Homework : Justify the use of the tenses/forms highlighted in bold. Then using all the samples included in this handout, find useful sentences for each section (that could be used when you write your own abstract).

This article **reports** the results of a meta-analysis of technology-based intervention studies for children with autism spectrum disorders. We **conducted** a systematic review of research that **used** a pre-post design to assess innovative technology interventions, including computer programs, virtual reality, and robotics. The selected studies **provided** interventions via a desktop computer, interactive DVD, shared active surface, and virtual reality. None **employed** robotics. The results **provide** evidence for the overall effectiveness of technology-based training. The overall mean effect size for post-tests of controlled studies of children with autism spectrum disorders who received technology-based interventions was significantly different from zero and approached the medium magnitude, d = 0.47 (confidence interval: 0.08–0.86). The influence of age and IQ was not significant. Differences in training procedures **are discussed** in the light of the negative correlation that **was found** between the intervention durations and the studies' effect sizes. The results of this meta-analysis **provide** support for the continuing development, evaluation, and clinical usage of technology-based intervention for individuals with autism spectrum disorders.

Dyslexia **is** a language disorder affecting mainly the decoding of words and their understanding. 5% of children are dyslexic. Studies **have shown** that this pathology was partly related to an attention deficit. Attention is a capacity which has a crucial role in the learning to read. The aim of this study is to assess the possibilities to use action video games in the treatment of dyslexia. This paper **exposes** the first results obtained after a short game session (< 15min.) achieved by a panel test of children. After the sessions, we **measured** a significant decrease in the number of reading errors, indicating that a short session is sufficient to stimulate attentional abilities.

This paper **explores** issues and implications for diagnosis and treatment, stemming from the growing number of children identified with autism spectrum disorders (ASDs). Recent developments and innovations in special education and Medicaid programs **are emphasized**. Eligibility determination policies, innovations in diagnostic practices, the cost and financing of assessment, variability among programs in diagnostic criteria, and racial/ethnic disparities in the timing of diagnosis all **influence** the capacity of service systems to provide diagnoses in a timely, coordinated, accurate, economical, and equitable manner. There are several barriers to the more widespread provision of intensive intervention for children with ASDs, including lack of strong evidence of effectiveness in scaled-up public programs, uncertainty about the extent of obligations to provide services under the Individuals with Disabilities Education Act, high cost of intervention, and variability among states in their willingness to fund intensive intervention via Medicaid. Innovative policy experiments with respect to financing intensive intervention through schools and Medicaid are being conducted in a number of states.

Learned irrelevance (LIrr) **refers** to a reduction in associative learning after pre-exposure of the conditioned and unconditioned stimulus in a non-contingent fashion. This paradigm **might serve** as a translational model for (pre)attentive information processing deficits in schizophrenia. This **is** the first study to investigate the event-related potentials (ERPs) of a within-subject LIrr paradigm in humans. Furthermore, the effects of the muscarinic M1 antagonist biperiden on LIrr **were assessed**. As expected, LIrr **was found** to be intact in young healthy volunteers after placebo. Furthermore, in the placebo condition P3b latency was decreased for target stimuli, which were pre-cued. This **suggests** that the predictability of the occurrence of these stimuli is mainly reflected by this ERP component. Biperiden **had** no effect on the behavioural LIrr measures, although prolonged reaction times were evident. Biperiden increased the N1 amplitude of the pre-exposed predictor letters, suggesting an effect of this drug on early perceptual processing. In conclusion, the within-subject paradigm used in the current study in combination with electroencephalography can reveal brain mechanisms involved in LIrr. M1 antagonism did not affect LIrr performance but **seemed** to influence early information processing.

ABSTRACT TOOLKIT

Section	Useful sentences
Background	
Objective	
Method	
Results	
Discussion	

More samples :

- The confidentiality of the client-therapist relationship has been seriously challenged by managed care oversight and reporting requirements. The impact of such requirements on psychotherapy clients' willingness to disclose was explored. Three descriptions of confidentiality limits were presented: standard limits of therapeutic confidentiality, a rationale for client acceptance of limited confidentiality, and the typical informational requirements of managed care. Clients and potential clients showed less willingness to self-disclose under managed care conditions than standard confidentiality limits. Psychologists must increase awareness of confidentiality issues and advocate strongly for changes in managed care requirements that inhibit disclosure and interfere with psychotherapy.
- Professional psychologists often have a need for information on the patterns of service accessing and service use by ethnic groups. Demographic characteristics and psychotherapy use of 229 Chinese American clients, seen in a Southern California private practice between 1989 and 1996, are described. Diagnostic evaluations of 27 assessment requests, 77 consultations, and 125 psychotherapy cases indicated that depressive disorders, adjustment disorders, anxiety disorders, and relational problems were the most frequently presented problems. For the 125 treated cases, length of treatment ranged from 1-38 sessions with a median of 4 and mean of 5.98 sessions.
- Therapist accessibility by pagers raises many questions regarding between-session and withinsession calls. What are the main purposes of pagers in clinical settings, and what are the rationales for their use? The authors explored the parameters established by clinicians regarding pagers and how these expectations were communicated to patients. The degree of interference the clinician allows in the therapy session when paged is pivotal because of the potentially distancing, distracting, and enervating effect this may have on the relationship. The implications for the therapist's private life and his or her significance in the patient's life are considered.
- If you are a psychologist who conducts child custody or personal injury evaluations, how confident are you that the traditional Minnesota Multiphasic Personality Inventory—2nd ed. (MMPI-2) validity scales and other potential MMPI-2 validity indicators are in fact useful for addressing the issue of response bias? This investigation contributes to the scientific database on the use of MMPI-2 validity indicators to detect response distortion. As the investigation represents empirical rather than analog data, it is of particular value to psychologists who engage in forensic assessment.
- If a patient adheres to religious values and practices, should the treating psychologist get input from a clergyperson? How frequent is clergy–psychologist collaboration? What obstacles impede such collaboration? An exploratory survey questionnaire was sent to 200 clergy, 200 psychologists interested in religious issues, and 200 psychologists selected without regard to religious interests or values. Four themes were assessed: types of collaborative activities, frequency of collaboration, obstacles to collaboration, and ways to enhance collaboration. Strategies for promoting clergy–psychologist collaboration include challenging unidirectional referral assumptions, building trust through proximity and familiarity, and considering the importance of shared values and beliefs.