

# Deborah Munroe Noonan Memorial Research Fund Award Recipients

## Deborah Munroe Noonan Memorial Research Fund 2020 Award Recipients

- **Gary Bedell, Ph.D.**

Professor  
*Tufts University*

“Social Participation And Navigation (SPAN): Adaptation, Usability And Implementation For Youth and Transition-age Young Adult Brain Tumor Survivors”

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Youth and transition-age young adult brain tumor survivors have challenges that hinder social participation in community, school and work life. Frequent hospitalizations, illnesses, treatment side-effects, and cognitive and behavioral sequelae can result in social isolation, depression, and limitations in important life roles, relationships and opportunities.

There is limited evidence specific to interventions that promote social participation of youth and transition age young adult brain tumor survivors. Thus, the overall purpose of this project is to adapt an existing app-based coaching intervention, Social Participation And Navigation (SPAN), initially designed for youth with traumatic brain injuries (TBI), to be relevant to the needs of youth and transition-age young adult brain tumors (ages 15-23). SPAN has four main components: 1) Virtual coaching (with college student coaches); 2) Initial coach training and weekly coach supervision; 3) SPAN website with brief tips and topics; 4) Goal planning web application. Promising results were found in a 10-week implementation trial of SPAN with 13 youth with brain injuries (TBI, n=9; brain tumor, n=4) related to goal attainment and on selected measures of social functioning and participation.

The specific aims of this demonstration project are to 1) Adapt the current version of SPAN based on existing and additional stakeholder feedback (n=6); 2) Assess initial feasibility and usability of the adapted SPAN with youth and transition-age young adult brain tumors in a four-week trial (n=5); and 3) Assess the preliminary effects of the adapted SPAN for promoting social participation in community, school and work settings in a larger scale 10-week implementation trial (n=10). The long-term objective is to determine whether the adapted SPAN has potential for widespread use specific to youth and transition-age young adult brain tumor survivors and others with social and executive functioning challenges and to seek additional funding to support this work and larger scale studies.

- **Meg Stone, M.A., M.P.H.**  
IMPACT Executive Director  
*Triangle, Inc.*

“Sexual Assault Resistance for Teens and Young Adults with Intellectual Disabilities”

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The purpose of this demonstration project is to reduce sexual assault victimization among teens with intellectual disabilities. Following a Stage IA treatment development methodology, research activities will refine and evaluate the feasibility, acceptability, and preliminary efficacy of IMPACT:Ability+, a sexual assault resistance program for special education students ages 16-22 that also incorporates curricula on healthy relationships and sexuality education. The most current research shows that programs for women that include self-defense training, healthy relationships and sexuality education are the most effective at reducing rates of sexual assault. Yet, these effective programs have not been accessible to women with intellectual disabilities. They have also not been tested in mixed gender settings, which is important for disability populations as men with intellectual disabilities are also at high risk for victimization. For these reasons, expanding our evidence-based IMPACT: Ability safety education program to include healthy relationships and sexuality education – and developing corresponding research procedures that can be utilized to evaluate the program in this population – are critical next steps for reducing sexual assault victimization among teens with intellectual disabilities. This project will be implemented and facilitated by IMPACT, a program of Triangle, Inc. and Dr. Lindsay Orchowski of Brown University and Rhode Island Hospital; both leaders in the field of sexual assault prevention.

This research will be conducted in Boston Public Schools (BPS) with students who are educated in substantially separate special education classrooms due to functional limitations in self-care, receptive and expressive language, learning, self-direction, and capacity for independent living. These are students classified by the district as having been diagnosed with: Autism Spectrum Disorder, Emotional Impairment, Intellectual Impairment (mild, moderate, or severe), Developmental Delay, and specific learning disability. Triangle has a longstanding relationship with BPS. Over 500 students per year receive Triangle’s evidence-based IMPACT:Ability curriculum.

- **Julie White, M.S.**

Director, Continuing Medical Education  
*Boston University*

“Boosting Capacity to Screen and Care for Underserved Children with Autism Spectrum Disorders Through a Community-based, Interprofessional Training Program for Pediatric Care Providers”

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The long-term goal of this proposed project is to improve the developmental outcomes of underserved Boston-area children with autism spectrum disorders (ASD). Toward this goal, we will advance these specific aims:

- 1) train an interprofessional group of Boston area community-based pediatric providers in screening, making appropriate referrals to specialists for diagnostic certainty, and providing ongoing care for children at risk and with of ASD.
- 2) evaluate effectiveness of the ECHO model in building capacity for appropriate, timely ASD diagnoses, referrals and services in an urban, safety net patient population.

Our target population are children in the Boston University School of Medicine/Boston Medical Center (BUSM/BMC) community health centers system with ASD who struggle with social communication and behaviors that impact their development. The lifelong impact of ASD, particularly if not treated early, can be pervasive throughout all realms of development and have significant impact on lifelong capacity of both the child and the family. Our objectives are to develop, implement, and evaluate the ECHO model of provider training by establishing a BUSM/BMC ECHO Autism Community of Practice among the BMC Division of Developmental and Behavioral Pediatrics (DBP) and our affiliated Boston-area Community Health Centers (CHCs). Based on the national model created by the University of New Mexico, ECHO projects are designed to increase clinical workforce capacity and reduce disparities through the use of videoconferencing, mentoring in best practices, case-based learning, and on-going monitoring of outcomes. We will evaluate changes in provider skills and referral patterns as they relate to these aims, using historical group data and non-intervention patients as a comparison. At the end of the two-year project period and based on evaluation results and available resources, we will refine and extend this project to additional CHCs.

**Deborah Munroe Noonan Memorial Research Fund  
2021 Award Recipients**

• **Kristin Long, Ph.D.**

Assistant Professor  
*Boston University*

“Development Of A Family-Based Transition Planning Program For Culturally-Diverse Families Of Youth On The Autism Spectrum”

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The transition to adulthood is a critical developmental period that sets up trajectories of adult functioning. For youth on the autism spectrum, this transition has been described as “falling off a cliff” due to the lack of available adult services and families feeling overwhelmed and unsupported. Although the transition to adulthood is universally challenging for families, it is also a time of increasing race/ethnicity-based service use disparities. Existing research suggests that autism-related transition planning and adult outcomes could be improved with attention to modifiable family-based treatment targets including parent self-efficacy, discussions about the future, and parent expectations for adult outcomes. However, no existing family-based programs focus on skills to navigate transition, are broad enough to include families of youth with a wide range of autism presentations, and consider cultural influences on transition processes or post-transition goals. Together, these gaps may limit existing programs’ usability in community settings that serve youth with a broad range of service needs. The proposed project takes a community-based approach to developing a transition planning program that accounts for flexibility across autism presentation and comorbidities, cultural values, family preferences, and readiness to engage in transition planning. Specific aims are to (1) develop the Families FORWARD (Focusing on Relationships, Well-being, and Responsibility ahead) program with culturally-diverse families and service providers and (2) conduct proof-of-concept testing with a stratified sample of families who identify as Black, Latinx, Asian, and non-Latinx white. The proposed program is novel in its proactive approach to considering diversity from the earliest stages of intervention development. The individualized nature of the program is expected to increase its ultimate acceptability and usability in community settings. This is the first step in a line of research to improve transition planning and decrease service use disparities across the transition to adulthood for youth on the autism spectrum.

- **Aviva Must, Ph.D.**

Dean, Public Health & Professional Degree Programs  
*Tufts University*

“GamerFit mHealth/Telehealth Lifestyle Intervention for Youth with Autism Spectrum Disorder”

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Health disparities, particularly chronic disease risk, faced by youth with autism spectrum disorder (ASD) are rooted in a variety of early and persistent unhealthy behavioral patterns, including inadequate physical activity (PA), excessive screen time, poor diet and disrupted sleep. Extensive research documents associations between increased PA and improvements to mood and executive functioning, such as self-regulation, with evidence that sleep and diet interventions also improve cognition and function in this population. The proposed study, GamerFit, pilots a 12-week randomized controlled intervention study with 46 youth with ASD, ages 10-14 years. GamerFit remotely delivers PA and telehealth coaching through a fully integrated, HIPAA-compliant mHealth application. The 12-week exergaming curriculum provided by the app delivers 3 exergaming sessions weekly, during which participants choose from a suite of developmentally appropriate exergames. The app interface provides youth with: 1) a weekly exergaming challenge menu, 2) PA and sleep tracking via an automated FitBit sync, 3) push notifications to access a coaching video library, 4) motivational text messaging, and 5) text reminders of upcoming intervention tasks. We propose to 1) examine the feasibility and acceptability of the 12-wk GamerFit intervention; 2) preliminarily test the hypothesis that GamerFit participation will increase total PA in the intervention group (n=23) compared to a waitlist control group (n=23) receiving a commercially available Fitbit application; and 3) explore changes in screen time, sleep hygiene, diet quality, mood, and perceived social support. If shown to be feasible, acceptable, and effective, GamerFit can provide a fully remote, inexpensive intervention to improve key health behaviors with low barriers to engagement. Improvement of these behaviors has been shown to bring about positive improvements in self-regulation, mood, and cognition. Additionally, telehealth coaching and family-based interventions can improve perceived social support. Long-term, these effects could extend beyond reducing chronic disease risk to better academic and social success.

- **Jaimie Timmons, M.S.W.**

Research Associate III and Program Manager  
*University of Massachusetts Boston*

“Pathways to Daily Life and Employment in Healthcare for Youth with Down Syndrome”

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The Institute for Community Inclusion (ICI) at the University of Massachusetts Boston, in collaboration with the Down Syndrome Program at Boston Children’s Hospital, and in consultation with the Institute for Human Development at the University of Missouri-Kansas City (UMKC-IHD), will develop, pilot, and evaluate a Pathways Demonstration for at least 40 parents of youth with Down syndrome ages 10–14. The ten-month intervention will support parents to prepare for a positive transition from high school to daily life and integrated employment. A transition planning portfolio based on content from UMKC’s Charting the Life Course will provide tools and resources, weekly electronic outreach via Facebook as a platform for family networking, connections to companion resources, and a standardized clinician protocol for engaging parents in a guided conversation about post-school life during patient encounters. Through provision of brief prompts or nudges (Dechausay & Anzelone, 2016), content will be chunked apart in micro-learning opportunities (Buchem & Hamelmann, 2010). Project goals include increasing the frequency with which hospital clinicians address transition preparation, strengthening the capacity of the Down Syndrome Program to deliver transition content, and improving parents’ visions for the future of their young adult. Pre- and post-test surveys administered to parents will measure their short-term and long-term expectations; their attitudes and beliefs about community and workplace inclusion; and their ability to identify and implement incremental actions that support the achievement of goals. Post intervention key informant interviews with parents, youth, and clinicians will focus on participants’ experiences, facilitators and barriers to engagement, and recommendations for refining the intervention in preparation for scaling up.

**Deborah Munroe Noonan Memorial Research Fund  
2022 Award Recipients**

- **Eileen Crehan, Ph.D.**

Assistant Professor  
*Tufts University*

“IEP Coding to Inform Equity Advocacy Efforts”

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This project aims to better understand how language spoken at home and other sociodemographic factors (e.g., race, gender, SES) impact IEP services for autistic children. By collecting IEPs and questionnaires from parents of children ages 3-10 living in Massachusetts, we will be able to characterize how these sociodemographic factors impact the types and amounts of services included in IEPs, the quality of the written goals, parental satisfaction with services, and qualitative experiences around the development and maintenance of an IEP. Study materials will be available in four languages (English, Spanish, Portuguese, Cantonese). The IEPs will be coded for content and quality of goals using a pre-established coding approach. Quantitative analysis will identify educational service gaps and qualitative responses both from the content of the IEP and from the parent questionnaires will provide important context and examples of supports that were useful or challenging for parents. Results will inform the development and dissemination of advocacy materials in all four languages. This work will be conducted in collaboration with our Community Advisory Board to help ensure that findings and advocacy materials are meeting the true needs of families in Massachusetts navigating the special education system.

- **Yarden Fraiman, M.D., M.P.H.**

Instructor

*Beth Israel Deaconess Medical Center / Harvard Medical School*

“Identifying Neighborhood Drivers of Racial and Ethnic Disparities Along the Early Intervention (EI) Care Cascade for Very Preterm Infants in Massachusetts”

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Very preterm infants (VPT) have an increased risk of neurodevelopmental, language, learning, and functional impairments. In Massachusetts, all VPTs are eligible to receive Early Intervention (EI) services, via the federally mandated Individuals with Disability Education Act after successful navigation of the “EI Care Cascade” (EI-CC). EI improves cognitive, behavioral, functional, and social outcomes for VPT, but racial and ethnic disparities exist leading to an inequitable burden of chronic disabilities.

Race is a social construct and disparities are due to structural, institutional, interpersonal, and internalized racism. Identifying structural racism embedded in environments can be used to identify targets for population-level interventions. Neighborhoods are modifiable environmental contexts that shape pediatric health and are a source of structural racism due to historical de jure and present-day de facto segregation and divestment.

In this proposal, we will characterize the neighborhood-based resources that support successful navigation of the EI-CC in order to identify population-level, neighborhood-based targets for novel interventions to increase equitable access to EI.

Study Design: Secondary multilevel analysis of the PELL dataset of the Massachusetts Department of Public Health

Aims:

- 1) Characterize racial and ethnic disparities along the EI-CC in MA.
- 2) Quantify the role of geographical residence, specifically EI Catchment Area and neighborhood, on racial and ethnic disparities in the EI-CC.
- 3) Identify the modifiable neighborhood-based opportunities and EI catchment area characteristics that promote EI-CC equity.

The results of the study will inform interventions to reduce the inequitable burden of chronic conditions and disabilities among children in Massachusetts.

This innovative proposal uses novel multilevel approaches nesting individuals within neighborhoods and EI catchment areas, to elucidate the role of neighborhoods in sustaining or dismantling inequity. Additionally, it focuses on neighborhood-based resources, not vulnerabilities, that can be integrated into neighborhoods through population-based interventions and thereby improve neighborhoods and equity for all children in Massachusetts.



- **Jocelyn Kuhn, Ph.D.**

Assistant Professor of Pediatrics  
*Boston Medical Center*

“Testing the Efficacy of an Adapted Family-Centered Autism Transition Intervention in a Safety Net Hospital Setting”

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Autistic adults, especially those from low-resource communities, experience poorer quality of life, physical and mental health, economic self-sufficiency, independent living, and educational outcomes than their neurotypical counterparts. The transition to adulthood between the ages of 14 and 23 represents a critical time to disrupt these inequities and set autistic youth on a trajectory for improved outcomes. Our research team previously developed and tested an autism transition-to-adulthood intervention called Transitioning Together, which is based on an evidence-based multi-family group psychoeducation model and has demonstrated efficacy in improving outcomes for both youth (e.g., social and behavioral functioning, employment) and their parents/guardians (e.g., well-being, coping skills). Our widescale implementation study of this intervention across three states found that lower-resource service settings—where disproportionately more racial and ethnic minority families are served—struggled to adopt this intervention. Thus, without further adaptation, dissemination of the intervention in its original form risks unintentionally widening existing racial, ethnic, and socioeconomic disparities among autistic people. Such disparities are known to pervade quality of life, health and well-being, employment, and education across the life course. To address these prior study findings, we recently adapted Transitioning Together to improve its feasibility, accessibility, and cultural responsiveness in low-resource service settings. Examples of adaptations included consolidating program content into fewer, longer group sessions, and culturally adapting content for Spanish-speaking families. Families who participated in our small pilot test of this adapted version of the Transitioning Together program reported high satisfaction with the program and strong social validity. The effectiveness of the adapted version has not yet been tested. In the proposed project, we seek to test the effectiveness of this adapted version of Transitioning Together within the Boston Medical Center network, where predominantly low-income communities across Greater Boston, including families who represent a rich diversity of racial and ethnic backgrounds, are served.

- **Andre Maharaj, Ph.D.**

Graduate Program Director of Applied Behavior Analysis; Senior Research Associate  
*University of Massachusetts Boston*

“Stronger Together - The Benefits of Inclusion for Treating Children with Externalizing Behavior Problems”

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The purpose of the project is to develop and assess an inclusive summer intervention program for children with externalizing behavior problems (EBPs) from low-income minority families in Boston. The goal is to scaffold positive developmental trajectories and ameliorate later functional limitations in major life activities. The intervention includes behavior modification components, a social-emotional and self-regulation curriculum, an academic curriculum, and a parent training program. It will be implemented in an inclusive recreational setting with typically developing peers to foster social competence and facilitate generalization of peer relationship skills back to the typical classroom.

The specific aims are to: (1) Integrate the evidence-based Summer Treatment Program (STP; Pelham et al., 2010) into Camp Shriver, an evidence-based inclusive recreational summer camp for children with and without disabilities (Siperstein et al., 2022), (2) Assess the feasibility of implementing the melded intervention in Year 1 and use findings to inform modifications for replication in Year 2, (3) Evaluate the effectiveness of the adapted intervention, and (4) Provide initial data to be used in applications for funding subsequent evaluation studies and scaling up of the intervention.

The Demonstration Project will utilize a mixed design with replication. The STP will be modified to fit into the schedule and inclusive setting of Camp Shriver. Staff will be recruited and trained using the modified program. Families of children with and without EBPs exiting the first grade will be recruited from the Boston Public School system and pediatric psychiatric practices each year, for two years. The first cohort will participate in the adapted intervention in Year 1, and structural, process and outcome measures will be obtained. Using the information from Year 1 (e.g., feasibility, parent satisfaction, child outcome measures), the intervention will be modified and fine-tuned for replication and evaluation with a second cohort in Year 2.

- **Pam Nourse, M.B.A.**

Executive Director

*Federation for Children with Special Needs*

“Capacity Building in Greater Boston’s Vietnamese Community”

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Research shows that effective family engagement improves health and educational outcomes for children and youth. In this project FCSN will increase capacity for family engagement among families and professionals through a community asset mapping process and creation of relevant resources and trainings. The focus of the project is to address disparities experienced by the families with children with special health care needs in three targeted Vietnamese communities in Greater Boston. Priorities for family engagement capacity building will be set with the community through a community asset mapping process. The materials, resources, and training will be co-created with the community to address these priorities. For example, the community may find that greater knowledge of how to access resources at local community health centers is a priority, and FCSN will correspondingly develop the relevant materials and training. Culturally relevant resources will be tailored for both Vietnamese families and for the education and health care providers who work with the community. Project staff will include a Vietnamese Outreach Specialist; four cultural brokers who are members of the targeted communities will work in stipend positions as well. Outcomes will be measured through multiple surveys and trainings and resources will be adjusted throughout the project to better meet the needs of the Vietnamese community, based on evaluative responses.

**Deborah Munroe Noonan Memorial Research Fund  
2023 Award Recipients**

- **Abbey Eisenhower, Ph.D.**

Assistant Professor

*University Of Massachusetts Foundation*

“Smooth Sailing In Early Childhood: A Relationship-Based Program For Improving Child-Educator Relationships And Minimizing Exclusion For Autistic And Neurodivergent Children”

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In the proposed research, we aim to develop an autism-focused teacher training program for early childhood educators (ECEs). With the diagnosed prevalence of autism increasing, one in every 36 children now has a diagnosis of autism. Unfortunately, early childhood settings are not consistently inclusive of autistic and neurodivergent children, with one out of six autistic children expelled or dismissed from preschool or child-care. ECEs can serve as catalysts in ensuring positive, inclusive early school experiences for these children. Better training for ECEs can help them form strong relationships with autistic and neurodivergent children, an important element for children’s social and emotional development in the early childhood education context.

Our team’s recently developed autism-focused professional development (PD) program for teachers at the early elementary level, the Smooth Sailing PD program, has been shown to improve the school experiences of early elementary-age autistic children and their relationships with their teachers. The four-week, virtually-delivered program, which includes online learning modules, personalized coaching, and in vivo practice activities, was designed with teacher input to ensure feasibility and relevance. It is critical to adapt this proven PD program to the early childhood context so vital for the development of social and emotional abilities. With Noonan support, we will develop an early childhood version of this program adapted to the needs of ECEs across a range of early childhood education settings (center-based child-care, family-based care, Head Start, public pre-K, private preschools). Adaptation will occur in Year 1 alongside ongoing consultation with autistic adults, parents, and ECEs, followed by a small pilot trial. In Year 2, a randomized controlled trial (RCT) with 30 ECEs will determine the program’s preliminary efficacy in improving ECEs’ autism knowledge, child-educator relationship quality, and children’s social-emotional adjustment and expulsion risk. Promising results will position the program for broader dissemination and testing.

- **Ovsanna Leyfer, Ph.D.**

Research Assistant Professor  
*Boston University*

“Increasing Access, Decreasing Anxiety: A Pilot Randomized Trial of a One Week Telehealth-Delivered Treatment Program for Adolescents”

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Anxiety disorders are one of the most common psychiatric conditions in youth, and they are associated with high levels of impairment. Cognitive-behavioral therapy (CBT) has been found efficacious for their treatment. However, fewer than 20% of adolescents receive services for anxiety-related problems due to lack of availability and access to services, difficulties with scheduling multiple appointments, transportation to appointments, and stigma. There is a critical need to reduce these barriers and increase access to treatment. The goal of this proposal is to conduct a randomized control pilot trial to evaluate the telehealth versus clinic-based delivery of the 6 session intensive protocol for anxiety disorders in adolescents aged 12-17, developed by Dr. Leyfer. Twenty-four adolescents aged 12-17 with principal diagnoses of any DSM-V anxiety disorder will be randomized to receive either clinic-based or telehealth intensive CBT. The study will assess the efficacy of an internet-delivered intensive CBT as an intervention for anxiety disorders in adolescents, evaluate the effects of the therapy at a 3-month follow-up, and evaluate the feasibility, acceptability and appropriateness of the intervention as well as patient satisfaction and engagement, and family perceptions of barriers to the sustainability of the intervention. We will also examine potential transdiagnostic mechanisms of change, including anxiety sensitivity, maladaptive thinking, distress intolerance, experiential avoidance, and intolerance of uncertainty. The assessments will be conducted by independent evaluators at pre- and post-treatment as well as at 3 months following the treatment. This project is consistent with the mission of the Noonan Fund to "improve the quality of life for children and adolescents with disabilities" in Greater Boston and to advance health equity by dramatically expanding access to quality treatment. This intervention holds the possibility of a transformative and accessible solution for treating anxiety disorders in youth before they lead to even more intractable forms of psychopathology.

**Deborah Munroe Noonan Memorial Research Fund  
2024 Award Recipients**

• **Keri Discepolo, D.D.S., M.P.H.**

Chair Department of Pediatric Dentistry  
*Boston University*

“A Pilot Project to Facilitate Dental Care and Reduce Barriers For Children And Adolescents With Disabilities”

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This program aims to improve the quality of life for children and adolescents with disabilities by facilitating access to dental care, often referred to as Children and Youth with Special Healthcare Needs (CHSCN). Frequently these patients experience challenges accessing dental health care. Disabled patients from the greater Boston area are often of low socioeconomic status and encounter multiple negative social determinants of health, including limited or no access to dental insurance and trained dental providers. These young people go without basic dental care, which can lead to untreated disease, pain, and infection. Our project is a novel program to facilitate access to dental care, reduce social determinant’s barriers (e.g., transportation; access to reduced fee dental services), and create a dental home that provides a sensitive, culturally informed environment where children and adolescents with disabilities can obtain preventive and restorative dental care.

Aim 1: Video Telehealth. Patients have complex medical, dental, behavioral and social histories. This telehealth pre-visit allows the dental professional to gather informative data regarding the needs of the patient and identify barriers. The dental professional will be more familiar with the patient prior to the in person visit which will facilitate the in person visit. During the pre-visit telehealth video and conversations, the clinician will:

- Collect medical information, reducing the need for multiple appointments of data gathering and identifying solutions to facilitate and appropriately provide care.
- Assess the patients’ cognitive capability; estimate their potential behavioral tolerance of the dental visit and plan the dental appointment goals.
- Determine patients’ social history and arrange pre-dental appointment services.

Aim 2: Training of dental professionals. We aim to disseminate the program and provide training to dentists (students, residents and professionals) with respect to behavioral medical, and clinical approaches for working with children and adolescents with special needs.

• **Jeff Gentry, M.A.**

Senior Director

*Jewish Vocational Service, Inc.*

“Vocational education, Workforce development, Special Education, Transition Services, Parent Engagement, Adolescents with disabilities, Health Equity”

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JVS’s Work Early, Expect Success pilot focuses on increasing long-term employment rates for transition-age children with disabilities (ages 14-16) across the disability spectrum—in particular, BIPOC children and children living below the federal poverty threshold—in underserved communities. JVS’s pilot will address the need to improve employment rates among adolescent-aged children with disabilities by making quality vocational education and training opportunities accessible to both youth with disabilities who are at the beginning of their high school journeys and their parents/support team members. Work Early, Expect Success seeks to operationalize the findings of a 2015 analysis of the National Longitudinal Transition Survey, which found the two strongest indicators of long-term employment for people with disabilities are paid employment before exiting high school and high parental expectations of work.

JVS will provide youth with disabilities and their parents/support team members opportunities to engage in a wide range of employment engagement activities, including introductions to employment pathways in growth industries (e.g., work exploration sessions with local employers); parent/support team member discussions and sessions to increase expectations of employment and provide information about vocational training options; and paid employment/vocational training opportunities. Our pilot is unique in the landscape of current school vocational training programs, which primarily focus on older high school youth, because the program will focus on serving 14-16-year-old youth. Since employment is an upstream determinant of health, improving employment outcomes among high school youth with disabilities will help address health disparities and promote health equity. To achieve this, the pilot will engage 36 youth with disabilities and 27 parents/support team members over two years in career coaching, work exploration sessions, and paid employment/vocational training opportunities; 65% of participants who complete the work exploration sessions will secure paid employment or enter a vocational training program within one year of program completion.

- **Winston Kennedy Ph.D.**

Assistant Professor of Physical Therapy  
*Northeastern University*

“Perceived Multilevel Determinants of Physical Activity Engagement in Black Autistic Children and their Caregivers”

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Children with intersecting marginalized identities experience profound disparities in health due to systemic barriers, spanning multiple levels of society. Social ecological frameworks allow for investigation of multi-level barriers. Black autistic children (BAC) are particularly vulnerable as the prevalence of autism spectrum disorder among Black children increases in the US, while access to necessary supports remain stagnant. Physical activity (PA) provides a myriad of benefits, however, BAC’s access to PA appears to be limited. Importantly, PA behaviors established in early childhood are likely to continue into adulthood. Determinants of PA engagement have been examined in autistic children and typically developing Black children, but no study has investigated determinants of PA in BAC and their caregivers specifically. Long-term objectives of the project include: 1) Determine the barriers to and the facilitators of PA engagement for BAC and their caregivers; 2) Develop and implement a multi-dimensional tool based on the experiences of BAC and their caregivers, to examine the prevalence and factors associated with PA engagement.

To achieve the objectives three aims have been developed: 1) Understand the perceived barriers to and facilitators of PA participation in BAC (5-12) as informed by the social ecological model; 2) Understand the perceived barriers to and facilitators of PA participation in caregivers of BAC (5-12) as informed by the social ecological model; and 3) Develop and implement a multi-dimensional survey to examine the prevalence and factors with PA engagement. Participants will be recruited from the city of Boston and surrounding areas (e.g., Somerville). To analyze the mixed-method approach of the project, inductive and deductive qualitative analysis will be used to identify barriers and facilitators for aims 1 and 2. For aim 3, quantitative methods will be used to establish psychometric properties, and assess prevalence and factors associated with PA engagement of BAC.



• **Ed-Dee Williams M.S.W., Ph.D.**

Assistant Professor

*Boston College*

“A Pilot Project to Facilitate Dental Care and Reduce Barriers for Children And Adolescents With Disabilities”

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The mental health experiences of Black autistic youth (Black-AY) have been severely understudied, especially as it relates to their experiences with depression and depressive symptoms. While Black youth broadly are at increased risk of experiencing depression given their heightened likelihood of experiencing the many social inequities associated with race in our society, Black-AY also have to deal with the inequities and difficulties associated with being autistic as well. Given the unique intersectional identity of being Black and autistic, it can be deduced that there is a compounding effect that leads to a significant increase in their risk of experiencing depression and depressive symptoms. Recent studies have found that Black-AY were significantly more likely to report depressive symptoms than their White autistic counterparts and often reported difficulties with important social communication skills needed to effectively express their mental health needs.

These findings led to the development of a race-specific pilot simulation-based mobile mental health application designed to support Black-AY in communicating about depression and effectively seeking mental health support, currently titled “Asking for Help” (A4H). The proposed study uses a user-centered mixed-methods design combining convergent parallel mixed-methods methodology with a user-centered approach to 1) assess the acceptability, usability, and feasibility of the A4H pilot as an innovative intervention designed to support and improve positive mental health help-seeking behaviors through improved social communication and mental health literacy for Black-AY and, 2) gain an in-depth understanding of the way Black-AY in the Greater Boston area experience depression and seek mental health support. Our findings will expand scholarly knowledge on the depression experiences and mental health help-seeking behaviors of Black-AY as well as provide preliminary data that will be used to improve A4H to better support the mental health needs of Black autistic youth and prepare it for an eventual effectiveness evaluation.