

Editorial

By Vera Bernard-Opitz

The current issue of the Autism News focuses on Early Assessment and Intervention - a topic which touches not only families, diagnosticians, and interventionists, but also policy makers and service providers. How can we recognize early signs of autism in infants and young children and start intervention as early as possible? Which intervention can help when an infant lacks early communicative and social behaviors, such as looking at his parents, smiling in response to their smiles, sharing his small joys and troubles in social interactions, or pointing to share his experiences? And – if all these normal skills don't develop at the expected time - what exact behavior should be targeted? Or to put it in behavioral terms, what behavior is “pivotal to major developmental progress and behavioral change?” And which method is appropriate and effective for this age group?



Example of the Early Start Denver Model of autism YouTube: Logan_PattyFeet.mp4



*Speech Therapy at 22 months
<http://www.youtube.be/watch?v=WyQ8a1nqWJk&feature=fwrel>*

Since we are starting something very new we may also need to consider critical questions such as the following:

- Can assessment ever be done too early? How stable is a diagnosis made at the tender age of three to six months?
- Are there possible side effects to well-meant

campaigns for early recognition of autism, such as worrying new parents by exposing them to the “red flags for autism,” sometimes even before their child is born? Flyers with headlines such as “Could it be autism?” surely leave their “worry-traces” not only in pregnant moms, but often also in grandparents, other relatives and

friends. Most of our colleagues assume that the benefits of early assessment outweigh the risks of false alarms – and we hope that this is true.

- It has been shown that ABA and structured teaching have made an enormous difference in the lives of individuals with autism. Do we have sufficient comparison studies, however, to justify early intervention with infants? If so, which method with which behavioral target should be used for how many hours a day?
- Two YouTube examples of interventions before the age of 24 months have been a highlight of my recent workshops in Germany. The video from the Early Start Denver program “Patty Feet” shows a child-initiated sophisticated interplay between an infant and a therapist, while the video “Speech Therapy at 22 months” shows a therapist-directed behavioral interaction using physical prompts and behavioral contingencies. Both demonstrate interventions that have different underlying philosophies but clear positive effects. **Matching the right method to the prerequisites of young children obviously needs more data and research evidence.**

While the current issue of the Autism News cannot answer all the questions involved, it sheds some light on the above discussion points.

- In the first article **Barry Grossman and Ruth Aspy** – authors of the Ziggurat Model - describe

an assessment tool that is designed for children from three months through 72 months. It is laudable that the authors do not focus solely on developmental milestones, but include the child's strengths as well as parental concerns.

- **Rebecca Hernandez** presents Help Me Grow, a joint project of UC Irvine Department of Pediatrics and CHOC (Children's Hospital of Orange County), which is funded by Orange County United Way (OCUW), to provide developmental screening and monitoring to siblings of children diagnosed with an Autism Spectrum Disorder (ASD) from age 2 months to five years.
- Regarding pivotal skills in early intervention, previous research has stressed the crucial role of attention in young children with autism. **Elena Patten and Linda Watson** from the University of North Carolina differentiate various types of attention (such as orienting, sustaining, shifting and joint attention) and summarize specific strategies for enhancing attention. An interesting finding is that regardless of the teaching method (ABA, milieu teaching, pivotal response training) or the interventionists (therapists, parents, grandparents) children benefitted when interventions focused on improving attention.
- **Eva Hegewald** from the Autism Center in Alfeld, Germany, shares impressions from an integrated kindergarten program. Photos of the center show how orientation and interaction for children with autism and other developmental problems can be facilitated through architectural and play equipment design.
- **Christine Arens-Wiebel** from the Autism Center in Bremerhaven, Germany, summarizes four years of early intervention on the development of a child with autism. A comprehensive program emphasizing child training as well as family involvement is presented.
- **Catherine Gutshall** from the CARD Program presents strategies for selective eating – a problem frequently faced by parents of young children with autism. Her intensive interven-

tions demonstrate that behavioral intervention can make a big difference in daily challenges.

- **Bobbie McIntyre** shares her sadness about the limitations her children affected by autism face, and also the joy of finding new opportunities. Her article, "Red Tandem Bike," can be seen as a symbol for exploring different ideas, being ready for the unusual and celebrating the unexpected joys along with our children.
- Last, but not least **Lee Hong Eng** from Singapore shares her son's interest in art. Since I had the opportunity to follow Jacob's development from a young, bouncy child into a talented young man, I specially appreciate the story "I want to become an artist," Thanks Jacob, for your outstanding cover picture!

We thank all our authors for their contributions and our supporters for their generous support, all of which have made ANOC 17 possible. **The next issue of the Autism News will focus on Social Skills Programs, but again depends on your donations.**

Wishing you all the best for the new year.

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