Module: Individualized Work Systems

Evidence Base for Individualized Work Systems

To be considered an EBP by the National Professional Development Center on Autism Spectrum Disorders, a practice has to include studies that Nathan and Gorman (2002) and Rogers and Vismara (2007) considered Types 1 or 2 or a methodologically mixed set of studies (i.e., not necessarily individual studies using mixed methodologies) that we consider Type 3.

- **Type 1: Randomized or quasi-experimental design studies.** For a practice to be considered evidence-based, two high quality experimental or quasi-experimental group design studies in peer-reviewed journals must have demonstrated efficacy for the practice. High quality studies are ones in which critical design flaws that create confounds to the studies do not exist, and design features allow readers/consumers to rule out competing hypotheses for study findings.

- **Type 2: Single-subject design studies.** For a practice to be considered evidence-based, three different investigators or research groups mush have conducted five high quality single subject design studies. High quality is reflected by a) the absence of critical design flaws that create confounds and b) the demonstration of experimental control at least three time in each study.

- **Type 3: Combined evidence.** A focused intervention may also be considered evidence-based if efficacy is demonstrated by one high quality RCT or quasi-experimental group design study and three high quality single subject design studies conducted by at least three different investigators or research groups (across the group and single subject design studies).

Using these criteria, the empirical studies referenced below provide documentation for supporting individualized work systems as an evidence-based practice.

**Preschoolers**


**Elementary and Middle School Age**


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