Early Start Denver Model for Young Children with Autism

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Introduction:
The Early Start Denver Model for Young Children with Autism (ESDM) is a new early intervention approach for children with autism, ages 12-36 months, as well as ages 48-60 months. While this approach has roots with the Denver Model for preschoolers, the ESDM is designed for younger children with autism. The goal of this approach is to, 1) reduce the severity of autism symptoms, and 2) aid in the child’s overall development.

Foundations of ESDM:
The ESDM combines different components from various approaches to treatment for young children. It takes components from approaches such as The Denver Model, which emphasizes focusing on teaching skills that follow the typical pattern of development, and Pivotal Response Training, which uses some principles of Applied Behavioral Analysis (ABA) in a play-based environment.

ESDM Curriculum:
The specific curriculum for each child will depend on each child’s own strengths and areas of need. In the ESDM, therapists and parents/caregivers look at all domains of the child’s development (e.g., understanding and verbal communication, imitation, social skills, play skills, fine motor skills, self-care skills, etc.) in order to establish therapy goals and the steps involved in how to achieve those goals. Goals and objectives are designed to be met within a 12-week period. After 12-weeks, new goals are established.

Team Implementing Intervention:
The ESDM is designed to be implemented by a team of professionals, therapists, and family members. Since autism spectrum disorders can affect multiple areas of development or functioning, a team with many professionals from different disciplines is needed (e.g., psychologist, speech-language pathologist, occupational therapist, teachers, etc.). The parents/caregivers play an important role as a team member throughout the entire process of their child’s evaluation and intervention.

Teaching:
Teaching of a child’s goals is through play activities. Teaching occurs very often throughout sessions so the child has a lot of opportunities to learn. In the ESDM, teaching occurs in 1:1 teaching (i.e., one therapist/professional and one child) and at home or any other
natural environment, where the parents/caregivers are practicing and carrying out intervention goals with their child.

**Teaching Strategies:**

**Strategies for teaching skills and/or concepts include:**

- Finding highly-motivating activities for the child
- Gaining and maintaining the child’s attention in an activity or task
- Breaking behavior down to understand what causes certain behaviors and how to reinforce other behaviors
- Prompting behaviors and skills, and eventually fading those prompts so the child becomes independent
- Linking behaviors together to expand the child’s actions, behaviors, or skills
- Following the child’s lead
- Giving the child choices
- Adult response to any communication attempt made by the child
- Consider the adult’s language with the child
- Strong family involvement component

**Where to Find More Information:**


- Autism Speaks [www.autismspeaks.org](http://www.autismspeaks.org)
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