

# myths about the LOVAAS MODEL

## **“The Lovaas program discourages socialization by taking children out of school.”**

One of the major goals of our program is to allow each child to eventually have as typical a school experience as possible. It is our experience, however, that a child needs a period of one-to-one treatment in the home, the primary place of learning for young children, before he or she can take advantage of a group or classroom situation. When the child has gained the skills necessary to benefit from a classroom placement, instructors accompany the child to school, facilitate the transition to the classroom routines, and encourage interaction with other children. School time is increased gradually over time, and the instructor is carefully faded out.

## **“The Lovaas program still does everything the way it was done when the original study came out in 1987.”**

While the program continues to be based on those behavior techniques which have been developed through scientific evaluation, changes are made to the program every year. Consultants at the Lovaas Institute continually meet to discuss current research and child-specific interventions. Further, consultants are constantly in contact with each other via the Internet to discuss new methods for overcoming obstacles in a child's learning. These discussions have helped in the development of a reading and writing program for some nonverbal children, a change in the initial approach with our youngest children (sometimes called the Interactive Play-based Approach), a more comprehensive approach to generalization, and a closer look into how we teach early language skills.

*(continued on back)*

*Myths (continued)*

## **“In the Lovaas program, instructors frequently tell the child 'no.' This causes behavior problems because the child isn't successful.”**

The program has always utilized errorless teaching techniques that keep the child successful at least 80% of the time through effective prompting. The overuse of a “no-no-prompt” strategy is a byproduct of poor quality treatment by some who claim to base their intervention on the Lovaas research rather than those who receive supervision from the Lovaas Institute itself. When appropriate, we tell a child “no” and allow him an opportunity to learn from his mistakes. At the same time, the intervention is tailored so that a child is many times more successful than unsuccessful.

## **“Lovaas uses aversive techniques to manage behavior.”**

Incorrect. Reinforcement is the fundamental principle on which our program is based. Ensuring the child's motivation to participate in the learning process is a key element in behavior interventions. Aversive interventions are not employed by the Lovaas Institute.

## **“The Lovaas program only uses a discrete trial technique so skills never really become functional.”**

Many skills, but not all, are first taught in a discrete trial format (an instructor gives an instruction, the child responds, and the instructor rewards the child for a correct response or says “no” for an incorrect response). However, after a child has acquired a skill in this contrived environment, emphasis is placed on generalizing the skill into a more natural environment. When skills are not generalized, it is often a result of the consultant and instructors failing to teach the behavior in a generalized setting, rather than a problem with the program itself. Further, other techniques such as incidental teaching are used to encourage spontaneous language and communication in the natural environment from the beginning. Later in the program, emphasis shifts to teaching all skills in a more natural environment.



# the LOVAAS MODEL

The Lovaas Institute provides behavioral treatment utilizing the principles of applied behavior analysis. Treatment follows the procedures described by Dr. Ivar Lovaas, published along with long-term outcome data in peer-reviewed journals, and supported by additional long-term outcome research as recently as 2005.

Although children may have the same diagnosis of autism, they evidence considerable individual differences necessitating that the treatment be adjusted to each child's needs. The Lovaas Institute provides competent and qualified personnel to help develop a child's language and social interactions with parents and peers while reducing interfering behaviors such as tantrums.

More detailed information can be found in the 2003 manual, *Teaching Individuals with Developmental Delays: Basic Intervention Techniques* by O. Ivar Lovaas.

While intervention often begins within the home, a young child's primary place for learning, it is generalized in a child's neighborhood, including public schools, play areas, stores, restaurants, and other places which facilitate the child's integration among typically developing children. A trained 1:1 aide facilitates this transition and is faded when possible.

Social interactions and cooperative **play** are integral to treatment. Facilitated play occurs first with siblings and then with peers during play dates and at school.

**Requesting** is developed as early as possible.

Learning to express and understand vocal **language** is seen as most significant in furthering social and educational development.

**Imitation** is also a crucial part of treatment, allowing a child to learn by observing other children learn.

**Parental involvement** is critical. Parents are empowered through training and collaboration to create an environment in which treatment is provided most of a child's waking hours, at home, at school, and in the neighborhood.

**Motivation** is encouraged through the use of familiar materials and child-specific reinforcers.

**Positive interactions** are first developed through the use of favorite activities and responding to any attempts to communicate.

Treatment begins by teaching through one to one interactions with instructors and parents that develop constructive and trusting **relationships**.

**Success** is promoted through positive reinforcement of successive approximations and prompting and fading procedures.