Spotlight on Student Research Award Recipient: Briana Keller, M.Ed

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Each year, the ACLP Student Research Award recognizes emerging scholars whose work advances child life practice and the psychosocial care of children and families. This year's recipient, Briana Keller, M.Ed, is a PhD student at the University of Alabama whose research centers on two timely areas: ambiguous loss in pediatric illness and the healthcare experiences of autistic individuals, especially during the transition from pediatric to adult care. Briana's project invited autistic young adults to describe—on their own terms—what helps, what harms, and what needs to change. Her findings reinforce the vital role Certified Child Life Specialists (CCLSs) can play in preparation, communication, and sensory-supportive care across the lifespan. In the conversation below, Briana reflects on what she learned, how the study shaped her as a researcher, and what practical steps clinicians can take tomorrow to improve care.

What problem were you trying to solve, and what is one thing a CCLS could do differently tomorrow because of your findings?

Autistic young adults use healthcare services more often than the general population (Ames et al., 2021), yet they frequently experience more difficulty transitioning from pediatric to adult care (Ames et al., 2023; Cheak-Zamora & Teti, 2015). We wanted to understand how this population experiences healthcare transition and why. CCLSs have the skill set to provide procedural preparation, support sensory needs, and break down medical information clearly—exactly the strategies our participants said were most helpful. Even at ages 18, 21, or 25, autistic patients want and benefit from these services.

Can you share a brief story or quote that captures why this work matters?

The sheer number of responses spoke volumes. People often complete research surveys because they want to be heard, especially when there is no payment. We received more than 200 responses in just four months, with over a quarter arriving in the first week. Many participants also left comments thanking us for doing this work—it clearly mattered to them to share their input.

How did conducting this study shape you, and how does it inform your next steps?

As an autistic person, I often see autism research that feels disrespectful or dehumanizing. It was powerful to design a study that was accessible and inclusive, and to share honest results while prioritizing autistic people's dignity. I'm now in the second year of my PhD, and my dissertation will focus on autism and medical play. It feels good to be part of changing how researchers talk about disability.

If a clinician has only 10–15 minutes, what's a low-cost, evidence-informed action they can take based on your study—and what simple sign would show it helped?

The most important thing our participants wanted was to be treated as human beings. Many have experienced being ignored or talked down to, particularly when autistic traits are more visible (e.g., limited speech, significant sensory challenges). When clinicians approached them with respect and kindness, they felt more comfortable and healthcare became more accessible. Practical tips are summarized in our Summer 2025 ACLP Bulletin article, "Creating a Culture of Respect for Autistic Patients and Families."

If a team wanted to build on your project, what's one realistic next step, and what single data point would you track?

If you want a tool to identify which transition skills patients feel confident about—and which they are still developing—our study used a modified Transition Readiness Assessment for Youth (Got Transition, 2020). For comfort and accessibility, nothing replaces directly asking the patient: "What do you wish your doctor or nurse knew about taking care of you?"

Conclusion

Briana Keller's work amplifies autistic voices at a critical point in care and translates their guidance into clear, actionable steps for CCLSs and interprofessional teams. Her message is both simple and practice-changing: sustained preparation, sensory-supportive environments, plain-language communication, and respect remain essential beyond pediatric settings. As programs refine transition processes, Briana's lens offers a blueprint for partnering with autistic patients to define what "good care" looks like. To learn more or request the article, contact bpkeller@crimson.ua.edu.

References

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