



Magic Always Happens  
Through Our Interdisciplinary Approach To Autism

Actions Not Words...  
Love Autism

18 - 23 November 2016  
Coral Beach Hotel & Resort  
Paphos - Cyprus





**1st Annual Cyprus International Conference on Autism  
Treatment and Research:  
Magic Always Happens Through Our Interdisciplinary  
“360” Approach to Autism**

**18 - 23 November, 2016  
Coral Beach Hotel & Resort  
Paphos - Cyprus**

**Organized by**  
Magic Always Happens Inc.

**Supported by**  
Holy Archdiocese of Cyprus  
Magic Always Happens Cyprus  
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**Under the Direct Aegis of**  
H.E. The President of the Republic of Cyprus, Mr. Nicos Anastasiades

**Published by:** Magic Always Happens Inc.

**Synopsis of International Scientific Contributions by Luminary experts:  
360 Approach to Autism**



**Actions Not Words  
Love Autism**

**Editor:** Neophytos Papanephytous, PhD  
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**Issued:** November 2016

## **Conference Chairperson:**

Neophytos (Neo) Papaneophytou, PhD

## **Conference Scientific Committee:**

T. Berry Brazelton, MD

Ed Tronick, PhD

Alexandra Harrison, MD

Serena Wieder, PhD

Niko Kargas, PhD

Barbara Demeneix, PhD

Magda Mostafa, PhD

Neophytos L. Papaneophytou, PhD

## **Organizing Committee:**

Magic Always Happens Inc.

[magicalwayshappens.org](http://magicalwayshappens.org)

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Dear Friends and Colleagues,

Welcome to our 1<sup>st</sup> Annual Cyprus International Conference on Autism Treatment and Research entitled *Magic Always Happens through our interdisciplinary approach to autism!* This conference is under the auspices of His Excellency the Minister of Health of the Republic of Cyprus, Dr. George Pamborides and under the direct aegis of His Excellency the President of the Republic of Cyprus, Mr. Nicos Anastasiades.

Our conference has a true “360 degrees” approach as it brings together experts and luminaries from transdisciplinary scientific research, as well as from applied fields including academicians, psychologists, physicians, geneticists, speech therapists, civil engineers, architects, economists, law, technology, and other subject matter experts. Together, we shall all discuss best practices and suggest ideal ways of working with, treating, educating, building for, and sustaining quality centers for autism excellence. Actions need to follow words if we are to render effective and efficient solutions. Thus, allowing all people on the spectrum to enjoy a better quality of life and a brighter future.

Our conference integrates plenary sessions, workgroups, and poster sessions. Following the conclusion of the conference works an expert think tank will offer specific feedback and consultation. We are honored to have Ed Tronick, PhD, Distinguished University Professor, UMASS Boston, and Research Associate, Harvard Medical School, as Chair of our scientific committee.

Magic Always Happens, Inc., an IRS tax exempt non-profit corporation, wishes to provide you with the most efficient tools to enjoy your stay and participation in this historic conference. We welcome Strategic Alliances, International Collaboration, Intercontinental Research and Publication.

Magic Always Happens invites International Collaboration at all levels. We are particularly interested in the application of best practices, continuous research and the advance of applied solutions in order to help people of all ages on the spectrum (particularly as it regards early intervention and the 18+ population).

We invite partners for Intercontinental Contributions including scientific publications based on comparative research and application.

As the Conference Chairman and Scientific Committee Coordinator I welcome you, and look forward to be meeting with you all during our conference!



Neophytos (Neo) Papaneophytou, PhD, LMHC, LPC, NCC, DCC  
Conference Chairperson  
Scientific Committee Coordinator  
[neophd@hushmail.com](mailto:neophd@hushmail.com)  
[autism360cy.com](http://autism360cy.com)

## **Acknowledgements/Thanks To:**

The Conference Organizing Committee, Magic Always Happens, is thankful to the following companies/organizations for their kind support and direct sponsorship:

Holy Archbishopric of Cyprus  
The Ministry of Health of the Republic of Cyprus  
The Ministry of Education and Culture of the Republic of Cyprus  
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ML Smart Events  
Duo Whitemouse – Jon & Nadia

We remain thankful to Team Magic, our team of athletes, running the classic Athens Marathon on an annual basis for autism awareness and support of all people on the autism spectrum.

# Conference Programme

## Friday, 18 November, 2016

**7:00 PM**

**Welcome & Inaugural Address:** Conference Chairperson, Chair, Scientific Committee, H.E. The Minister of Health, H.E. The President of the Republic of Cyprus, His Eminence, Head of Church of Cyprus

**Reception will follow**

**8:00 PM**

**Gala Dinner** (Blessing: Head, Church of Cyprus)

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## Saturday, 19 November, 2016

**8:30 AM - 9:15 AM**

Ed Tronick, PhD. *Magic Happens Based on Best Practices: Doing the Impossible with autism in Cyprus, and beyond*

**9:15 AM – 9:30 AM**

**Q & A**

**9:30 AM – 10:15 AM**

Barbara Demeneix, PhD. *Environmental Chemicals and the Increased Incidence of Autism Spectrum Disorders*

**10:15 AM – 10:30 AM**

**Q & A**

**10:30 AM – 10:45 AM**

**Coffee Break**

**10:45 AM – 11:30 AM**

Gerard Costa, PhD. *Reconceptualizing Training as “Professional Formation” in the Field of Autism*

**11:30 AM – 11:45 AM**

**Q & A**

**11:45 AM – 12:30 PM**

Tanya Paparella, PhD. *Symbolic Play: A Targeted Intervention Approach for Young Children with ASD*

**12:30 – 12:45 PM**

**Q & A**

**1:00 PM – 2:00 PM**

**Lunch**

**\* 1:00 PM – 2:00 PM**

**Working Lunch\* in GREEK** Antigoni Apostolopoulou, MA. *Enhancing Resilience in Parents of Children with Autism: An Experiential Workshop. Ενισχύοντας την Ανθεκτικότητα γονέων παιδιών με Αυτισμό: Ένα Βιωματικό Εργαστήριο - Στην Ελληνική Γλώσσα*

**2:00 PM – 3:00 PM**

**Integrated Panel Discussion** (Drs. Tronick, Demeneix, Costa, Paparella, and Mrs. Apostolopoulou)

**3:00 PM – 3:15 PM**

**Coffee Break**

**Workshops & Seminars Series A** (Participants may mix and match as to the seminars they choose to attend, however, pre-registration is required)

**3:15 PM – 4:00 PM**

Tanya Paparella, PhD. *Symbolic Play Part II: Implementing Targeted Play Intervention Interactive workshop with enhanced Q & A*

**4:00 PM – 4:45 PM**

Rachel Loftin, PhD. *Psychological Assessment and Treatment of Adults with ASD*

**4:45 PM – 5:30 PM**

Neophytos Papanephytous, PhD, and Magda Mostafa, PhD/Via Skype. *Cyprus International Center for Autism Treatment & Research: Design and Purpose Based on Best Practices and The Autism ASPECTSS™ Index!*

**5:30 PM 6:30 PM**

**Workshop & Seminar Integrated Panel Discussion** (Drs., Loftin, Papanephytous and Mostafa/via Skype)

**Workshops & Seminars Series B** (Participants may mix and match as to the seminars they choose to attend, however, pre-registration is required)

**3:15 PM – 4:00 PM**

Theoharis Theoharides, MS, PhD, MD, FAAAAI. *Neurotensin-Induced Mast Cell and Microglia Stimulation and Brain Inflammation Offers Effective Treatment Target in Autism*

**4:00 PM – 4:45 PM**

Stephanos Ioannou, PhD. *Thermal Imaging in Affective Neuroscience: Advancements in Social Psychophysiology*

**4:45 PM – 5:30 PM**

Antigoni Apostolopoulou, MA. *Raising a child with autism: A cinematherapy based workshop*

**5:30 PM 6:30 PM**

**Workshop & Seminar Integrated Panel Discussion** (Drs. Theoharides, Ioannou, and Mrs. Apostolopoulou)

**7:00 PM**

**Dinner** – Own arrangements

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# Sunday, 20 November, 2016

**8:30 AM – 9:15 AM**

Serena Wieder, PhD. *Reimagining Development: The DIR Model Makes a Difference!*

**9:15 AM – 9:30 AM**

**Q & A**

**9:30 AM – 10:15 AM**

Maha K. Helali, MA. *The ADVANCE Program for Adolescents & Adults with Autism Spectrum Disorder in Egypt*

**10:15 AM – 10:30 AM**

**Q & A**

**10:30 AM – 10:45 AM**

**Coffee Break**

**10:45 AM – 11:30 AM**

Ivanka Pejic, MA. *Early Intervention for Children with Autistic Spectrum Disorders Through a System of Mobile Services in the Local Community*

**11:30 AM – 11:45 AM**

**Q & A**

**11:45 AM – 12:30 PM**

Neophytos Papanephytous, PhD, Ed Tronick, PhD, Alexandra Harrison, MD, Nikos Kargas, PhD, Jerri Lynn Hogg, PhD. *Establishing the Cyprus International Center for Autism Treatment and Research: Making Magic Happen via Actions not Words! Love autism, take action: No child will be alone! (Inception/ Design/ Best practices, Implementation, Sustainability, and Research)*

**12:30 PM – 1:00 PM**

**Q & A**

**1:00 PM – 2:00 PM**

**Lunch** Local families with children/ adults on the AS are invited to join us for a “Sunday festive lunch and celebration.” Meet & greet our luminary experts and mingle! Actions not words! *Love autism, take action: No child will be alone!*

**2:00 PM – 3:00 PM**

**Integrated Panel Discussion** (Drs. Wieder, Papanephytous, Tronick, Harrison, Kargas, Hogg, Mrs. Helali, and Mrs. Pejic)

**3:00 PM – 3:15 PM**

**Coffee Break**

**Workshops & Seminars Series A** (Participants may mix and match as to the seminars they choose to attend, however, pre-registration is required)

**3:15 PM – 4:00 PM**

Bhisma Chakrabarti, PhD. *The Role of Imitation and Reward in Understanding Social Cognition and Autism*

**4:00 – 4:45 PM**

Dan Merritts, MBA. *The Role of Technology and Education in the World of Autism*

**4:45 – 5:30 PM**

Steve Keisman, MA, MSc. *Technology that Identifies Strengths and Helps Autistic Teens and Adults Pursue and Lead Productive Lives*

**5:30 PM - 6:30 PM**

**Workshop & Seminar Integrated Panel Discussion** (Drs. Chakrabarti, Mr. Merritt, and Mr. Keisman)

**Workshops & Seminars Series B** (Participants may mix and match as to the seminars they choose to attend, however, pre-registration is required)

**3:15 PM – 4:00 PM**

Natalia Neophytou, MSc (Med/Biokinetics). *The Efficacy of a 12 Week Exercise Intervention in 11-16 Year Old Adolescents with ASD in South Africa*

**4:00 PM – 4:45 PM**

Abelardo Apollo I. David, MA. *Title: Transition and Work Training Programs: Preparing Youth with Autism for Life / Project Therapy, Education and Assimilation of Children with Handicap (TEACH): A Community-based Rehabilitation Program for Children in Poor Communities*

**4:45 PM – 5:30 PM**

Adam Feinstein. *Autism: My Twin Voyages of Discovery*

**5:30 PM – 6:30 PM**

**Workshop & Seminar Integrated Panel Discussion** (Mrs. Neophytou, and Messrs. Abelardo Apollo, and Feinstein)

**7:00 PM Dinner** – Own arrangements

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# Monday, 21 November, 2016

**8:30 AM – 9:15 AM**

Colwyn Trevarthen, PhD. *Early Signs of Autism, with Indicators for Care and Support of Development in Relationships*

**9:15 AM – 9:30 AM**

**Q & A**

**9:30 AM – 10:15 AM**

Afaf El-Ansary, PhD. *Suggested Preventive and Treatment Tools based on Multiple Environmental Risk Factors of Autism*

**10:15 AM – 10:30 AM**

**Q & A**

**10:30 AM – 10:45 AM**

**Coffee Break**

**10:45 AM – 11:30 AM**

Alexander B. Poletaev, MD, PhD. *Epigenetic children autism: Throughout pregnancy and beyond. The high incidence of autism is a vis-a-vis reflection of the frequency of developmental disturbances (maternal-related)*

**11:30 AM – 11:45 AM**

**Q & A**

**11:45 AM – 12:30 PM**

Laurie Sperry, PhD, BCBA-D, MSc Forensic Psychology/ Criminology. *The Gaming Paradox: Violent Video Games, Video Modeling and ASD*

**12:30 PM – 12:45 PM**

**Q & A**

**12:45 PM – 1:00 PM**

Peruse Research Poster Session

**1:00 PM – 2:00 PM**

**Lunch** – Own arrangements

**2:00 PM – 3:00 PM**

**Integrated Panel Discussion** (Drs. Trevarthen, El-Ansary, Poletaev, Sperry)

**3:00 PM – 3:15 PM**

**Coffee Break**

**Workshops & Seminars Series A** (Participants may mix and match as to the seminars they choose to attend, however, pre-registration is required)

**3:15 PM – 4:00 PM**

Majia Holmer Nadesan, PhD. *Autistic Ontologies and the Open Genome*

**4:00 PM – 4:45 PM**

Gerard Costa, PhD. *The Origins of Empathy and Peace (The “triune” brain; critical early systems of care and love in ASD)*

**4:45 PM – 5:30 PM**

Suzi Tortora, Ed.D, BC-DMT, CMA, LCAT, LMHC. *Shall we Dance? Using Creative Arts Therapies to Promote Play, Social-Relatedness and Self-Expression in ASD*

**5:30 PM – 6:30 PM**

**Workshop & Seminar Integrated Panel Discussion** (Drs. Holmer-Nadesan, Costa, & Tortora)

**Workshops & Seminars Series B** (Participants may mix and match as to the seminars they choose to attend, however, pre-registration is required)

**3:15 PM – 4:00 PM**

Stephen Shore, Ed.D. *Promoting Social Inclusion of People with Autism in Education, and Navigating Sensory Issues through the lifespan*

**4:00 PM – 4:45 PM**

Samira Al-Saad, PhD. *30 Years of Experience with Autism Introduced “REACH” Philosophy for Autism in Kuwait and Arab Gulf States*

**4:45 PM – 5:30 PM**

Paul Shattock. *Ensuring Good Services and Good Health for People with Autism: Initiatives and Developments From Around the World*

**5:30 PM – 6:30 PM**

**Workshop & Seminar Integrated Panel Discussion** (Drs. Shore, Al-Saad, & Mr. Shattock)

**7:00 PM**

**Dinner** – Own arrangements

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# Tuesday, 22 November, 2016

**8:30 AM – 9:15 AM**

Alexandra Murray Harrison, MD. *“Raisins Can’t Talk”*: *Psychoanalytic Treatment in the Preschool Classroom*

**9:15 AM – 9:30 AM**

**Q & A**

**9:30 AM – 10:15 AM**

Ricardo Canal Bedia, PhD. *ASD Screening in Primary Care: 10 years of the M-CHAT Program in Spain*

**10:15 AM – 10:30 AM**

**Q & A**

**10:30 AM – 10:45 AM**

**Coffee Break**

**10:45 AM – 11:30 AM**

Hsu-Min Chiang, PhD. *Using Thematically Structured Teaching to Improve Social Integration and Communication Skills of Children with ASD*

**11:30 AM – 11:45 AM**

**Q & A**

**11:45 AM – 12:30 PM**

Yueh-Hsien Lin, PhD. *Education for Children with Autism Spectrum Disorder in Taiwan*

**12:30 PM – 12:45 PM**

**Q & A**

**12:45 PM – 1:00 PM**

Peruse Research Poster Session

**1:00 PM – 2:00 PM**

**Lunch** – Own arrangements

**2:00 PM – 2:45 PM**

Yael Bruck Binya, OTR. *“Mind the Gap” – Bridging the Gap Between Sensory and Emotional Regulation*

**2:45 PM – 3:00 PM**

**Q & A**

**3:00 PM – 4:00 PM**

**Integrated Panel Discussion** (Drs. Harrison, Canal Bedia, Chiang, Lin, and Mrs. Bruck Binya)

**4:00 PM – 4:15 PM**

**Coffee Break**

**Workshops & Seminars Series A** (Participants may mix and match as to the seminars they choose to attend, however, pre-registration is required)

**4:15 PM – 5:00 PM**

Melissa Olive, PhD. *Using ABA to Address Challenging Behaviors and to Teach Functional Life Skills such as Toileting and Feeding*

**5:00 PM – 5:45 PM**

Athanasios Maras, PhD. *State of the Art Treatment of Sleep Disorders in Children with Autism Spectrum Disorder*

**5:45 PM – 6:45 PM**

**Workshop & Seminar Integrated Panel Discussion** (Drs. Olive, & Maras)

**Workshops & Seminars Series B** (Participants may mix and match as to the seminars they choose to attend, however, pre-registration is required)

**4:15 PM – 5:00 PM**

Niko Kargas, PhD. *The Role of Sensory Sensitivities in the Expression of Autistic Symptomatology*

**5:00 PM – 5:45 PM**

Jerri Lynn Hogg, PhD. *Media Psychology, Technology and Autism: Engagement, Learning, Therapy, and Entertainment*

**5:45 – 6:45 PM**

**Workshop and Seminar Integrated Panel Discussion** (Drs. Kargas, and Hogg)

**7:00 PM – 7:45 PM**

**Conference Closing: Concluding Remarks & Future Directions** (All speakers)

**8:00 PM**

**Dinner** – Own arrangements

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# Wednesday, 23 November, 2016

## **BY INVITATION ONLY**

**9:00 AM – 10:30 AM**

### ***Think Tank Part I***

***Local authorities and autism associations participating (by invitation ONLY)***

Local authorities included in round-table discussion (by invitation) on: *Assisting the local government and formal/ local autism associations in their quest for improved quality of services based on best practices*

**10:30 AM – 10:45 AM**

**Coffee Break**

**10:45 AM – 12:15 PM**

### ***Think Tank Part II***

***Luminary speakers and researchers ONLY***

Session focused on research and international cooperation: *Application of current best practices, training, future endeavors, intercontinental research and publications. The way forward: Our 2017 2<sup>nd</sup> Annual Cyprus International Conference on Autism Treatment and Research*

**12:30 PM – 2:00 PM**

**Formal Working Luncheon**

**2:00 PM – 2:30 PM**

**Concluding Remarks & Future Direction for Think Tank:**

*Opportunities for Intercontinental Collaboration, Research, Training, and Publication. Magic Always Happens leading the “360 approach” / multidisciplinary approach on autism: 2017 and beyond!*

## **Optional**

**2:30 PM** Informal Excursion & Guided Tour.

**6:00 PM** Informal Reception & Dinner





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**Magic Happens Based on Best Practices: Doing the Impossible with autism in Cyprus, and beyond**

Ed Tronick, PhD

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Barbara Demeneix PhD

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Gerard Costa PhD

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Tanya Paparella PhD

**Enhancing Resilience in Parents of Children Diagnosed with ASD: An Experiential Workshop**

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**The Role of Technology and Education in the World of Autism**

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**b) Project Therapy, Education and Assimilation of Children with Handicap (TEACH):**

**A Community-based Rehabilitation Program for Children in Poor Communities**

Abelardo Apollo I. David MA

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Adam Feinstein

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Alexander Poletaev MD, PhD

**The Gaming Paradox: Violent Video Games, Video Modeling and ASD**

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**Autistic Ontologies and the Open Genome**

Majia Holmer Nadesan PhD

**The Origins of Empathy and Peace (The “triune” brain; critical early systems of care and  
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Gerard Costa PhD

**Shall we Dance? Using Creative Arts Therapies to Promote Play, Social-Relatedness and Self-Expression in ASD**

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**Promoting Social Inclusion of People with Autism in Education, and Navigating Sensory Issues through the lifespan**

Stephen M. Shore Ed. D.

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Samira Al-Saad PhD

**Ensuring Good Services and Good Health for People with Autism: Initiatives and Developments From Around the World**

Paul Shattock

**Raisins Can’t Talk: Psychoanalytic Treatment in the Preschool Classroom**

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Niko Kargas PhD

**Media Psychology and Technology and Autism: Engagement, Learning, Therapy, and Entertainment**

Jerri Lynn Hogg PhD

# KEYNOTE SPEAKERS' DETAILS

## **Ed Tronick, PhD**

University Distinguished Professor  
University of Massachusetts Boston  
Research Associate  
Harvard Medical School

## **Barbara Demeneix, PhD**

Professor and Head of Department  
Natural History Museum, Paris-France

## **Gerard Costa, PhD**

DIR-C, IMH-E- IV- Clinical Mentor  
Director, Center for Autism and Early Childhood Mental Health  
Professor, Department of Early Childhood, Elementary and Literacy Education  
College of Education and Human Services  
Principal Investigator, New Jersey Autism Center of Excellence Coordinating Center  
Montclair State University  
Montclair NJ-USA

## **Tanya Paparella, PhD**

Associate Professor  
Director, Early Childhood Partial Program  
Department of Psychiatry and Biobehavioral Sciences  
UCLA  
Los Angeles, CA-USA

## **Apostolopoulou Antigoni, MA**

Counseling Psychologist  
Greece

## **Rachel L. Loftin, PhD**

Assistant Professor  
Clinical Director of the Autism Assessment, Research & Treatment Services (AARTS) Center  
Rush University Medical Center  
Chicago, IL-USA

## **Neophytos Papaneophytou, PhD, LMHC, LPC, NCC, DCC**

Psychologist  
Associate (adjunct) Professor of Psychology/CUNY  
President and Founder "Magic Always Happens"  
Author and Researcher

## **Magda Mostafa, PhD**

Associate Professor of Design  
Associate Chair of the Department of Architecture  
The American University in Cairo  
UNESCO-UIA Architectural Education Commission & Validation Council Region V  
Representative

**Theoharis C. Theoharides, MS, PhD, MD, FAAAAI**

Professor of Pharmacology and Internal Medicine  
Director, Molecular Immunopharmacology and Drug Discovery  
Department of Integrative Physiology and Pathobiology  
Tufts University School of Medicine  
Boston, MA – USA

**Stephanos Ioannou, PhD**

Assistant Professor of Physiology  
Department of Physiological Sciences  
College of Medicine - Al Faisal University<sup>[SEP]</sup>  
Kingdom of Saudi Arabia

**Serena Wieder, PhD**

Clinical Director, Profectum Foundation  
Co-Developer of the DIR Model with the late Stanley Greenspan

**Maha Helali, MA**

Chairperson the Egyptian Advance Society for Persons with Autism & Other Disabilities (ADVANCE)  
Managing Partner, Learning Resource Center (LRC)  
Board-member the National Council for Disability Affairs, (NCDA)  
Member Women with Disability Committee National Council for Women (NCW)  
Founding-Member of the Egyptian Foundation for Inclusive Education (IEF)  
President Inclusion International Middle East & North Africa (II-MENA)  
Secretary Arab Network for Autism (ANA)  
Ashoka Fellow 2007

**Ivanka Pejić, MA**

Centre for Autism Zagreb, subsidiary Rijeka (Special educational institutions for education of children with autism)  
Association for the care of autistic persons in Rijeka

**Bhismadev Chakrabarti, PhD**

Professor of Neuroscience & Mental Health  
Research Director, Centre for Autism  
Centre for Integrative Neuroscience & Neurodynamics  
School of Psychology and Clinical Language Sciences  
University of Reading, Reading – UK

**Dan Merritts, MBA & Dennis Robinson, PhD, SVEDU**

Houlton Institute

**Steven M. Keisman, MA, MSc.**

Vice President, Education and Transition and Neurodiversity Employment Specialist Identifier,  
Mendham  
New Jersey-United States

**Natalia Neophytou, [MSc (Med)][[BHSc (Hons) Biokinetics]**

Lecturer & Registered Biokineticist  
Centre for Exercise Science & Sports Medicine  
Johannesburg-South Africa

**Abelardo Apollo I. David, Jr., MOccThy, OTRP**

Founder & Executive Director, Independent Living Learning Centre - Mandaluyong City, Philippines  
Founder & President-Rehabilitation & Empowerment of Adults & Children with Handicap Foundation Inc., Mandaluyong City, Philippines  
Founder and Executive Director, Academia Progresiva de Manila, Mandaluyong City, Philippines  
Asst. Professor, University of Sto. Tomas, Manila City, Philippines

**Adam Feinstein**

British Author – Translator – Journalist - Autism Researcher and Hispanist and Founder of an International Autism Magazine

**Colwyn Trevarthen, PhD**

Professor (Emeritus) of Child Psychology and Psychobiology  
School of Philosophy, Psychology and Language Sciences  
The University of Edinburgh  
Scotland – UK

**Afaf El-Ansary, PhD**

Central Laboratory, Center for female Scientific and Medical Colleges, King Saud University, Riyadh, Saudi Arabia  
Autism Research and Treatment Center, Riyadh, Saudi Arabia

**Alexander Poletaev, MD, PhD**

Medical Research Center *Immunculus*, Moscow  
Head of the Research Dept.  
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**Keynote Lectures  
Plenary Sessions**

**and**

**Interactive Workshops**



## **Magic Happens Based on Best Practices: Doing the Impossible with autism in Cyprus, and beyond**

Ed Tronick PhD

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The Cyprus Center for Autism Treatment will be unique. Not only because of its location, but because of its integrated/360 multidisciplinary conceptualization of how to approach and overcome spectrum disorders. I direct a research and fellowship program in Infant-Parent Mental Health at the University of Massachusetts and a key element is the interdisciplinary nature of the program - epigenetics to emotions to culture and parenting - and the framing of the program in by a neurotypical developmental perspective. I believe that a similar developmental perspective is embedded in the integrated/360 degree framework guiding the creation of the Center. I will illustrate my thinking about neurotypical development and stress and suggest how the framework may add to our understanding of the spectrum of spectrum disorders. There is magic in the neurotypical model that will make the impossible possible.

## **Environmental Chemicals and the Increased Incidence of Autism Spectrum Disorder**

Barbara Demeneix PhD (Jean Baptiste Fini, Bilal B. Mughal, Sébastien Le Mével, Michelle Leemans, Petra Spirhanzlova)

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Chemical production has increased 300 fold over the last 40 years. Many of the chemicals produced have demonstrated or potential endocrine disrupting actions, with a large proportion of them specifically affecting thyroid hormone production or action. In turn, it has been known for decades that normal postnatal levels of thyroid hormone are essential for optimal brain development. Recently it has been established that maternal hypothyroidism increases risk for both Autism Spectrum Disorder (ASD) and schizophrenia. Even mild maternal hypothyroidism or hyperthyroidism during early pregnancy are associated with IQ loss and modified brain structure in offspring (1). Other key recent insights include the tight local control of tissue thyroid hormone levels by deiodinases and membrane thyroid hormone transporters (THTs). These important proteins are expressed in placenta and foetus.

In parallel to this increased understanding of local controls over thyroid hormone availability (independent of circulating levels) we are witnessing an unprecedented increase in ASD incidence, not infrequently correlated with IQ loss. Although, changes in diagnosis and awareness contribute to this increase, many authors consider that environmental factors are implicated. Four arguments support this hypothesis. First, numerous chemicals are found routinely in human amniotic fluid including, pesticides, plasticizers (such as phthalates, BPA), nitrates, perchlorate, antimicrobials (such as Triclosan), flame-retardants, surfactants and mercury. Second, many of these chemical categories are demonstrated thyroid hormone disruptors. Third, prenatal exposure to many of these chemicals is significantly associated with IQ loss and/or increased ASD risk. Fourth, as mentioned, chemical production has risen exponentially in the last few decades, continually increasing exposure.

I shall present our data on how we exploit the evolutionary conservation of thyroid signalling to use transgenic *Xenopus* as a screening tool for environmental chemicals affecting thyroid hormone signalling and brain development. These results suggest that interference with thyroid hormone orchestration of human brain development is plausible and could be implicated in the observed increase in neurodevelopmental disease as well as in significant IQ loss at a population level, engendering enormous socio-economic costs (2).

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# **Reconceptualizing Training as 'Professional Formation' in the Field of Autism**

Gerard Costa PhD

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The teaching and helping professions continually evolve in their discernment of effective models of pedagogy and epistemology, by attempting to answer two principal questions: “How do we best teach about our discipline?”, and “How do learners come to know what they know.” This paper questions common methods of professional development which frequently rely on “training” that focuses on transmission of core knowledge, viewed as fundamental to the discipline and on the development of skills, viewed as derivatives of that core knowledge. This approach fails to adequately recognize and apply the science of interpersonal processes and the relational context of education. This is particularly evident in the field of Autism Spectrum Disorder, where predominant educational protocols rely on discrete knowledge and acquisitions of techniques for managing behaviors. The concept of "Formation" will be introduced and explained as a model that embodies notions of "integration", "personal unfolding", layered knowledge of "self", and three interrelated “ways” of development: knowing, doing and being. Using three theoretical frameworks: polyvagal theory, interpersonal neurobiology, and self-regulation, this model of “Formation” can serve as guidance for all who seek to support the growth of a responsive, multidisciplinary field as our understanding of autism unfolds.

Keywords: training, professional development, formation, interpersonal, autism

## **Symbolic Play: A Targeted Intervention Approach for Young Children with ASD**

**Tanya Paparella PhD**

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Young children on the autism spectrum are characterized by significant deficits in symbolic play, a critical area of social development that should emerge in the first two years. Symbolic play involves the representational use of objects – pretending one object represents another as when a block represents a car, or imagining that dolls have personal attributes and abilities. Because these skills are highly representational and abstract they present particular challenges for intervention. This presentation will provide an overview and efficacy data on the importance of play in improving crucial developmental outcomes, particularly language. It will cover assessment, how to determine individualized treatment objectives and implementation of individualized goals using a naturalistic developmental behavioral intervention approach. Participants will learn a tested, targeted and systematic approach to teaching functional and symbolic play to young children on the autism spectrum.

# **Enhancing Resilience in Parents of Children Diagnosed with ASD: An Experiential Workshop**

Antigoni Apostolopoulou MA

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Parent education is defined as the process through which, parents and caregivers of children diagnosed with ASD are offered the knowledge, the insights and the skills needed for the promotion of their children's development and competences. Given that one of the main goals of parent education is the enhancement of parents' skills in promoting children's play and social interaction, the question of their own resilience arises; namely, their ability to withstand stress and adapt to adversity. With the collaboration of parents as the ultimate experts in their own and their children's needs, this workshop aims at promoting parents' ability to cope successfully with, and proposing a new perspective towards, the everyday challenges posed by their children, with the ultimate goal of enhancing their resilience in life and role as parents.

Keys words: Parent education, resilience, children, ASD

## **Symbolic Play Part II: Implementing Targeted Play Intervention**

**Tanya Paparella PhD**

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This interactive workshop offers a detailed clinical explanation of how to effectively deliver an individualized, targeted play intervention to young children with ASD or toddlers showing high risk symptoms for ASD. It is designed for clinical practitioners and parents of young children. A step-by-step explanation of each developmental play level used to determine an initial instructional objective for each child will be provided. Examples of each play level and appropriate toys will be described. It will also cover specific naturalistic developmental behavioral intervention (NDBI) teaching strategies. Video exemplars of teaching strategies will be used. Participants will learn how to immediately apply a tested, systematic and easy to follow play intervention in clinical practice and everyday life.



## **Psychological Assessment and Treatment of Adults with ASD**

Rachel Lynn Loftin PhD

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Adults with autism spectrum disorder (ASD) often require specialized clinical care. There are a number of challenges facing young adults with ASD who are transitioning to adulthood. The transition out of the educational system and into adult services, the onset of psychiatric comorbidities, and increasing demands on adaptive functioning are only three of the many hurdles this population may face. During transition to adulthood, families of young people with ASD often seek support from medical professionals. However, many clinicians are not knowledgeable about ASD-specific needs, and practitioners with ASD-specific training are rare. To further complicate the situation, those clinicians who do specialize in ASD tend to focus on childhood and may not have expertise in identifying and treating adults. This practical workshop will provide an overview of the most common issues adults with ASD face, guidelines on assessment, and recommendations for treatment. Attendees will better understand how to identify and treat problems such as psychiatric comorbidities, vocational options, independent living, sexuality, and other adult-specific issues.

**Cyprus International Center for Autism Treatment & Research: Design and Purpose Based on Best Practices and The Autism ASPECTSS™ INDEX!**  
Neophytos Papanephytous PhD and Magda Mostafa PhD

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Since 2014, Dr. Papanephytous proposed the establishment of the Cyprus International Center for Autism Treatment (diagnosis, education, therapy) and Research. This international center will serve a population originating from a multitude of neighboring countries, hosting school-age children through to age 18+ (adults on the autism spectrum.) The focus of this specialized center will be on early detection, intervention, and diagnosis, therapy, education, vocational training, accommodation and integration (both children and adults who are on the autism spectrum. Enhanced practical therapeutic intervention based solely on best practices will be introduced, applied, and maintained. The center will be staffed by a variety of multilingual experts, stemming from various cultural backgrounds and disciplines, with varied levels of expertise.

Design, engineering, and other structural features of the center's facilities will be based on research and best practices. Dr. Mostafa, an award-winning architect and a luminary expert in her field of expertise, will apply modelling based on her unique ASPECTSS™ Index. This center will boast autism friendly spaces that are ergonomically designed, maximizing productivity and efficiency. The center will offer a superb quality of life for both clients and staff occupying the premises. This model center will offer *par excellence* services to resident clients and local clients alike. Magic Always Happens seeks to replicate this model in additional European countries, Africa, the USA, and other regions interested in collaborating with us. We remain open to constructive feedback and International Collaboration.

# Neurotensin-Induced Mast Cell and Microglia Stimulation and Brain Inflammation Offers Effective Treatment Target in Autism

Theoharis Theoharides MS, PhD, MD, FAAAAI

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Autism Spectrum Disorder (ASD) is characterized by deficits in communication and social interactions, as well as stereotypic behaviors affecting about 1 in 45 children. Most ASD cases have no distinct pathogenesis and regress at about 3 years, often after some environmental exposure, immune reaction, infection, stress or trauma. ASD may involve brain inflammation partly reflected by increased microglia activation and density; however the trigger(s) are unknown. Epidemiologic studies have shown significant correlation between allergic symptoms and ASD implying activation of mast cells (MC), unique perivascular immune cells present in all tissues. MC are activated by the peptide neurotensin (NT), found in the brain and the gut, as well as by drugs, foods, heavy metals, organophosphates, bacteria, mold and viruses. Stimulated MC release vasoactive and inflammatory molecules that increase permeability of the gut-blood and blood-brain barriers, permitting brain entry of environmental toxins causing focal inflammation of the brain especially in hypothalamus and amygdala, where MC are most abundant, areas that regulate homeostasis and behavior. We have shown that NT is increased in serum of children with ASD and that small amounts of NT can stimulate the brain “defenders” microglia through activation of the mammalian target of rapamycin (mTOR), a signaling complex, which is dysregulated in many children with ASD. We also showed that the natural antioxidant and anti-inflammatory flavonoid luteolin inhibits activation of both MC and microglia stimulated by NT. Two open-label clinical studies using an oral liposomal luteolin formulation (NeuroProtek<sup>®</sup>) reported significant improvement in communication in children with ASD. Luteolin has also been formulated together with the antibacterial berberine (BrainGain<sup>®</sup>) especially for use in PANDAS children. Moreover, the novel related flavonoid tetramethoxyluteolin inhibits both MC and microglia, and has been formulated in the skin lotion (GentleDerm<sup>®</sup>). Patents US 8,268,365 (09/18/12); US 9,050,275 (06/09/15); US 9,176,146 (11/03/15) awarded to TCT.

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# **Thermal Imaging in Affective Neuroscience: Advancements in Social Psychophysiology**

Stephanos Ioannou PhD

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Peripheral physiology monitoring can provide insights to self-regulation in an affective social context. Part of peripheral physiology is also thermal regulations mediated by internal physiological states such as heart rate, perspiration as well as vascular constriction or vasodilation and in certain occasions muscular activity. Variability in autonomic function within a social context is readily depicted on the face and according to the emotion there is an adjacent thermal mark. Modern technological advancement allow us to harness these signal enriching our understanding about human nature in a naturalistic experimental context. Thermal imaging provides a novel avenue for the study of social psychophysiology as the face, in addition to its communicative value, provides easy access to contact-free affective physiological monitoring. In addition peripheral physiology provides a feedback loop between the body and the brain where bodily responses facilitate learning and adapt social behavior. This novel technique represents a very advantageous opportunity for the developmental field as a whole, since children and adults can be left free to exhibit their spontaneous behavior when adjusting to the experimental setting. The present talk focuses on this new approach applied to the study of affective social neuroscience.

## **Raising a child with autism: A cinematherapy-based workshop**

Antigoni Apostolopoulou MA

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For parents raising a child with autism, coping is a stressful process characterized by mixed emotions of guilt, fear, anxiety, and anger, along with hope, resilience, and love. The film “After Thomas” is a realistic portrayal of the emotional, societal, and relational challenges of autism, both for the family and the child. This workshop will use techniques informed by cinematherapy, which allows people to develop new perspectives of looking at core issues in their lives and discuss their thoughts and feelings about the challenges they ‘re faced with. Combining input from participating parents with the main themes emerging from the film, the workshop aims at providing a platform for opening up the discussion about the lived experience of parents with children diagnosed with ASD, their needs, their hopes, their strengths and weaknesses, and an opportunity for support, personal growth and shared knowledge.

Key-words: Cinematherapy, parenthood, stress, children, ASD.

## **Reimagining Development: The DIR Model Makes a Difference!**

Serena Weider PhD

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The DIR Model revolutionized the paradigm for integrated developmental assessment and intervention in theory and practice for both typical development and autism spectrum disorders. This presentation will provide an overview of functional emotional developmental capacities (the D), the underlying biologically based individual differences in sensory and motor processing and regulation (the I), and the influence of parent-child interaction and relationships in a cultural and environmental context (the R). Videos will illustrate the “active ingredients” integrating intellect and emotion, the importance of tailoring interventions to individual differences vs. “one size fits all”, and how emotional development and infant mental health principles are used to advance progress. Research on parent mediated interventions for autism using Floortime, the central intervention in the DIR Model, will also be reviewed. Last, the new Profectum Parent Toolbox, a free resource for parents, will be introduced.

**The ADVANCE Program for Adolescents & Adults with Autism Spectrum Disorder in Egypt**  
**Maha K. Helali MA**

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The lecturer will present the experience of the Advance Society in Egypt in designing their Transition into Adulthood (TIA) and Adults Experimental Work Placement (EWP) Programs that offer vocational assessments, career awareness and exploration, pre-employment skills training and work experiences. In addition, both programs continue to develop students' domestic and life skills whilst providing the needed support to facilitate independence for each student based on their individual needs.

# **Early Intervention for children with Autistic Spectrum Disorders Through a System of Mobile Services in the Local Community**

Ivancka Pejic MA

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Legislation regulations from the field of preschool education in the Republic of Croatia mentions a possibility of organizing a systematic early intervention program from the sixth month of age, but in practice such an intervention is not carried out systematically but through projects and programs co-financed by the ministry.

The program of early intervention for children suspected and/or diagnosed with autism from detecting difficulties from autism spectrum up to 4 years of age is carried out since 2008. in the local community.

The program has made it possible for over 300 families with children with autism to engage in program activities and individual patronage work with a child, carried out by experts such as an university specialist of early intervention in educational rehabilitation, 7 special education needs teachers, a psychologist, a speech therapist and a music therapist.

While working with children and educating parents we use the knowledge and experience of visual layouts (TEACCH program), alternative assisted communication (AAC technology), sensory-integrative pedagogy, dance and movement therapy.

For the siblings of our little users an art workshop is organized, and the parents enhance their parental competences through support groups under the guidance of psychologists.

The social worker informs the parents about the rights arising from the social and health care law.

The association and the center work closely with other local institutions which through their programs provide various forms of support for children and their parents in order to systematically organize an early intervention program in the local community.

The Alliance of Autism Associations in Croatia (SUZAH) and the association chairman Mrs. Penko advocate to implement the early intervention system on a national level. Mrs. Penko is a member of the Expert Commission of the project "National standards for early detection and diagnosis of autism spectrum disorders" of the Republic of Croatia.

Organizing the system of early intervention for children and families, and with the possibility of education and qualification for appropriate occupations, the dependence of the child and family on the social and pension rights and the institutions that provide them.



**Establishing the Cyprus International Center for Autism Treatment and Research: Making Magic Happen via Actions not Words! Love autism, take action: No child will be alone!**

Neophytos Papaneophytou PhD, Ed Tronick PhD, Alexandra Harrison MD, Nikos Kargas PhD, Jerri Lynn Hogg PhD

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Since 2014, Dr. Papaneophytou proposed the establishment of the Cyprus International Center for Autism Treatment (diagnosis, education, therapy) and Research. This international Center for Excellence will serve a population originating from a multitude of neighboring countries, hosting school-age children through to age 18+ (adults on the autism spectrum.) The focus of this specialized center will be on early detection, diagnosis, and intervention, therapy, education, vocational training, accommodation and integration of both children and adults who are on the autism spectrum. Enhanced practical therapeutic intervention based on best practices will be introduced, applied, and maintained. The center will be staffed with a variety of multilingual experts, stemming from various cultural backgrounds and disciplines, with varied levels of expertise. One of the main aims of the center will be to create a hub, where researchers around the world will be able to share ideas and generate research with high practical relevance. This function in turn, will improve the overall quality of life of people on the autism spectrum internationally.

As a *for profit* organization this center of excellence will be able to sustain its own operations, while offering scholarship and training supported by grants. Trainees will benefit from expert teaching, a professionally designed environment, and hands on experience based on research and best practices. This model center will offer *par excellence* services to resident clients and local clients alike. Magic Always Happens seeks to replicate this model in additional European countries, Africa, the USA, and other regions interested in collaborating with us. Actions not words, is our motto in our pursuit of autism excellence. *Love autism, take action: No child will be alone!*

# The Role of Imitation and Reward in Understanding Social Cognition and Autism

## Bhisma Chakrabarti PhD

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Humans are social beings. Most of us find looking at, hearing, and interacting with other humans to be a rewarding experience. One theoretical account of autism is based on the observation that individuals with ASD often do not find social stimuli and interactions to be rewarding. This account suggests that social behavioural difficulties in ASD are driven by a deficit in reward processing from social stimuli. In our research, we study how reward influences a fundamental aspect of human social behaviour, i.e. spontaneous facial mimicry. Spontaneous facial mimicry is an integral part of everyday social interactions, e.g. we smile automatically when we see others smile at us. Individuals with ASD commonly show reduced spontaneous facial mimicry.

These two processes of mimicry and reward are intricately linked from early on in human development. Mothers commonly imitate their children, and the children imitate back. This cycle of reciprocal imitation helps build social bonds, in children as well as in adults. As adults, we tend to prefer individuals who imitate us more, and, imitate those who we prefer more. We study these links between reward and mimicry using a range of techniques that measure physiological response (using facial EMG), brain activity (using fMRI and EEG), eye movements (using eye-tracking), and overt behaviour (Sims et al., 2012; Haffey et al., 2013; Sims et al., 2014; Neufeld et al., 2015; Trilla Gros et al., 2015; Panasiti et al., 2015; Neufeld et al., 2016). The emerging picture from our research suggests that autism represent a weakening of the links between reward and mimicry. Rather than there being a core problem in mimicking others, or responding to social rewards, autistic symptoms might be more representative of an atypical connection between neural systems involved in reward processing and those underlying mimicry.

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## **The role of technology and education in the world of autism**

Dan Merritts MBA - Dennis Robinson, PhD

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Technology is transforming various aspects of autism - ranging from support services to biomedical research. Given the importance of supports for those on the spectrum a thorough understanding and approach towards autism must include adequate considerations regarding the power of technology. This paper explores the impact and the possibilities that technology engenders in relation to autism.

Keywords: technology, autism spectrum disorder, transformation

## **Technology that Identifies Strengths and Helps Autistic Teens and Adults Pursue and Lead Productive Lives**

Steven Keisman MA, MSc

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In the United States alone, it is projected by Autism Speaks, that between 500,000 and 1,000,000 children with autism will reach 21 years of age in the next decade. This milestone is significant because it is by that age that compulsory, government-supported special education and services, which every school is mandated by law to provide, abruptly stops.

For a variety of reasons, nearly 90% of all people with autism are estimated to be unemployed or underemployed; yet, ironically, they may well possess the exact skills and abilities many employers value. Nearly all will live with their parents or in a supported living arrangement, if they have the funds, when they leave school. Because of the lack of meaningful employment available to them, most of these young adults will lead an extremely limited existence with a gloomy future.

Unfortunately, schools are incapable of designing an accurate, individualized, roadmap reinforced by specific goals and objectives for these young people. Without this there can be no meaningful training or transition into the community. These individuals transition from adolescence to adulthood without the skills and behaviors they need to be valuable and productive citizens. The impact on families, the economy and society is also great. *The Autism Society* calculates that two-thirds of the nearly \$300 billion annual cost for treatment of autism in the U.S. goes to adult services. This figure will surely explode without radical change.

Today, cutting-edge technology developed by startups, such as U.S.-based *Identifor*, is being applied and leveraged to address this global problem, in an attempt to transform “lost lives” into fulfilling ones and to meet this problem head-on.

# The Efficacy of a 12 Week Exercise Intervention in 11-16 Year Old Adolescents with ASD in South Africa

Natalia Neophytou MSc

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**BACKGROUND:** Autism Spectrum Disorder (ASD) is a neurodevelopmental disorder, which often results in an array of motor impairments. These motor impairments often lead to reduced performance in activities of daily living as well as in societal tasks which require specific motor abilities and skills.

**OBJECTIVES:** To determine the efficacy of a 12 week exercise intervention by assessing the change in posture, body composition and physical fitness, pre- and post-exercise intervention in adolescents with autism aged 11 to 16 years.

**METHODS:** A randomised control trial was conducted to assess 27 adolescents with ASD (mental age  $5.6 \pm 1.8$  years). All participants were tested pre- and post-intervention. The intervention group (n=16) participated in the exercise intervention bi-weekly for 12 weeks, while the control group (n=11) received their usual standard care. Posture was assessed using a posture grid, and scores out of 10 were given per body area, where good posture = 10, average posture = 5 and poor posture = 0. Body composition, and physical fitness were assessed using the Brockport Physical Fitness Test (BPFT).

**RESULTS:** Overall compliance to the intervention was 88.78%. There was a significant increase in the overall posture scores ( $p=0.0004$ ), specifically in the ankle area ( $p=0.0183$ ) in the intervention group. There was a significant reduction in BMI ( $p=0.0130$ ) post intervention. The intervention group showed significant decreases in resting systolic blood pressure ( $p=0.0069$ ), and systolic blood pressure taken one minute following exercise ( $p=0.0007$ ). A significant decrease in resting Heart rate ( $p=0.0046$ ), as well as in heart rate taken one minute following exercise ( $p=0.0096$ ) was also seen. Handgrip strength significantly increased in the non-dominant hand only ( $p=0.0289$ ). The intervention group improved significantly in the amount of curl-ups they were able to perform following the intervention ( $p=0.0094$ ).

**CONCLUSION:** Exercise may be a viable therapeutic intervention in the ASD population.

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**a) Transition and Work Training Programs: Preparing Youth with Autism for Life**  
**b) Project Therapy, Education and Assimilation of Children with Handicap (TEACH): A Community-based Rehabilitation Program for Children in Poor Communities**

David Apelardo Apollo MA

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This presentation highlights two programs which aim to foster social inclusion among youth with autism and other developmental conditions. The first part presents a transition and work training program which emphasizes the need for a practical curriculum that proactively prepares children with autism for independent living. Realizing that majority of children with autism and other developmental conditions in developing countries come from poor families, the second part of this presentation discusses a community-based rehabilitation and education program which cost-effectively streamlines services while empowering family members to take an active role in helping differently-abled children in the community.

Part 1

Gainful employment for persons with special needs used to be a far-fetched aspiration for many families of persons with Autism and other developmental conditions. But now, there are increasing stories of success that suggest that this dream can be achievable after all.

Transition education and work training programs offer individualized instruction to suit each student's unique needs. These programs aim to develop the students' work behaviors and skills that are necessary for vocational pursuits. Training is usually conducted in simulated and actual work environments

Educational institutions such as the Independent Living Learning Centre, Inc. offer work training programs for adolescents and young adults with autism and other developmental conditions which help discover the students' needs, interests and potentials. Next, they are taught fundamental life and work skills in controlled environments. Then, they are included in work settings that match their interests and skills. Regular monitoring by a job coach is performed to ensure the sustainability of the students' work experience.

Part 2

The high disability prevalence, costly rehabilitation and related services, as well as the lack of qualified health professionals and special education teachers, make access to help for children with Autism and other developmental conditions difficult. In response to this predicament experienced especially in developing countries, the United Nations Convention on the Rights of Persons with Disabilities presents Community-based Rehabilitation (CBR) as a strategy that can promote the health, rehabilitation and integration of persons with Disabilities. A central principle of CBR is empowering persons with disabilities and their families to help themselves. A variety of CBR models have been implemented globally. However, it is widely acknowledged that keeping these programs sustainable can be a challenge especially in poor communities.

This presentation aims to present Project Therapy, Education and Assimilation of Children with Handicap (TEACH), an innovative CBR program in the Philippines primarily established for children and youth with developmental conditions such as autism. Through the years, Project TEACH has earned local and international recognitions as a best practice model in CBR. Most recently, the 2015 United Nations Public Service Awards. Project TEACH effectively provides poor families access to a streamlined network of free medical, rehabilitation, wellness, educational and related services geared towards these youth and children's integration into society yet preventing a dole-out culture. The main processes entailed in setting up the program and how the community participates will be detailed in the presentation with the hope of offering the audience a framework for developing socially inclusive CBR programs.

## **Autism – My Twin Voyages of Discovery**

### Adam Feinstein

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In this presentation, the distinguished British author, poet, translator and autism researcher, **Adam Feinstein**, will outline the fascinating history of autism, tracing the changes and progress witnessed over the past eight decades, but also the many misunderstandings. Feinstein will make use of the interviews he has conducted in more than one hundred countries with the true pioneers - including Leon Eisenberg, Leo Kanner's closest colleague; Maria Asperger Felder, Hans Asperger's daughter; Lorna Wing, who introduced the concept of the 'autistic spectrum' as well as the term 'Asperger's syndrome'; Michael Rutter, Simon Baron-Cohen, Uta Frith, Rita Jordan, Patricia Howlin and Gary Mesibov. Feinstein will emphasise the primordial role played by the parents of autistic children - genuine heroes who opened the way to a deeper understanding of autism with their iron-willed struggle against social stigma and against the erroneous and harmful psychogenic ideas of Bruno Bettelheim. In this context, he will detail the history of the associations of parents of autistic children in all five continents, also using the interviews he carried out with these parent-pioneers. Feinstein will analyse the significant advances in scientific research made in recent decades (including genetic and neurological studies) and assess the greater social acceptance of autism in many parts of the world. At the same time, he will demolish some of the most persistent myths which still surround the condition today, citing some striking and telling examples of serious misconceptions and abuses (including some in First World nations). He will also depict the history of the principal educational methods and the most important neuropsychological theories. Apart from the many surprising discoveries he has made in his professional life as a researcher and autism historian, Feinstein will also pinpoint the lessons he has learned from his personal experiences of living with a son with autism – especially the importance of emphasising the skills and capacities of people with autism, rather than their deficits (what they can do, rather than what they cannot do), and of eliminating the many misleading stereotypes.

## **Early Signs of Autism: With Indications for Care and Support of Development In Relationships**

Colwyn Boyd Trevarthen PhD

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Descriptions of the intuitive rhythms of movement and expressions of emotion in normal playful relationships of early infancy, now supported by study of movements and expressions of fetuses, indicate that the disorder identified by Leo Kanner as 'early infantile autism' is likely to have its origin in prenatal deformation of life systems that are adapted for the development of an intentional and affective Self who seeks sympathetic cooperation with human companions in creative patterns of movement. Kanner named the disorders he identified in eleven cases as "Autistic Disturbances of Affective Contact". However, DSM-5, while more attentive to early years, still focuses on disabilities of thinking and language that develop after infancy, which particularly affect skills mastered in school. Case studies in the first year after birth of children later identified with Autism Spectrum Disorder confirm Kanner's judgment. They show abnormal movements of attention and response that evade engagements in cooperative play and sharing of interests. These provoke stimulatory efforts from an adult seeking communication, which further confuse the child. Relational or interactive therapies that follow the child's initiatives and give reward by engaging with the timing and direction of movements and expressions of delight can benefit cooperative learning and mastery of social and cultural skills, including language. Confirmation of this approach comes from the success of assessments and treatments of individuals with ASD that use body movement, music, or dance therapies, and Video Interaction Guidance or Theraplay.

Trevarthen, C. and Delafield-Butt, J. T. (2013). Autism as a developmental disorder in intentional movement and affective engagement. *Frontiers in Integrative Neuroscience*, July 2013, Volume 7, Article 49: 1-16. doi: 10.3389/fnint.2013.00049.



## **Suggested Preventive and Treatment Tools based on Multiple Environmental Risk Factors of Autism**

Afaf Hatem El-Ansary PhD

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Autism is associated with deficits in social interaction and communication, restricted interests and repetitive behaviors. Signs of autism are not evident in the first six months of life, but emerge in the second half of the first year. Literature suggests that the prevalence of ASD has increased 20 times, from a rate around 1:2500 in the mid-1980s to a rate of 1:50 at 2014. Currently, many environmental risk factors such as both pre- and postnatal are found to be associated with autism. There are some reports that environmental contribution might involve in more than half the etiology of autism. Advanced parental age, parent autoimmune disease, maternal depression, maternal infection, and maternal diet are among many other environmental risk factors contributed to autism.

Many autistic children have multiple medical problems including, oxidative stress and glutathione depletion, mitochondrial dysfunction; intestinal dysbiosis showing increased shifted toward an overgrowth of Clostridia species, toxic heavy metal burden; immune dysregulation, characterized by elevation of proinflammatory cytokines and a unique inflammatory bowel disease and immune activation of neuralgia cells and glutamate excitotoxicity. Identifying biomarkers related to these medical problems will almost certainly lead to a better understanding of the pathogenesis required to design the most effective diagnostic and treatment strategies for autism. Moreover, more understanding of the contribution of different environmental risk factors can help to suggest preventive strategies

**Epigenetic children autism: Throughout pregnancy and beyond. The high incidence of autism is a *vis-a-vis* reflection of the frequency of developmental disturbances (maternal-related)**

Alexander Poletaev MD, PhD

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The frequency of birth of children suffering from Autism today is one case for every 60–80 infants, compared with 1:10000 approximately 50–60 years ago. This confirms that most cases of autism are not associated with disorders of the genome (genetic disease epidemics do not occur) and allows you to think about a progressive deepening of problems of the environment as the basis of the pathogenesis of most cases of autism. Environmental pressure maybe barely noticeable for an adult, but this could disturb the development of a much less stable foetus. A variety of environmental factors that may be involved in the pathogenesis of autism (industrial and agricultural pollutants, heavy metals, pathogenic bacteria) may cause persistent changes in the immune system of a pregnant woman. Immune deviations are manifested in the form of changes in the production of biologically active autoantibodies and cytokines. We can assume the same type of final outcomes (equifinality) from the action of different environmental factors, due to the fact that they all cause similar changes in the production of molecules of autoantibodies and cytokines influencing the development (morphogenesis and functional maturation) of different cells of the foetus. Moreover, transplacental transfer of excess of some maternal autoantibodies of IgG class leads to ‘re-wiring’ of the immune system of the foetus (maternal immune imprinting), which could be an additional factor in the pathogenesis of autism. Environment-induced immune changes are mostly adaptive for the mother; however, for the unborn child, they can often be the factors of pathogenesis. The study of repertoires of maternal autoantibodies may be useful for the prediction of normal or abnormal development of the foetus and the birth of the autistic children.

## **The Gaming Paradox: Violent Video Games, Video Modeling and ASD**

Laurie Sperry PhD, BCBA-D, MSc Forensic Psychology/Criminology

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People with ASD are much more likely to be the victims of crime than they are the perpetrators. However, following a number of high profile mass shootings, including the attack on young children and school personnel in Newtown, Connecticut, there is an emerging body of research specifically focused on violent video game play in people with ASD and how that may impact expressions of aggression. The Newtown shooter was a young man with ASD who was known to play violent video games for several hours a day, including a first person shooter game entitled *School Shooter* (Sedensky, 2013). This raises the question, are violent video games becoming the video models for these mass shootings?

The overall aim of this study was to further understand the factors that may be contributing to mass shootings perpetrated by young men with ASD and comorbid psychiatric disorders who spend significant amounts of time playing VVG. Does their propensity towards visual learning make them more vulnerable to violent images? Are deficits in perspective taking that make it difficult for them to consider how their behavior impacts others, being exacerbated by the dehumanization of victims within video games? Is this violent modeling generalizing to real life behaviors? Are some people with ASD more impacted by violent images than others and if so, what variables moderate that impact? Are the feelings of empowerment provided by video games serving to galvanize aberrant behavior? The findings of this study are discussed and suggestions are provided for future research and the development of reasonable viewing guidelines for gamers with ASD.

## Autistic Ontologies and the Open Genome Abstract

Majia Holmer Nadesan PhD

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Autism is too often thought exclusively in terms of isolated thingness: For example, in terms of defective genes or divergent neurological wiring. The metaphors of difference shaping autistic ontics are too often atomistic, mechanistic, and anachronistic. Being is dualistically divorced from environment. These frameworks of understanding fail to recognize that the materialities of our bodies – however microscopic - cannot be disconnected from their physical, biological, cultural and built environments. All living things require “ontic openness” (Nielsen & Ulanowicz, 2011), the contingencies of which affect developmental and reproductive processes. Life is a dance of structured interactivity. Life’s dance is also quite precarious. The requirement of openness in biological systems produces vulnerability to entropy should input too greatly disrupt mimesis. Accordingly, I draw upon open systems models to explore autism in relations to environmentally-mediated genomic instability, a framework of intelligibility that explains the cascading failures associated with autism spectrum disorders and other disorders whose rising incidents suggest environmental influences. I argue that our unwillingness to acknowledge ontic openness and precarity in human materiality will delay mitigation of the systemic inputs that are leading not only to higher rates of autism, but also a wide array of neurological and other disorders affecting children and adults, including but not limited to migraine, Pervasive Developmental Disorder Not Otherwise Specified, Parkinson’s, Alzheimer’s, cancer and immunological disorders. Although these conditions have been with us for millennia, intense biopolitical scrutiny for over a hundred years reveals significant increases in diagnoses that cannot be explained exclusively in relation to altered diagnostic practices. Human *being* has changed because environmental systems have changed. What is the body but a collection of folds, whose materiality is derived from environmental systems, structured by codes that must ensure some degree of mimetic structural integrity while also encoding enough variation to allow for adaptation to environmental change. Environmental systems can be thought biologically or culturally, but both formulations are ultimately inscribed materially in terms of bodies and technological assemblages. In this presentation I propose conceiving rising rates of autism in relation to technological assemblages that have deleterious effects on genetic and epigenetic processes that fold the proteins of our materiality. I argue that the genetic and epigenetic codes that we represent scientifically as structuring our bodies are far more vulnerable to elemental and chemical genotoxins than typically acknowledged. I suggest that our pursuit of the being of autism within the human body has blinded us to recognizing the risks of environmentally induced entropy in the human genome, epigenome etc. I also address more insidious forces shaping knowledge production about autism by addressing the biopolitics inherent in funding priorities and representations that promote atomistic mechanism under extant conditions of growing disorder in biological systems, especially pertaining to the human nervous system.

Finally, the presentation concludes by reflecting on the challenges inherent in negotiating the interactivities between biological and social systems in advocacy messages.

Key words: Autistic ontologies, genomic instabilities, systems theory, biopolitics

## **The Origins of Empathy and Peace (The “triune” brain; critical early systems of care and love in ASD)**

Gerard Costa PhD

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Empathy is regarded as a necessary human capacity, required for social cooperation, altruism and caring for others, reduction of aggression and violence, and in the full unfolding of civilization. Yet the world is filled with conflict and the nature of discourse among world leaders is filled with threats, attempts at domination, hostile and threatening language, and war. Why is empathy in such short supply and how can we understand ways to promote empathy and the origins of peace? Can empathy be “taught” in the same we teach subjects in school such as science or math? This presentation, rooted in principles of infant mental health, looks carefully at the nature of the earliest relationships, the neurobiology or early stress systems, and the “triune” brain to better understand how critical early systems of care and love are essential to constructing minds and brains capable of empathy, love and peace.

## **Shall we Dance? Using Creative Arts Therapies to Promote Play, Social-Relatedness and Self-Expression in ASD**

**Suzi Tortora Ed. D, BC-DMT, CMA, LCAT, LMHC**

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Evan was diagnosed with autism spectrum disorder when he was almost two-years old. Though he received the full spectrum of services Early Intervention provides, by age three his parents felt there was an emotional, expressive, empathic, creative “boy inside” that was not being reached through these finely structured interventions. That is when they discovered dance/movement therapy (DMT). Through videotapes and discussion with Dr. Suzi Tortora will chronicle Evan’s journey. Starting with DMT this journey has flourished through Evan’s gifted musicality, inquisitive creative mind, sensitive capacity for symbolic expression, and passion for all the fine arts. This presentation will demonstrate how the creative arts therapies continue to enable Evan, a person deeply on the spectrum, to develop his voice and his embodied presence.

# **Promoting Social Inclusion of People with Autism in Education, and Navigating Sensory Issues through the lifespan**

**Stephen M. Shore Ed. D**

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This presentation examines the development and use of educational accommodations in inclusion settings as extensions of good teaching practice. For example, a student with special needs in a regular education choral class who is unable to stand still and sing can be afforded another way of meaningfully participating in the choir performance.

Other areas to be explored include sensory issues, recognition and prevention of bullying as well as addressing challenges in supporting people with autism in the areas of relationships and sexuality.

Attendees will come away with easy to implement, practical solutions for including children with autism in education, prevention of bullying, as well as social interaction for engagement in the community, developing relationships and understanding sexuality.

## **30 Years of Experience with Autism Introduced “REACH” Philosophy for Autism in Kuwait and Arab Gulf States**

Samira Al-Saad PhD

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In developing our educational approach, we were fortunate to benefit from observing other educational approaches, visiting educational programs and centers, meetings and learning from other experts' experience around the world. In shaping our approach we had exceptional influence from our environment, religion, values and tradition. Amalgamating all the above with our own experience and exposure, we developed our unique approach which was called "R.E.A.C.H.". Such approach was instrumental in enhancing the educational capabilities and life skills for more than 300 students with autism and their families. The Basic educational components needed for autistic were included in the program where each letter refers to:

**R:** Relationship focused and enhancement

**E:** Environment of the child & its structure is conducive for his development

**A:** Activities designed to each child level & age through curriculum and continuous assessment

**C:** Communication focus on individual level

**H:** Health enhancement of the child through special program focus on integrated health.



# **Ensuring Good Services and Good Health for People with Autism: Initiatives and Developments From Around the World**

Paul Shattock

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The support available for autistic people varies considerably throughout the world. The choice of a crop depends upon the environment – soil type, temperature range, rainfall, day-length and the demand for a product and, in the same way, services for autism will depend upon the culture; the wealth, the social structures and the requirements in a given area. One cannot take a service based in the United Kingdom and replicate it in the Sudan and expect it to survive and vice versa. Mexican solutions are required for Mexican problems. The basic principles for high quality services remain the same throughout the world and it is our responsibility to ensure that solutions are found which incorporate these principles in support structures which are relevant and sustainable in each environment.

The autism movement is one of the most deeply divided movements in the world. Scientists; physicians; parents and people with autism find it difficult to agree or work together. People with autism are very different from each other and require different systems of support. If progress is to result affected parties must work together to speak with one voice. When persons with autism; parents; professionals can agree on a programme, politicians can facilitate appropriate solutions and ensure that individualised programmes are available. No single form of facility or approach is appropriate for all with autism and a range of options must evolve if choices are to exist at all.

In this presentation, there will be discussion of how high quality services have been developed in various parts of the world and how, in some developing countries, interested parties are working to develop solutions and models which can be modified and adopted throughout the world.

## **Raisins can't talk: therapy in preschool**

Alexandra Harrison MD

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Therapeutic intervention in the preschool classroom for a child on the autistic spectrum offers the possibility of scaffolding the child's development in a natural setting and at a lower cost than most current interventions. This presentation describes a psychodynamic treatment method informed by two major scientific perspectives – Mutual Regulation Model (Tronick, 1989) and Neurosequential Development (Perry, 2006) – that can be practiced in a classroom setting. In this method, the clinician attempts in brief but frequent sessions to scaffold developmental growth through “match, mismatch, and repair” (Tronick, 2007). This psychodynamic adaptation of “match, mismatch, and repair” includes recognizing and elaborating emerging symbolization while also emphasizing the regulation of the highly sensitized child. The regulatory emphasis is guided by the concepts of “dosing” and “spacing” (Perry, 2016). A modified pattern of clinical interaction that combines these scientific perspectives – “regulate, challenge, and repair” – is illustrated in the videotaped play therapy of a 4-year old child in the classroom. The method also includes frequent contact with the parents and with the preschool teachers. The child in the case study made significant gains in social competence, self-confidence, and flexibility during the treatment period and at follow up. Important issues in applying this method more generally include: (a) training and supervision required for the clinician doing the intervention, (b) frequency and type of consultation to parents and teachers, and (c) a way of making the intervention available to families of limited means.

## **ASD Screening in Primary Care: 10 years of the M-CHAT Program in Spain**

**Ricardo Canal Bedia PhD**

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Great efforts have been made put into developing methods and tools for early identification of children at risk of Autism Spectrum Disorder (ASD). However, despite recommendations from various institutions and organizations in the world to implement population screening programs, there is little scientific analysis to evaluate it from the perspective of the public health system (PHS). There is a need to validate the usage of standardized instruments as a cost-efficient strategy in the PHS.

The main goal of this communication is to evaluate the “M-CHAT and M-CHAT-R ASD Early Screening Program” in community settings, after 10 years ongoing in two regions of the North of Spain (Salamanca and Zamora), in terms of feasibility, reliability and costs with the purpose of extending the program at regional and national levels.

During the period from October 2005 to October 2015, 54 pediatric teams (including nurses and pediatricians) in the areas of health of Salamanca and Zamora have asked parents who attended with their child within the Well Baby Check-up Program to complete the questionnaire M-CHAT (and updated M-CHAT / R since April 2014 version) at 18 months and 24 months. The program includes telephone verification in cases with positive result in the questionnaire. The differential diagnosis was made following a standardized protocol, using the tests: Vineland I and II, Merrill-P-R and ADOS-G and 2. Of great importance to detect false negatives, it was to have established a coordination with early intervention teams and diagnostic units at the hospitals as part of the specialized health care at each area.

Throughout the period a total of 20.069 questionnaires were administered (M-CHAT and M-CHAT-R), of which 1.651 (8.2%) were positive, being 175 (0.9%) confirmed after phone verification. After the evaluation process, 71 children were diagnosed with ASD, and other 95 were diagnosed with other neurodevelopmental disorders according to DSM-IV or DSM-5 (depending on the year of assessment). The 74% of the professionals who participated, said the program is entirely feasible and 22% considered it moderately feasible (n = 54). Finally, the identification device of false negatives, identified 12 children with ASD from total of participants. The psychometric properties of the program are indicating that there is a sensitivity of 0,83, a specificity of 0,99 and a positive predictive value (PPV) of 0,38 for cases of ASD; being 0,94 the VPP when all neurodevelopmental disorders are considered.

This study supports the feasibility of implementing a long-term program of screening for children at risk for ASD within the public health system. This study has been able to show for the first time in Spain, the feasibility of a long lasting ASD screening program within the PHS. The current findings suggest that training on social and communicative development and dissemination of ASD early signs among pediatric teams, besides the use of a standardized tool, is essential for progress in the early detection of these disorders. The feasibility of this program should be considered.

# **Using Thematically Structured Teaching to Improve Social Integration and Communication Skills of Children with Autism Spectrum Disorder**

Hsu-Min Chiang PhD

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A thematically structured teaching (TST) program was designed for children with autism spectrum disorder (ASD). This study was conducted to examine the effectiveness of the TST on communication and social interaction skills of children with autism spectrum disorder (ASD). The TST consisted of ten 120-minute weekly education sessions. Each session was led by a theme and consisted of four 30-minute sequential segments (e.g., dance party, interactive story, language/math/science, and arts). A total of 56 children with ASD aged 3-12 years participated in this study. A quasi-experimental pre-test/post-test intervention group vs. waitlist control group design was used. Mann-Whitney U tests were used to determine if there were significant differences between the two groups in communication and socialization skills improvements. The results of this study showed that the children with ASD who received the TST program showed significantly higher improvements in communication skills and social interaction skills than did the children who were in the waitlist control group.

Keywords: autism, intervention, treatment, communication, social interaction

## **Education for Children with Autism Spectrum Disorder in Taiwan**

Yueh Hsien Lin PhD

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Individuals with autism spectrum disorders (ASD) are provided with special education services in Taiwan. This presentation will focus on the education and related support services provided for children with ASD aged birth to 12 in Taiwan. According to the Taiwan Special Education Transmit Net data, there are 6,565 children with ASD who receive special education and related services in 2016 and this number accounts for 0.29% (6565/ 2,268,777) of the total number of children aged 2 to 12.

The Special Education Act and the Protection of Children and Youths Welfare and Rights Act are the two laws that protect the right of children with disabilities, including ASD, and ensure them to receive free public education services in Taiwan. The majority of children with ASD are educated with typically developing peers in the same classroom in Taiwan. All general education teachers are required to complete at least one three-credit special education course in their teacher preparation programs. Most elementary schools and some public kindergartens have special education teachers and they collaborate with general education teachers to provide educational services for children with ASD. If a child with ASD is placed in a kindergarten or elementary school without special education teachers, the elementary school or kindergarten can request the Special Education Resource Center located in each city to send special education itinerant teachers to provide special education services for the child. Special education teachers provide communication skills training, social skills training, positive behavioral interventions and supports aiming at the improvement of the deficits of children with ASD. Additionally, they provide education to the gifted children with ASD who are good at music, science, art, mathematics, history, and literature. Special education teachers collaborate with general education teachers and parents to assist children with ASD.

Key words: children with ASD, collaboration, special education itinerant teachers

## **“Mind the Gap” – Bridging the Gap Between Sensory and Emotional Regulation**

**Yael Bruck Binya OTR**

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- "Regulation" is a commonly used concept in the field of child development used by psychologists, physicians, therapists, teachers, and parents, but there is a gap between the understanding of sensory and emotional regulation. The aim of this workshop is to explore these terms through different developmental processes using video clips of children and their caregivers. We will discuss children's biological individual differences and sensory processing, their interactional patterns, how they influence one another and how to reduce the gap through the lens of the DIR (Developmental, Individual differences, Relationship based model).

During the lecture we will:

- Examine sensory processing and modulation from a developmental perspective through theory and practice.
- Understand both the child's and his caregiver's profile of individual differences and how they effect the interaction and children's developmental growth.
- Explore biologically based capacities and parent-infant interactions: "
- Define "sensory affective" interaction and treatment – from co-regulation to regulation, and social engagement.
- Meet the DIR model and understand how intervention using the DIR model uses interaction and uniqueness rather than follow a standard program designed for all children with the same diagnosis.

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## **Using ABA to Address Challenging Behaviors and to Teach Functional Life Skills Such as Toileting and Feeding**

Melissa Olive PhD

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The presenter will discuss how to use Applied Behavior Analysis (ABA) to teach functional life skills to children with autism spectrum disorders. First, participants will learn the essential components of ABA such as setting program goals, using data collection, reliance on reinforcement, and explicit teaching procedures such as prompting and shaping. Then participants will learn to apply those procedures to address toileting and feeding. Finally, applications to address challenging behaviors such as tantrums will be applied. Video examples will be shown to demonstrate procedures.

# **State of the Art Treatment of Sleep Disorders in Children with Autism Spectrum Disorder**

Athanasios Maras PhD

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Sleep problems are highly prevalent among children with autism spectrum disorder (ASD), and these problems can significantly impact both the child and the child's family. Sleep problems have a peak age of onset of 2 years and include prolonged sleep latency, decreased sleep efficiency, reduced total sleep time, increased waking, bedtime resistance and daytime sleepiness. Sleep disorders in ASD may lead to exacerbations of severity of core ASD symptoms and other maladaptive behaviour. Sleep disorders associated with ASD are often severe and persist throughout the lifespan. As such, these problems can be a major factor in the parent's decision to place their child with ASD in medical care. Because conventional therapies are generally unsatisfactory, there is a need for new interventions. In this lecture, the aetiology, assessment, potential consequences, and treatment of sleep disorders in children with ASD will be reviewed, with special emphasis on conventional and innovative pharmacological therapies.



# **The Role of Sensory Sensitivities in the Expression of Autistic Symptomatology**

Niko Kargas PhD

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From the earliest descriptions, unusual sensory experiences have been reported as characterising autism spectrum conditions (ASC). Sensory symptoms in ASC include atypical sensory sensitivities (i.e., hyper/hypo), which seem to be particularly prevalent in the auditory domain. Sensory atypicalities, and in particular anomalous auditory functioning, are beginning to be recognised as a significant contributing factor in ASC. For instance, atypical sensory sensitivities have been associated with anxiety levels, social and emotional skills and behavioural functions. In this seminar I will present some of my work within this area and discuss how this information can be used to develop a subtyping approach for differentiating autistic behaviours and skills that will help us overcome challenges associated with the heterogeneous nature of this condition, which in turn will enhance the quality of clinical practice and research. Furthermore, I will explain how this knowledge could facilitate the development of effective practical applications for improving the lives of autistic people.

# **Media Psychology and Technology and Autism: Engagement, Learning, Therapy, and Entertainment**

Jerri Lynn Hogg PhD

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Smartphones, tablets, and even gaming platforms allow engagement with media, participation in the digital world, and creation of content. Growth advancements in technology and new media provide multiple opportunities to engage media and technology to create a sense of positive well-being. While the focus on media and technology is often on the negative impact, the future lies in helping people to embrace media and technology and positive benefit in learning how to use them well. This is particularly true for individuals with Autism. Technology can fuel the global touching more lives and cultivate deeper connections.

Applications of media and technology will be discussed as well as applications of media and technology that enable new behaviors and attitudes. This includes wearable technologies and the impact on social and physical health, mobile applications designed to build skills for lasting happiness, how gaming supports education and learning and the ability to access real time data around the world through mobile devices.

Current research in assistive technologies and the positive potential in the area of Autism of new technologies with education, social advocacy, entertainment, and therapeutic intervention will be discussed.

Recommendations about media use for promoting psychological health and discussion on current and future applications of digital technology for improving psychological and community well-being will be presented.



