

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Co-authors: Steve Noone (Northumberland Tyne and Wear NHS Foundation), Megan Thomson (Northumberland Tyne and Wear NHS Foundation Trust), Viv Cooper (The Challenging Behaviour Foundation), Dominic Slowie (NHS England, National Clinical Director for Learning Disability), Cahley Hemm (Northumberland Tyne and Wear NHS Foundation Trust)

Background: An additional burden of care facing parents of children with intellectual disabilities and behaviours that challenge is widely accepted yet little work has been done on how to support those who continue to care when their children become adults. Using a collaborative action research approach with participatory methods this research project aims to develop, with parents/family carers, an effective five-session course for parents/family carers who care for an adult family member who has a learning disability and behaviour that challenges. The course builds on principles from Acceptance and Commitment Therapy, Mindfulness Based Stress Reduction and PBS.

Method: Parents/family carers are recruited through NHS and third-sector organisations. Qualitative interviews are used to capture the views, experiences and expectations of parents/family carers and facilitators. Critical reflective processes, facilitated through focus groups held during and after the course, engage parents/family carers in generating data used to inform the delivery of the courses (content and process) and capture indicators of effectiveness.

Results: Early finding show that initially parents/family carers were reluctant to recognise their own needs; the course supported a change in this. Parents/family carers reported tangible positive impacts on their lives. They used techniques to reduce their stressful reactions and make new investments in their own well-being. They captured their own indicators of success, which interestingly orientated with core ACT processes difficult thoughts (which freed them up to problem solve effectively) whilst holding in mind and committing to their chosen values.

**Presenter:** Dave Dagnan  
**Title:** *Systematic review of staff based interventions and support systems to improve the well-being of staff that provide care to people with intellectual disabilities.*

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Co-authors: Isabel Jackson (Cumbria Partnership NHS Foundation Trust), Nick Gore & Peter Baker (Tizard Centre, University of Kent), Richard Hastings (Centre for Educational Development Appraisal)
and Research, University of Warwick), John Rose (University of Birmingham), Steve Noone (Northumberland Tyne & Wear NHS Foundation Trust), Andrew Jahoda (University of Glasgow).

Background: A number of factors are known to have an emotional impact on staff working with people with learning disabilities. Staff are one of the most important assets or care systems and it is assumed that their wellbeing will impact on the lives of people with learning disabilities. This poster describes a systemic review of studies that report outcomes of interventions to improve the well-being of staff working with people with learning disabilities.

Method: A systematic search of six databases (including Web of Science and Scopus) was carried out using CASP guidance. The project details are available on the Prospero site (project number: 2016:CRD42016037234).

Results: Sixteen papers have, so far, been identified. The papers identify 628 staff who have received intervention. The biggest category of interventions with nine papers were in ‘3rd wave’ approaches (three mindfulness and six Acceptance and commitment therapy), three papers took a broadly cognitive therapy/problem solving approach, two described a ‘whole system approach’ and two described debriefing interventions. The poster will describe the wide range of measures that have been used. All studies have a measure of stress, burnout or other emotional impact; the poster will explore the potential for meta-analysis using the data from these studies.

Conclusion: The distinctions between the different approaches used to support staff well-being will be discussed and attention will be drawn to areas that are commonly present in service support structures but which have little or no evidence within the research/evaluation literature. Areas for further research will be highlighted.

Presenter: Michael-John Derges
Title: Cross-cultural study of the Development of Face Expertise in Autism
Email: michael-john.derges@durham.ac.uk
Affiliation: Durham University
Co-authors: Mary Hanley (Durham University), Deborah Riby (Durham University), Masahiro Hirai (Jichi Medical University).

Background: Atypicalities with face processing have been suggested to underlie some of the social impairments in Autism. These atypicalities are characterised by a lack of expertise with face processing and may provide insight into the development of this neurodevelopmental disorder. One way to probe face expertise is by testing the Own-Race Effect (ORE). Evidence (or lack thereof) of the ORE between children with and without autism can reveal fundamental information about the development of face perception in autism.

Method: Children with autism and typically developing children from the UK and Japan completed a two-forced choice alternative face recognition task across which contained Asian and Caucasian faces, in four different conditions (identity change, easy eyes, hard eyes, hard mouth). Attention to faces was measured during the task using eye-tracking.

Results: In terms of accuracy, there were cultural group differences (Japanese children more accurate, different pattern across conditions) but no developmental group differences - children with and without autism showed a typical ORE. There were cultural differences in face scanning during encoding and recognition - both UK groups showed a bias to eyes and mouths of own-race compared to other-race faces, whereas the opposite was found for the Japanese groups.

Conclusion: Although culture has an influence on how children attend to faces, children with autism in Japan and the UK show a typical ORE. This has implications for theory around social development and face processing in autism.
Presenter: Karri Gillespie-Smith  
Title: Bringing methods into focus: How task demand and scene complexity drives attention allocation in Autism.

Email: karri.gillespie-smith@uws.ac.uk  
Affiliation: University of West of Scotland.  
Co-authors: Gywneth Doherty-Sneddon (Newcastle University), Carrie Ballantyne (University of West of Scotland), Peter Hancock (University of Stirling)

Background: It has been proposed that atypical gaze behaviour is only observed when task demands are high or when scenes are sufficiently complex (Ames & Fletcher-Watson 2010). The current line of enquiry aims to explore this by manipulating complexity within scenes while recording gaze behaviour, while asking children to complete a task (task-driven attention) or look at the scenes only (spontaneous attention). It is predicted that groups with ASD will look less at faces across all complexity levels despite task demands.

Method: Using eye-tracking methodology, one group with Autism (Group 1; n = 20; mean age = 12 years 3 months) looked at scenes of varying complexity followed by a related memory task. Another group with Autism (Group 2; n=19; mean age = 11 years 4 months) looked at the same scenes but did not complete a task.

Results: Group 1 (task condition), showed typical gaze behaviour and looked longer at the faces (m = 899 ms) compared to objects (m = 423 ms) across the scene complexity levels F (1, 76) = 22.395, p <= .001. Group 2 (spontaneous condition) showed more atypical gaze behaviour and looked less at the faces (m = 742 ms) compared to objects (m = 1114 ms), F(2, 104.50) = 4.14, p < .05, across complexity.

Conclusion: The results show that regardless of social and object complexity, task driven gaze behaviour is more typical than spontaneous gaze behaviour in groups with Autism. Discussion focuses on implications of this on existing literature and wider social functioning in Autism.

Presenter: Emine Gurbuz  
Title: Social and Academic Experiences of Higher-Education Students with and without an ASD in the UK

Email: emine.gurbuz@durham.ac.uk  
Affiliation: Durham University  
Co-authors: Deborah Riby (Durham University), Mary Hanley (Durham University)

Background: The number of higher-education students with ASD is increasing in both UK (MacLeod & Green, 2009) and the US (White et al., 2011) – with 1.9 % of students identified as having ASD in US. Although transition to university is a challenging period due to the heightened demands of social and academic life, minimal research has investigated the challenges or potential strengths of students with an ASD.

Methods: An online questionnaire consisting of 57 Likert-scale items and 7 open-ended questions was completed by 26 students with an ASD and 158 typically developing students (TD), currently enrolled in higher-education in the UK. For the Likert-scale items, Principal Component Analysis (PCA) was conducted. For the open-ended questions thematic qualitative analysis was conducted.

Results: Overall, 22 % of the university students self-reported to have a mental health diagnoses, which increased to 54 % among the students with an ASD. PCA resulted in two main factors; social and academic functioning. Compared to TD, the students with an ASD reported significantly lower social functioning (p < .001) and significantly greater dissatisfaction with their academic performance (p = .001). The thematic analysis revealed significant challenges for the students with an ASD in social skills, professional support, awareness/disclosure of ASD, together with some impressions of
their own relative strengths, particularly in academic skills (e.g. writing, research) although this latter issue occurs in parallel with dissatisfaction in their actual academic performance.

Conclusions: Students with an ASD seem to have difficulties in meeting the social demands of university life, and this occurs alongside high rates of mental health difficulties. Further personalized support would be beneficial for students with ASD in higher education.

**Presenter:** Chris Hatton  
**Title:** Participant, supporter and therapist experiences of psychological interventions for people with mild/moderate intellectual disabilities and depression in the Beat It trial: a qualitative analysis

Email: chris.hatton@lancaster.ac.uk  
Affiliation: Centre for Disability Research, Lancaster University, Lancaster  
Co-authors: Katie Scott and Andrew Jahoda (University of Glasgow), Dawn Knowles and Ian Smith (Lancaster University), Roseanna Knight and Kevanne Singer (University of Warwick), Jaci Huws (Bangor University).

**Background:** Qualitative analyses of people’s experiences of psychological interventions can complement quantitative trial data. However, qualitative research concerning people’s experiences of psychological interventions with people with intellectual disabilities and mental health problems is sparse.

**Method:** Within the BeatIt trial of behavioural activation (BeatIt) vs an attention control guided self-help intervention (StepUp), semi-structured interviews were conducted with purposive samples of people with intellectual disabilities who had completed therapy (15 BeatIt, 10 StepUp) and carers who had supported the person throughout therapy (11 BeatIt, 10 StepUp). Six focus groups were conducted with trial therapists (15 BeatIt, 11 StepUp). Framework analyses using transcripts of participant, supporter and therapist interviews/focus groups generated themes and sub-themes related to specific and non-specific aspects of the interventions.

**Results:** The percentage of adult inpatients recorded with learning disabilities was in 2014: 301 patients, 7.6%; in 2016: 266 patients 7.2%. More adults with learning disabilities were in hospital for more than five years compared to adults without learning disabilities (2014: 38.2% vs 11.4%; 2016: 36.7% vs 11.7%), more were subject to delayed discharger (2014: 20.3% vs 6.6%; 2016 22.7% vs 6.3%), and more were detained under the mental health act (2014: 66.9% vs 36.7%; 2016: 75.4% vs 41.4%). There was little change between 2014 and 2016

**Conclusion:** Carefully designed adapted psychological interventions for people with intellectual disabilities and depression can be delivered in ways that are positively experienced by participants, supporters and therapists.

**Presenter:** Anne Johnston  
**Title:** A pilot feasibility study of a school-based walking intervention for young people with intellectual disabilities

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Affiliation: Institute of Nursing and Health Research, Ulster University  
Co-authors: Laurence Taggart (Ulster University), Marie Murphy (Ulster University).

**Background:** There are low levels of physical activity (PA) in children and adolescents with intellectual disabilities (ID). Walking can help to reach the recommended daily guidelines of 60 minutes moderate to vigorous PA per day. Walking is a convenient, accessible and free form of
exercise that can be incorporated into daily life and sustained into old age; therefore it may be suitable for the ID population.

Method: A 12 week pilot feasibility study of a school based walking intervention across 3 special schools in Northern Ireland with a total of 40 participants. The age range of participants was 9-18 years. Older participants (15-18 years) were paired with younger participants (9-14 years) in a peer buddy system. The theoretical underpinning was behaviour change techniques (BCTs) mapped to the socio-ecological model. PA was objectively measured by accelerometer and pedometers were used as a motivational tool. PA, BMI, height, weight, physical fitness and emotional wellbeing were assessed at four time points.

Results: In relation to feasibility, it was feasible to recruit participants to the study and outcome measures appeared appropriate and acceptable for this population. Compliance to accelerometer wear time was poor (67% in intervention group and 30% in control group), which may suggest this is not the best method to quantify physical activity in this population. Data recorded in walk diaries by teachers show that the walking programme was implemented with a good degree of fidelity. There were positive trends in the intervention group for total weekly, weekday and school time PA.

Conclusion: This study examined the feasibility of the 12 week school-based walking programme for young people with ID and identified the methodological challenges for PA interventions in this population.

Presenter: Lin Lu
Title: The effects of cultural difference on the rating of ADHD symptoms: A comparison between Chinese and British teachers’ ratings.

Email: lin.lu@durham.ac.uk
Affiliation: Durham University
Co-authors: Peter Tymms (Durham University), Christine Merrell (Durham University).

Background: Globally, ADHD is the most common childhood onset psychological disorder. However, prevalence varies significantly between countries, this variance may be driven by methodological or cultural difference. Therefore, it is important to establish to what extent culture affects ADHD diagnosis and if it does, what its effects are.

Method: Teacher’s rating is a valuable source of information used to reveal behavioral issues in children. This study is investigating whether culture difference affects teachers’ ratings of ADHD. Six animated cartoons which represent six ADHD symptoms in classroom setting have been developed. In each cartoon, there are five characters portrayed as 6 to 7 years old children without cultural and gender references. These characters display different ADHD behaviours, set in six different contexts in the cartoons. The Chinese and British primary teachers are being asked to watch the cartoons and subsequently rate the behaviours of each character. In addition, every teacher is being asked to rate 10 children who selected at random from the teacher’s class. It is hoped that a statistical comparison of ratings provided by teachers from different cultures will shed light on the culture effects on ADHD diagnosis.

Results: At this stage, 105 Chinese primary teachers have participated. The paper will report the psychometric properties of the data using the Rasch model.

Conclusion: Because the cartoons have been designed to avoid cultural and gender references, they can, potentially, be used across any culture to investigate not only the effects of culture differences, but also the effects of individual variation on ADHD diagnosis.
Presenter: Daron Marged Owens  
**Title:** Everyday lives: exploring the experiences of people with a learning disability in the early stages of the new Social Services and Wellbeing Act (2014) Wales  

Email: sop80b@bangor.ac.uk  
Affiliation: Bangor University, Wales.  
Co-authors: Dr Diane Seddon & Dr Anne Krayer (Bangor University), Wayne Crocker (Director of Mencap Cymru)  

Background: The past year has been momentous for social care in Wales in that the legislative landscape has recently been transformed. The new Act is argued to be the largest piece of legislation that Wales will ever pass, designed to respond to the challenges of the present day. Finding a path to sustainability by preparing for the future is also a key aim. The PhD is focused on the impact of such changes on the lives of people with a learning disability in Wales. To better understand the main challenges facing people with a learning disability, living in the community in terms of access to support and everyday well-being, a qualitative evidence synthesis was undertaken.  

Method: Using NVivo, included studies were thematically analysed according to the Thomas & Harden (2008) 3-stage method.  

Results: This process resulted in 130 free codes, which were refined into 17 descriptive themes. Analytical themes are currently being developed. Following analysis, the CERQual tool (Lewin et al. 2015) will be applied to assess confidence in synthesis findings.  

Conclusion: This presentation will introduce the results from the initial stages of analysis, which revolve around such key themes as identities, varied understandings of well-being, and the challenges in providing an appropriate level of support for individuals. Following completion of the synthesis the focus of the fieldwork will be informed by consulting with local LD groups. Interviews will take a narrative approach, used as an inclusive participatory method, to elicit stories of individuals’ experiences since the implementation of the new Act.  


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Presenter: Peter Mulhall  
**Title:** Barriers to conducting ID RCTs - experiences of international experts  

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Affiliation: School of Nursing, Ulster University  
Co-authors: Laurence Taggart (School of Nursing, Ulster University), Vivien Coates (School of Nursing, Ulster University), Toni McAloon (School of Nursing, Ulster University).  

Background: A common note in many ID-related systematic reviews is that there is a lack of quality RCTs. In addition, people with ID are routinely excluded from mainstream trials. Consequently, the development of robust evidence bases is slow. If this is to change then we need a better understanding of the challenges of conducting ID-specific trials and we need ways to make mainstream trials more inclusive of people with ID.  

Method: Twelve 1:1 semi-structured interviews were conducted with international ID RCT experts. Interviews were conducted face-to-face, by telephone or by skype. Transcriptions were anonymised and analysed using a Thematic Content Analysis approach.  

Results: Seven main themes emerged relating to barriers concerning 1) the uniqueness of the participants, 2) ethics and obtaining consent, 3) the RCT methodology itself, 4) the systems within which the research was conducted, 5) the lack of technical understanding of colleagues, 6) attitudes and perceptions held by participants, carers, staff and the research community, and 7) challenges
integrating evidence into practice. Some of these challenges are methodological and have been reported in the literature, others are more practical/inter-personal and are seldom reported. Conclusion: With reasonable adjustments, many of these challenges can be overcome. Arguably the challenges that are more persistent, pose the greatest barriers and are harder to overcome are those relating to the attitudes and perceptions that people (professional staff, funding bodies, carers or fellow researchers) hold towards the utility of conducting RCTs with ID populations. Issues concerning the sharing of practical experiences as well as evidence bases are discussed.

**Presenter:** Martin McMahon  
**Title:** The relationship between subjective socioeconomic status and health in adults with intellectual disabilities.  
**Email:** m.mcmahon@health.gov.je  
**Affiliation:** Lancaster University  
**Co-authors:** Chris Hatton (Lancaster University)

**Background:** The relationship between socioeconomic status (SES) and health is significant and well documented. Conventional objective indicators of SES are education, occupational status and income. Utilising conventional indicators for determining SES for individuals with an intellectual disability is potentially inaccurate, as these individuals are generally unemployed, have no formal qualifications and have limited income. Emerging literature has suggested that subjective SES may be a more meaningful indicator to determine health outcomes. The primary aim of this PhD study is to examine the relationship between objective and subjective measures of SES and health amongst individuals with intellectual disabilities.

**Method:** All individuals (n=339) with intellectual disabilities known to adult services in Jersey who consent to participate are being interviewed. Proxy respondents are being sought for participant’s who lack the capacity to participate. The MacArthur Scale of Subjective Social Status is being used to measure subjective SES. Four objective measures of SES are being used: education, occupational status, personal and household income. General health functioning is being assessed using the Short Form 36 (SF-36), the 5-level EQ-5D (EQ-5D-5L) and a general health questionnaire constructed on the International Classification of Diseases (ICD-10) chapter headings.

**Results:** Data collection is ongoing and preliminary analysis will be presented at the conference. Subjective indicators of SES as described by people with intellectual disabilities and relationships to: a) occupation, education and income; b) the SF-36 and EQ-5D-5L will be reported.

**Conclusion:** We cannot outline any firm conclusions at this stage. However, our interpretation of initial findings will focus on if subjective SES provides an improved predictive utility to determine health outcomes in adults with intellectual disabilities.

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**Presenter:** Mark Oliver  
**Title:** The initial development of a psychological flexibility measure for people with intellectual disabilities.  
**Email:** mark.oliver@ntw.nhs.uk  
**Affiliation:** Northumberland Community Learning Disability Service, Northumberland, Tyne & Wear NHS Foundation Trust, Cramlington.  
**Co-authors:** Matthew Selman (Northumberland, Tyne & Wear NHS Foundation Trust), Megan Thomson (Northumberland, Tyne & Wear NHS Foundation Trust), Rebecca Long (Northumberland, Tyne & Wear NHS Foundation Trust), Nicci Forshaw (Northumbria Healthcare NHS Foundation Trust), Sam Brice (Newcastle University)
Background: Acceptance and Commitment Therapy (ACT) is an increasingly popular “third wave” psychological therapy. ACT works not by reducing symptoms, but by enhancing psychological flexibility (PF); a construct that encompasses healthier responses to our own aversive thoughts and feelings, allowing for active engagement in a life guided by freely chosen values. ACT has a rapidly expanding evidence base of over two hundred randomized controlled trials, and yet the published evidence base for ACT with ID consists of two single case studies. A barrier to publishing more is the lack of an adapted measure of PF for people with ID. This paper reports on the initial stages of the development of the Psychological Flexibility Questionnaire for People with Intellectual Disability (PFQ-ID).

Method: 1. A focus group of people with ID will report on two mainstream PF measures and the PFQ-ID. 2. An opportunity sample of the public will complete two mainstream PF measures and the PFQ-ID to establish concurrent validity. 3. Two mainstream PF measures and the PFQ-ID will track changes in PF as a result of ACT training in a typically developing sample.

Results: We are currently in the data-collecting stage; results will be available in time for the conference.

Conclusion: We will present conclusions when the data has been analysed. We hope to be able to report that our adapted psychological flexibility measure is considered to be more appropriate for people with ID than the established measures, and that the initial tests of its psychometric properties are adequate.

Presenter: Ciara Padden
Title: Psychophysiological Measures of Stress in Caregivers of People with Autism Spectrum Disorder: A Systematic Review.
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Affiliation: Tizard Centre, University of Kent, Canterbury
Co-authors: Carolina Considali-McGlynn (Trinity College Dublin, the University of Dublin), Sinead Lydon (National University of Ireland, Galway)

Background: Parents of children with Autism Spectrum Disorder (ASD) often report heightened levels of stress and physical health problems.

Method: This paper reviewed studies assessing physiological measures of stress among parents of children with ASD. Systematic database searches identified 15 studies meeting inclusion criteria. Studies were analysed to determine: (a) control group characteristics; (b) caregiver and care recipient characteristics; (c) setting; (d) physiological measures employed; (e) physiological outcomes; and (f) stressor type.

Results: A pattern of blunted physiological activity emerged within the reviewed studies, with findings suggesting dysfunction of the hypothalamic-pituitary-adrenal (HPA)-axis and autonomic nervous system for some, but not all, parents of children with ASD.

Conclusion: Potential contributing factors and implications are discussed.
Presenter: Annette Parakkal  
**Title:** Families on the Journey: Parent and Teacher Perspectives on Home-School Partnership Working for Pupils with Developmental Disabilities and English as an Additional Language.

Email: s1620128@sms.ed.ac.uk  
Affiliation: School of Education and Sport, University of Edinburgh  
Co-authors: Katie Cebula (University of Edinburgh)

Background: Home-school partnership’ (HSP) refers to cooperation between parents and teachers, aimed at supporting pupils’ academic development through a variety of methods. The benefits of HSP and the factors which affect its implementation within inclusive education have been identified in previous studies. However, The HSP experiences of families who speak English as an Additional Language, and have children with developmental disabilities have not been extensively explored to date. The present study used Epstein’s (1995) model of HSP, in order to explore the experiences of this group.

Method: Face-to-face semi-structured interviews were conducted with 3 teachers and parents of 5 pupils from a special school, within an urban location in Scotland. Interviews focused on participants’ expectations of HSP, barriers experienced, potential solutions identified and views on any influential socio-cultural factors. Interviews were conducted in English or Malayalam, and analysed using thematic analysis.

Results: Findings highlighted a shared willingness to form partnerships with the child’s best interests at their core. There was also a sense of cultural inclusion. However, differences in parent and teacher expectations around home-school communication emerged, as did limited connectivity amongst parents, and a degree of isolation for some families. Whilst parents were able to attend key events such as review meetings, pragmatic challenges made attendance at social events difficult.

Conclusion: Whilst this was a small-scale study, findings suggested the benefit of parents and teachers sharing their understanding of HSP expectations, and exploring ways to further build the community of parents, perhaps via pupil-focused events.

Presenter: Ellen Ridley  
**Title:** Educational Provision and Challenges for pupils with Williams syndrome

Email: ellen.ridley@durham.ac.uk  
Affiliation: Durham University  
Co-authors: Emma Reames (Durham), Deborah Riby (Durham)

Background: The Williams Syndrome (WS) profile is comprised of a complex mix of challenges, including medical needs, cognitive abilities, social tendencies, sensory sensitivities and mental health difficulties. The interplay of such challenges is highly likely to have a significant impact upon the education of pupils with this disorder. Given there is a scarcity of research on educational challenges or provision for this population, the aim of this project was to 1) provide an overview of educational provision for current pupils with WS in primary and secondary education within the UK 2) provide a detailed investigation into the most significant challenges for pupils with a diagnosis of WS.

Methods: An online questionnaire was designed to probe the type of educational provision at primary and secondary school, the most significant challenge for the child at different stages of education, and outcome and employment in adulthood. Participants were the parents of 134 individuals with WS (ranging 4 – 57 years) who resided in the UK and were recruited through existing research links, advertising through social media and support networks, and the Williams Syndrome Foundation.
Results: The findings presented in this poster focus on 42 children of primary school age and 20 children of secondary school age. Results suggest a shift from mainstream provision to special educational provision from primary to secondary school. Important challenges arise at both educational stages, with parents reporting significant challenges relating to the medical, behavioural, cognitive, and social manifestations of WS. The large heterogeneity in challenges emphasises the importance of targeted interventions and individualised support plans.

Conclusions: These data provide the first detailed insight into educational provision and educational challenges for pupils with a diagnosis of WS and will be a particularly useful resource for practitioners, educators, and families in evaluating the needs and provision for pupils with WS in the UK.

Presenter: Emilly Scott
Title: Working with People with Intellectual Disabilities and Behaviour that Challenges: Perspectives from Clinical Psychologists
Email: emillyscott@hotmail.co.uk
Affiliation: University of Edinburgh, Edinburgh
Co-authors: Kenneth MacMahon (University of Edinburgh), Rowan Reffold (NHS Tayside)

Background: Although a considerable body of research has concentrated on the experience of paid carers and families involved with people with intellectual disabilities and behaviour that challenges, little is known about the experiences of those in multi-disciplinary healthcare teams, including clinical psychologists. This article explores their perspectives.

Method: Fourteen female clinical psychologists were interviewed. Thematic analysis was utilised to derive themes from their transcripts.

Results: Two overarching themes were apparent across all participants: difficult experiences and positive experiences. Participants reported barriers to influence change and feelings of stress, worry, anxiety, self-doubt and frustration within the role. Supervision and support from colleagues appeared to act as moderators of difficult emotions. All interviewees conveyed a sense of reward within their role.

Conclusion: Clinical psychologists incur varied experiences. It appears the benefit of support from colleagues is key in managing difficult emotions. Based on the findings, provisions that are believed to improve clinical psychologists' experiences are considered.

Presenter: Hannah Shackleton
Title: The measurement of suggestibility in adults with intellectual disabilities: Adaptation of the Gudjonsson Suggestibility Scales and an exploration of the influence of cognitive variables.
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Affiliation: NHS Tayside/University of Edinburgh
Co-Authors: Dr Ken MacMahon (University of Edinburgh), Sharon Horne-Jenkins (NHS Forth Valley)

Background: Accepting and/or behaving under the influence of other’s suggestion in an interview context can be described as ‘interrogative suggestibility’ (IS). The Gudjonsson Suggestibility Scales (GSS) are used in many settings as a tool to gauge the reliability of information obtained during interviews, however concerns exist regarding their suitability for use amongst the population of people with an intellectual disability (ID). Previous research concludes that the GSS may disadvantage people with an ID, indicating a greater degree of IS than is actually the case. Existing
research has made various adaptations to improve the utility of the GSS with people with an ID. This study combines past adaptations to explore the effect on GSS performance.

Methods: 40 adults with an ID completed an adapted version of the GSS along with measures of IQ, verbal working memory, visual memory and situational anxiety.

Results: The addition of visual information to a shortened adapted version of the GSS failed to significantly improve the performance of people with an ID on the GSS. A multiple regression analysis identified a potential association between visual memory and outcomes on the adapted GSS, but clear theoretical conclusions were difficult to draw.

Conclusions: The addition of visuals to an adapted GSS failed to improve IS scores. This research highlights the complexity of the field of IS research, particularly amongst people with an ID.

Presenter: Laura Surley
Title: A Review of the Frequency and Nature of Adaptations to Cognitive Behavioural Therapy for Adults with Intellectual Disabilities

Background: There is increasing evidence that Cognitive Behavioural Therapy (CBT) can be effective for people with Intellectual Disabilities, and recent publications regarding the care of this population have highlighted the need for equal access to quality psychological services. The aim of this review was to report the frequency and nature of adaptations that are reported in studies of CBT for people with Intellectual Disabilities.

Method: This review updated and extended a previous review by Whitehouse (2006), which used a framework of adaptations developed by Hurley (1998). A systematic search was undertaken to identify peer-reviewed papers that reported CBT informed psychological interventions, delivered on an individual basis, to people with an Intellectual Disability, which described at least one adaptation.

Results: The search identified 7568 studies and 23 of these met the inclusion criteria for review. Studies reported 1-7 of the 9 categories of adaptation described in the framework developed by Hurley (1998). The most frequently reported adaptation was that of activities, which refers to the addition of activities to the usual CBT techniques in order to deepen learning. The least reported categories of adaptation were disability/rehabilitation approaches, and transference/countertransference, neither of which were reported in any studies.

Conclusion: The results suggest that the framework of adaptations chosen for this review may need further development in order to increase its sensitivity in identifying and categorising adaptations to CBT. Increased, systematic reporting of adaptations to studies of CBT with people with Intellectual Disabilities is recommended.

Presenter: Sian Thomas
Title: Examining the Feasibility of Teaching Early Reading Skills to Non-Vocal Children with Intellectual Developmental Disabilities using an Online Reading Program

Background: Emerging evidence suggests that Headsprout Early Reading (HER) can effectively teach children with disabilities the skills needed to become a capable reader (Grindle et al. 2013). HER has
previously been evaluated with children with IDD (Tyler et al. 2015) but has never been examined with children with IDD who are non-vocal or have limited language abilities. The present study aimed to examine the feasibility of implementing HER with non-vocal children with IDD within a large special school, while additionally examining whether HER effectively aided the reading abilities of non-vocal children with IDD.

Method: Four children diagnosed with IDD who were non-vocal or had limited language abilities participated. Children’s reading was assessed using the PPVT-4, WRAPS and Initial Sound Fluency subsection of DIBELS at baseline and after nine weeks of intervention.

Results: Children were receiving on average one session per week, which is below the three recommended sessions. Nevertheless, three children showed increases in their reading abilities from baseline to post-test. For the PPVT-4, scores increased significantly for one of the participants (reliable change criterion). This was supported by data obtained from social validity interviews where teachers stated that they believed the children’s reading skills improved following the intervention.

Conclusion: The findings suggest that HER can be adapted for use with non-vocal children with IDD. In a busy school environment optimum implementation may require additional resource or different deployment of support staff. HER shows promise in improving the reading skills of non-vocal children.

Presenter: Lucy Van Walwyk
Title: Investigating communicative and non-communicative gaze behaviours in children with profound and multiple learning disabilities.

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Affiliation: University College London

Background: Gaze-control skills (the ability to fixate on and transfer gaze between stimuli) play a central role in early communication development in typically developing infants, particularly in establishing joint attention with a communication partner. Use of eye gaze may be even more important for children with significant physical disabilities. These basic underlying gaze-control skills have not been studied systematically in children with profound and multiple learning disabilities.

Method: A protocol was developed to measure gaze fixation and gaze shifting in both a non-communicative and a communicative setting. Additional measures were taken to investigate links between gaze control skills and cognitive ability, communication levels, age and physical ability. Seventeen participants aged 3 to 17 completed the protocol on three separate occasions.

Results: The experimental protocol was found to be an effective way of differentiating between different patterns of gaze behaviour with good levels of inter-rater agreement. There was wide variation in both fixation and gaze-shift scores. Gaze-control skills were negatively correlated with chronological age but not associated with developmental age, gross motor function or communication level.

Conclusion: Results suggested that gaze control constitutes a distinct set of skills that vary widely in children with PMLD and cannot be explained only by reference to developmental level or physical abilities. Whilst group-level differences in the different trial conditions were not found, inspection of individual variation showed distinctive profiles of gaze-control skills which affected performance in a communicative setting. Establishing an individual child’s gaze control profile will have implications for providing appropriate support and intervention.
Presenter: Beckie Whelton  
Title: The impact of Transforming Care on the Commissioning of services for people with ID/Autism  
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Affiliation: Tizard Centre, University of Kent, Canterbury  
Co-authors: Agnes Turnpenny (Tizard Centre), Lisa Richardson (Tizard Centre)  

Background: The Scandal of Winterbourne view created outrage, and in response Transforming Care was born. Little is known about the issues that have arisen from the implementation of Transforming Care has had on the process of commissioning. The aim of this research was to explore the impact transforming care has had on commissioning of services for people with intellectual disabilities.  

Method: Semi structured telephone interviews were conducted with twelve commissioners. Interviews were transcribed, and analysed using thematic networks.  

Results: The results from the thematic analysis show that Transforming Care has had both positive and negative effects on commissioning. Positive impacts have been multi-layered, and have been felt at a government level, an organisational level and at an individual level. The negative impact has largely been around resource deficit and deficits have been felt in terms of time, power, cost and community resources.  

Conclusion: Further research is needed to assess the full impact of Transforming Care. Further consideration needs to be given to those with forensic needs, early intervention and prevention. Quality, and a clearer indication of what is meant by “quality” needs to be at the centre of any changes in order for changes to fully improve the lives of the people supported.

Presenter: Tim Williams  
Title: Treatment of Dog Phobia in Nonverbal individuals with Autism and Intellectual Disabilities  
Email: timothy.williams@reading.ac.uk  
Affiliation: Institute of Education, Reading  

Background: People with autism spectrum disorders have a high incidence of phobic disorders. Cynophobia or fear of dogs can be very disabling in that it prevents access to communities, because people with cynophobia may be too afraid to go out. When outside the home, encounters with dogs may provoke a variety of behaviours ranging from freezing to running away without taking account of other dangers. The recommended treatments for cynophobia include cognitive restructuring and systematic desensitisation i.e. CBT. Populations with severe intellectual disability (ID) may not be able to access the cognitive aspects of interventions due to the language requirements.  

Method: We describe adaptations to systematic desensitisation which are being used to treat 15 young people with autism and severe intellectual difficulties aged 8 to 20 years of age. Evaluating treatments depends on the availability of appropriate measures. A systematic literature review found that the measures available are either self-report questionnaires or based on distance from the dog. Self-report is inappropriate for those without language. The distance measure does not address other aspects of the fear such as the size of the dog, whether the dog is on a lead or the sounds that the dog makes. We therefore evaluated treatment in terms of whether the participants achieved the goal of being able to meet a dog unexpectedly without showing strong fear reactions as measured through video recordings of sessions. Materials for treatment included augmented communication methods and toy dogs.  

Results: 22 young people were referred to treatment for dog phobia. Of these 15 have started treatment, and 9 have completed. Session duration was limited to 30 minutes by attention...
difficulties. The aspects of dogs (size, noise, activity level) that provoked fearful responses varied between participants. The number of sessions required to achieve targets varied from 7 to 46.

Conclusion: Systematic desensitisation can be used with people who have little language. Evidence of improvement included being able to groom dogs, approach them and remain calm when dogs encountered unexpectedly. It would be beneficial to use psychophysical measures to assess the fear response more rigorously in a controlled trial. Measures of dog phobia require further development to include validation.

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**WIFI Access**

For full guidance please visit: [https://www.dur.ac.uk/cis/wireless/thecloud/](https://www.dur.ac.uk/cis/wireless/thecloud/)

**TheCloud@Durham**

Visitors and non-academic guests should use 'TheCloud@Durham' to connect to the wireless service when visiting Durham University

'TheCloud' is a free public access wireless service with thousands of hotspots and millions of registered users, it provides simple, fast and reliable wireless Internet access

'TheCloud' service is available for Android, iOS, Windows and Mac devices.

**Get Connected**

To connect to 'TheCloud@Durham' simply follow the steps below:

1. Switch on your smartphone, tablet or other Wi-Fi device and check that Wi-Fi is enabled.
2. Select 'TheCloud@Durham' from the available network list
3. Open your Internet browser - 'TheCloud' landing page below will appear. Click 'Get Online'. If the web page does not appear refresh the page or click here.
4. You will then see the service selection screen. Select 'The Cloud Wi-Fi'.
5. Once this is done you can either login with an existing 'TheCloud' account, or click on the 'Create Account' button to register for a free account.
6. Once you have logged in or registered you will be able to access the Internet using 'TheCloud@Durham'.

You do not need a password to connect
**Useful Information (travel and maps)**

**Conference Venue:**
Room L50  
Department of Psychology  
Durham University Science Site  
Durham DH1 3LE

The **registration desk** for the conference will be located outside the main lecture theatre (L50) where all talks will take place. To find it, please enter the Department of Psychology through the main entrance and turn left. The registration desk will be ahead of you, outside room L50.

**Finding the Department of Psychology:**

The Department of Psychology is located on the top of the Durham University Science Site. The main entrance for the Science Site is located on Stockton Road. If you will be walking from your accommodation to the Department, then please see the map of the Science Site which will guide you from the main entrance of the site to the Department (5-10 minute walk). If you are travelling by bus, then this map also shows the bus stop on Stockton Road. If you are travelling by taxi, the driver will be able to drop you off at the entrance to the Department of Psychology. Further details on public transport are provided below.

**Travel by public transport**

**Arrival by train**

If you are arriving into Durham by train, the **408 bus** service runs from the train station to the University. The bus leaves the station at 8:30 and 9:05, both of which will ensure arrival before 9:30. A full time table is available via the below link:  
[https://www.dur.ac.uk/greenspace/travel/mountjoybusservice/](https://www.dur.ac.uk/greenspace/travel/mountjoybusservice/)

**Local bus services**

The **X12, 56, and 57** run from Durham Bus Station, and stop on Stockton Road opposite the Science Site entrance. The Department of Psychology is a 5-10 minute walk from this bus stop.

Timetables for these routes are available on the Arriva website:  
[https://www.arrivabus.co.uk/north-east/places/durham/](https://www.arrivabus.co.uk/north-east/places/durham/)

To reach the department from the Stockton Road bus stop, cross the road and walk past the security barrier on your left. Stay on this road, and when you reach the top of the hill, follow the road round to your right. Take the next left and the Department of Psychology will be on your right.

**Travel by taxi**

If you plan to use a taxi for local travel,** we recommend pre-booking your taxi, particularly for your departure on the afternoon of Tuesday 19 December,** as this is a busy time for the taxi companies.
Suggested taxi companies

<table>
<thead>
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<th>Firm name</th>
<th>Location</th>
<th>Telephone number</th>
</tr>
</thead>
<tbody>
<tr>
<td>JD’s Taxis</td>
<td>Durham City</td>
<td>0191 378 2555</td>
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<tr>
<td>Stanley Taxis</td>
<td>Durham City</td>
<td>0191 383 2905</td>
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<td>Sherburn Taxis</td>
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<td>0191 372 3388</td>
</tr>
<tr>
<td>Paddy’s Taxis</td>
<td>Durham City</td>
<td>0191 386 6662</td>
</tr>
</tbody>
</table>

Maps

This map indicates where the Science Site is in relation to Durham Train and Bus stations (approx. 20 minute walk).
Science Site Map

- Stockton Rd Bus Stop
- Science Site Main entrance
- Psychology Main entrance
- John Snow Bldg

[Diagram showing the location of various points on a map]
Conference dinner location

Venue: Collingwood College
South Road
Durham DH1 3LT

We will do a walking bus from the Department of Psychology main entrance / reception area to Collingwood College at 7pm if you are unsure where to go.

The college is a short 5-10 minute walk from the Department of Psychology. Please see the map below for directions.

Leave the Department of Psychology through the main entrance, and turn right. Follow the road through a long car park. At the end of the car park, turn left down the footpath. Follow the path until you reach another road, then turn right. Take the next left, through a small car park. Follow the footpath ahead, and at the fork turn left. Head through another small car park, towards the college building. Go down the steps to your right and enter the building via the main entrance.
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