

**Components of an Effective  
Autism Program**

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## **I. Components of an Effective Program**

### **A. Language and Communication**

Among the most critical skills involved in determining whether students become as independent as possible, is some form of functional communication, especially the ability to convey basic wants and needs.

For students with no verbal language, two types of complementary training may be pursued simultaneously. The first involves teaching a basic functional exchange system with picture symbols and/or objects. A system of this kind allows students to make requests for desired items and activities and promotes the use of spontaneous interaction and student *initiation* of the communication process. This type of system can be expanded to include the teaching of language concepts and sentence structure as well, and is an important alternative for consideration with non verbal students.

The second approach includes a process for beginning speech and language development by establishing non verbal imitation and verbal imitation. Non verbal imitation should begin with large gestures, then go to smaller gestures, and finally to facial gestures, including oral motor skills, when appropriate. The discrimination becomes more difficult as the gestures become smaller. This process teaches the student to visually attend to what the teacher is doing as well as the rudimentary skill of imitation on demand. Once this is achieved, imitating sounds begins. Verbal imitation is typically begun by having the student repeat any sound on demand (preferably one already in the student's repertoire), easy phonemes, other sounds and sound blends, and finally, whole words. Of course, learning rates vary, and care must be taken to match each student's skill level, by pre-testing and recording baseline data.

Other fundamentals in language acquisition include teaching nouns, verbs, early concepts, expressive wants and needs and social language. Within each of these broad areas, goals and objectives should be developed by establishing a baseline, or present level of educational performance.

Augmentative communication systems must be considered for students with severe language deficits. These may include any number of low tech or high tech systems, as the IEP team considers the individual student's cognitive ability, current language functioning, motor capacity, and motivation to utilize the

augmentative system. It is critical that all augmentative interventions be documented by the IEP team.

1. Verbal Language
  - a. Non verbal Imitation
  - b. Verbal Imitation
  - c. Sounds, Words, Sentence Structure
  - d. Language Concepts
  - e. Social Language
2. Exchange System with Pictures or Picture Symbols
  - a. Teaching an Exchange Sequence (eliminating or minimizing verbal prompting)
  - b. Discrimination Training (for picture discrimination)
  - c. Expanded Expressive Wants and Needs
  - d. Increased Vocabulary
  - e. Language Concepts
  - f. Social Language
3. Benefits of a Dual Approach

## B. Attending Skills

The term "attending" refers to a specific set of behaviors, which, when mastered, enables the student to pay attention to the teacher and the task at hand. Systematic instruction should be employed so that the student learns to stay in seat, keep hands and feet quiet, and establish and maintain eye contact (or proximal eye contact). As with all other areas of learning, instruction must be matched to the student's skill level. Not all students require a step-by-step program in order to learn attending skills. Some students may need some portion of the program (e.g., to understand the meaning of the words "feet quiet"), while others can learn in a more

informal manner. The completion of an attending skills program should not be considered a prerequisite to beginning instruction in other areas; rather, attending may be taught simultaneously, with a combination of short discrete trial sessions, and shaping of the skills in a functional way, during other instructional periods.

1. In Seat
2. Feet
3. Hands
4. Mouth ( Reducing Vocal/Verbal Self-Stimulatory Behavior)
5. Eye Contact (or proximal eye contact; looking at task)

#### C. Discrete Trial Training

Discrete trial training is an efficient and effective means for teaching concepts, making corrections and getting results quickly. A series of trials is presented in a basic cue/response/consequence format. The student is reinforced for correct responses, using appropriate application and fading of reinforcement schedules. A specified correction procedure is utilized for incorrect responses.

As skills are mastered, they are systematically generalized across cues, materials, persons and settings. They are then placed on a review schedule to ensure maintenance with the student's skill repertoire.

1. Parts of a Discrete Trial
2. Schedules of Reinforcement
3. Correction Procedure
4. Data Collection
5. Acquisition
6. Skill Maintenance
7. Systematic Generalization
8. Common Teaching Errors

D. Behavior Intervention Plan

IDEA 2000 contains specific language regarding written behavior intervention plans for students whose behavior adversely affects their learning. The law requires a proactive approach to behavior management, including an investigation by the IEP team into what functions particular behaviors may serve for the student (functional behavioral assessment information). Once this is hypothesized, a plan must be developed to decrease inappropriate behavior, teach and reinforce alternative or replacement behavior(s), and monitor progress on behavioral goals and objectives. Written plans should include, at a minimum, the following:

1. Definition of Target Behaviors/Corresponding IEP Goals
2. Definition of Replacement Behaviors/Corresponding Goals
3. Pre-planned Consequences
  - a. Reinforcement Procedures and Schedules  
(reinforcement of *absence* of inappropriate behavior and of replacement behavior)
  - b. Reductive Procedures
4. Methods of Data Collection
5. Scheduled Review Dates

**Note:** IEP teams must prioritize behavioral issues for individual students. Depending on the nature and severity of the behavior(s), it is sometimes feasible to work on only one or two problem behaviors at a time. In other circumstances, the team may be able to address a number of behaviors at once. Behaviors with the potential to cause injury to self or others are, of course, considered a high priority. Other behaviors which often require systematic intervention may include, but are not limited to, self-stimulatory behavior, non compliance, running, tantrum, rumination, pica behaviors, and toilet training.

E. Adaptive Skills

In addressing this area in the IEP process, particular attention

should be given to parent and student priorities and preferences. Social interaction, a critical part of adaptive programming, must be approached as a group of specific, discrete skills. Social skills instruction should be conducted using an approved curriculum, in tandem with systematic reinforcement for appropriate social behavior, as delineated in the Behavior Intervention Plan.

1. Motor Development
2. Self-Help Skills
3. Language and Communication
4. Social Interaction
5. Transition

F. Parent Training

Schools should offer to train parents in instructional methods, as well as in behavior intervention strategies. This training may be conducted in the classroom setting, during pre-specified time periods, or in some type of class wide or district wide program. Some schools and parents find it convenient and effective to hold classes on evenings when parents and teachers might normally be meeting (e.g., during parent/teacher conference times).

1. Classroom Training/Language/Academics/Adaptive Skills
2. Behavior Management
3. Data Collection

G. Data Collection

The best methods of data collection are those which take little time for the recording process, and which give you information at a glance. **ANECDOTAL RECORDS ARE NOT SUFFICIENT FOR DOCUMENTING PROGRESS ON IEP GOALS (INCLUDING BEHAVIORAL GOALS).** Consistent data collection and review must be the driving forces in program planning.

1. Academic and Language Data
  - a. Discrete Trial Data

- b. Curriculum-based Assessment/Mastery Tests
- 2. Behavioral Data
  - a. Frequency Count
  - b. Interval Recording

## **II. Planning Issues**

- A. Staff Training
  - 1. Who Should Be Trained/Does the District Need an "Expert"?
  - 2. How Much Training/What Should Be Included?
- B. Eclectic Approach
- C. LRE Issues