The Best Autism Therapies and Solutions

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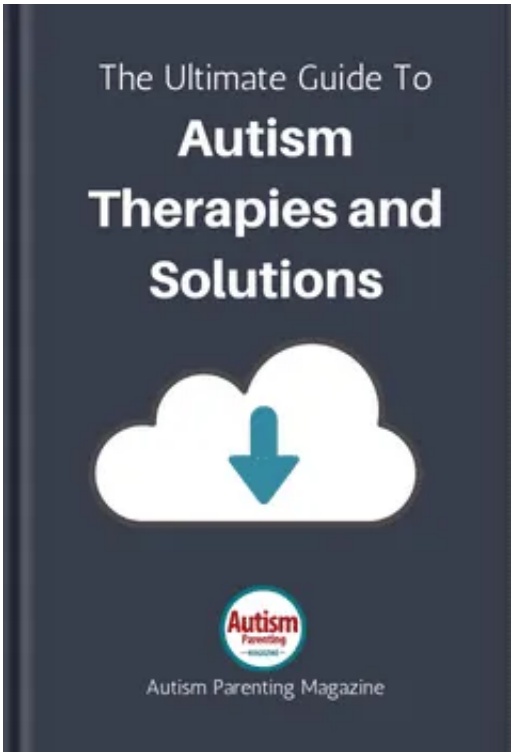
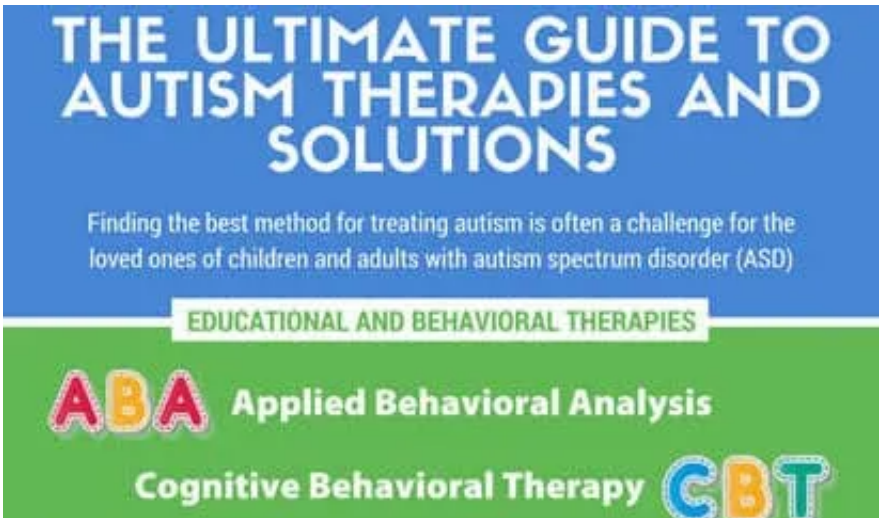
Finding the best method for **treating autism** is often a challenge for the loved ones of children and adults with autism spectrum disorder (ASD). Because no two people with ASD are exactly the same, it's vital to choose a method of treatment and therapy and an intervention plan that is tailored to address specific needs.





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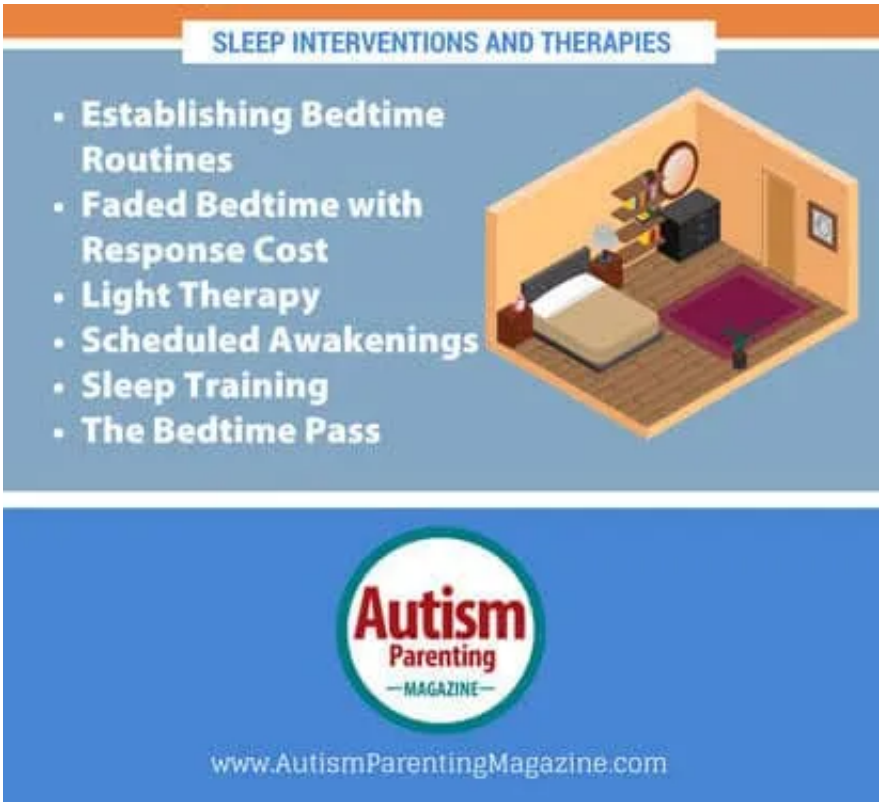


The Ultimate Guide to Autism Therapies and Solutions

A Quick Note to Parents

There are a number of autism therapies and treatments available today. Before you settle on a specific method, however, it's very important you complete thorough research to determine what might work best for your child. There are many unknowns with ASD, so it's wise to equip yourself with sufficient knowledge before trusting a particular mode of treatment or therapy.

If you encounter a type of treatment that seems too good to be true, it probably is. No matter what other people may say about a particular therapy, always take the information they are offering with a grain of salt. Remember, it's your child's health and well-being that is at stake. If you make a hasty decision without verifying the information you have received with a medical professional, you might put your child's safety at risk. ***We cannot endorse any one treatment or therapy.***

Also, always keep in mind that a method that works well for one child may

not work for another child with different developmental needs. The key to finding **autism therapies** or treatments that help your child is to do research and determine which therapies were successful for children with similar challenges.

During your research, be sure to reach out to other families also affected by autism and learn what is working best for them. When you find a type of autism therapies that work with your child, be sure to share it with them in return.

Educational and Behavioral Autism Therapies

Here are some popular autism therapies designed to help improve behavior and boost learning for children with ASD:

Applied Behavioral Analysis

Applied Behavioral Analysis (ABA) is the most popular type of behavioral therapy for children with ASD. ABA is actually something of an umbrella term for a number of behavioral therapies, with several specific approaches falling under it. For example, discrete trial training (DTT) is a form of ABA that focuses on encouraging or reinforcing positive behaviors while discouraging negative ones.

When providing ABA, therapists or practitioners conduct an assessment to determine if a child has been unintentionally rewarded by his/her parents for any negative behaviors. They then work to establish new behaviors using a variety of methods, including discrete trial learning (DTL).

Many studies have shown that ABA can be positive for children with ASD. In fact, this type of therapy has been found to boost children's test scores, language skills, and academic performance. A 2006 study published by the *Journal of Autism and Developmental Disorders* also revealed that ABA and other similar behavioral interventions may contribute to the development of a

child's personal and social skills.

Selecting an ABA provider for your child can be an overwhelming task for some. For expert advice on what to look for, take a look at a piece written for *Autism Parenting Magazine* by Angelina M., MS, BCBA, MFTI called *Help: I Don't Know How to Choose an Applied Behavior Analysis Provider*, as she explains what ABA sessions include and the kind of training the team should have.

Sarah Kupferschmidt, MA, BCBA, also provides her top notch advice in *Autism Parenting Magazine* on the ABA selection process her in piece called *High Quality ABA Treatment: What Every Parent Needs to Know*.

Cognitive Behavioral Therapy

Cognitive Behavioral Therapy (CBT) is a type of psychotherapy designed to eliminate unwanted behavior patterns by helping people get rid of negative thoughts about themselves and the world. In recent years, there have been attempts to utilize CBT with children and teens who have ASD, particularly with those who have anxiety.

Some believe that children on the autism spectrum don't have the skills needed to succeed at CBT; however, research conducted in 2012 proved otherwise. The research team found that children with autism have the ability to distinguish thoughts, feelings, and behaviors. They also have the ability to alter their thoughts. Some children, however, did have difficulty recognizing emotions.

Because of this, researchers and autism experts have worked tirelessly to modify CBT and make it more suitable for children with ASD. They made it more repetitive, visual, and concrete to suit the needs of the kids. For example, instead of simply asking a child to describe or rate his/her anxiety level on a scale of 1 to 10, a therapist may just use a thermometer showing anxiety levels from low to high and have the child point to the level according

to what he/she is feeling.

One reason why CBT works well as one of the **autism therapies** for children is that it involves parents. It allows parents to develop a better understanding of their child's challenges and teaches them how to use CBT techniques when real-life situations affect their child. This empowers them and makes them feel involved and confident about their ability to help.

DIR/Floortime

Developed by Dr. Stanley Greenspan, the Developmental Individual Difference Relationship (DIR) model is a completely child-led approach to treating autism. DIR's most well-known component is Floortime, which is why it is now often called DIR/Floortime. This type of treatment often takes place on the floor (hence, the name) because it requires an adult to follow a child's lead. It puts emphasis on the toys or objects that capture the interest of the child with ASD.

For example, if a child is fascinated with spinning the wheels of a toy car, the adult will get on the floor with him/her and spin the wheels on the car, too. The point of this therapy is for the adult to catch the child's interest and attention, as well as for the child to share his/her pleasure or frustration. This gives the adult the opportunity to better understand the child's world, thus paving the way toward establishing a social and emotional connection.

DIR/Floortime is also designed to help ensure children's holistic or overall development. With this kind of treatment, every area of development is addressed. These areas include motor, emotional, and cognitive skills; sensory abilities; and language functioning.

One advantage of DIR/Floortime is that parents themselves can deliver this form of therapy, thus saving a lot of money. Also, as compared to other autism treatments, DIR/Floortime requires fewer hours of therapy to be effective.

Discrete Trial Training

DTT is considered by many as the most deliberate and pure form of ABA. It is often used when a therapist seeks to teach children new skills or behaviors or encourage them to do something they don't often do. With DTT, skills or behaviors are broken down into tiny, manageable pieces. This way, they will be easier for children to learn and achieve success.

A discrete trial is comprised of three components: the therapist's instruction, the child's response (or lack thereof), and the consequence. The effectiveness of this intervention program is partly due to the fact that it embraces the idea of reinforcement as "anything" that motivates the child to learn. When a child with ASD learns a new skill or behavior, it should be practiced or repeated many times. Then, he/she will be rewarded accordingly, usually in the form of toys, food, gestures, or anything that will serve as a motivation.

Early Start Denver Model Therapy

The Early Start Denver Model (ESDM) is a **treatment for autism** developed by Dr. Sally J. Rogers. It made news in 2012 when it provided the first physical evidence of psychologist O. Ivar Lovaas' 1987 study that claimed improvements are possible with the help of the right kind of intervention. In fact, *Time* magazine named it one of the top 10 medical breakthroughs of 2012.

ESDM utilizes some principles of ABA and DTT, such as breaking down a task or skill into smaller pieces and teaching each step in the sequence. The difference, however, is that it doesn't use discrete trials. It also focuses on the relationship between the therapist and the child, which is built on play according to the child's interests.

In 2012, a group of researchers conducted a study on how early behavioral intervention is associated with normalized brain activity in children with ASD.

They found that toddlers who underwent ESDM therapy showed significant improvement in several areas, including the use of language. They also demonstrated better daily living skills than those who received conventional interventions.

The researchers continued to follow and observe the children who underwent ESDM therapy even after the study ended, and the kids continued to show improvement. This supported Dr. Roger's earlier expectations that young children who are undergoing ESDM therapy can achieve the same score on IQ and language tests as neurotypical children by the time they reach six or seven years old.

LEGO®-Based Therapy

LEGO-based therapy involves so much more than playing with a stack of plastic bricks developed generations ago—it's a group play therapy with specific guidelines. With the right guidance, these colorful bricks can help facilitate social and communication skills for children with high-functioning autism.

Amy Wagenfeld, Ph.D., OTR/L, SCEM explains the fundamentals, the process, and the valuable social connections that can be made in her article published in *Autism Parenting Magazine* called LEGO® Therapy: How to Build Connections with Autism One Brick at a Time. This therapy can also help a child with ASD develop **fine motor skills, visual perceptual motor skills, cognitive skills, sensorimotor skills, and self-efficacy skills.**

Occupational Therapy

Occupational therapy (OT) can often benefit children with autism, as many tend to have a difficult time with social interaction and communication, as well as difficulties with restricted interests and play skills.

An occupational therapist can often assist children to perform better in

school and at home. Therapy can help enhance daily life skills, such as grooming and toilet training.

For additional advice on ways to assist children with autism develop specific skills, take a look at the piece published in *Autism Parenting Magazine* called *Simple Ways to Help Kids with Autism Develop Hand Skills*, written by Barbara Smith, MS, OTR/L. An occupational therapist, Smith provides excellent advice on how to use sensory stimulation to help a child engage and use his/her hands while decreasing touch sensitivities.

Pivotal Response Training

Pivotal Response Training (PRT) was developed by doctors Robert and Lynn Koegel of the University of California, Santa Barbara. The Koegels believe that some of the deficits in children on the autism spectrum are more fundamental than others. Developing a child's ability in one of these pivotal areas, they theorized, could possibly result in collateral behavioral improvements.

In PRT, the focus is on changing certain pivotal areas—such as the child's motivation and self-management—in order to change the behaviors that depend on them. It also follows the same behavioral principles of ABA, such as rewarding the child for positive behaviors. But instead of following the "child and teacher at the table" model, PRT uses a more naturalistic approach. During therapy, the child is placed in a structured place where he/she has many opportunities to play and interact with the surroundings.

Like in DIR/Floortime, the adult follows the child's lead in PRT. The child is also allowed to choose the toys, activities, and topics of conversation during the session. Parents love this approach because it is suitable for all environments. Also, they can easily incorporate PRT strategies into the child's day-to-day activities.

Social and Communication Skills Interventions

Below are some of the resources and tools that can be used to help children on the autism spectrum develop social and communication skills needed for daily life:

Picture Exchange Communication System

The Picture Exchange Communication System (PECS) was developed in 1985 by Dr. Andrew S. Bondy and Lori Frost as a unique augmentative communication intervention package for individuals with autism. The system is commonly used with children and adults on the autism spectrum who have little to no verbal ability. With PECS, therapists and parents help children build a vocabulary and articulate their thoughts and feelings through pictures.

Many children and adults with ASD have achieved success with PECS. Through this system, they are able to communicate and articulate their thoughts, feelings, and observations regardless of their communicative, cognitive, and physical difficulties. Some learners were also able to develop speech. Today, research supporting the effectiveness of PECS is ongoing to determine how it can further help those with ASD to communicate.

To learn more about how the PECS can make a difference in a child's life, take a look at Emily Davidson's piece called How to Use PECS to Give Your Child with Autism the Voice He/She Needs published in *Autism Parenting Magazine*.

Social Scripts

This strategy is used to help individuals with ASD, especially children, initiate social contact and converse with other people. The kids are taught "scripts" for common social situations. At first, the child uses to support or a reminder card that has a scripted question or phrase written on it. The child then uses these cards until he/she is able to develop better social skills and is able to

use questions and phrases in a more spontaneous and natural manner.

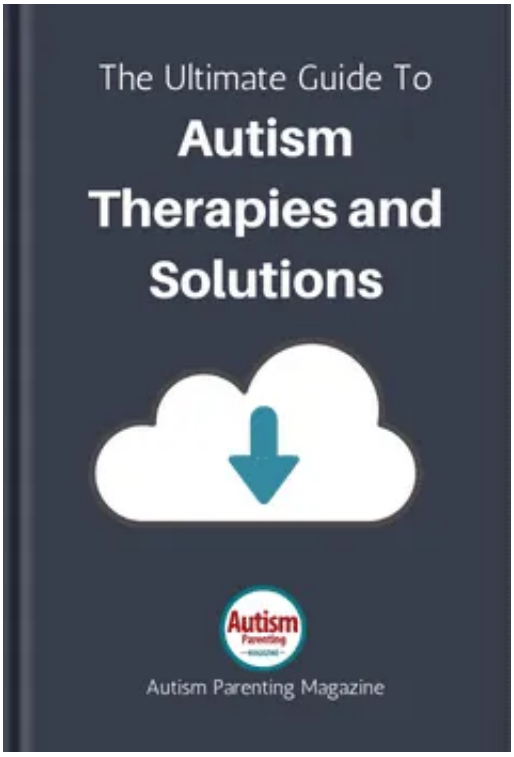
Social Stories and Comic Strip Conversations

Studies have shown that children with autism respond better to visual cues, which is why using stories and drawings is a great way to help them build social understanding. "Social Stories," developed by C. Gray, are brief, personal stories written for children with ASD. These stories describe social situations where the feelings of the child and other people serve as key elements. Possible social responses are included to help the child understand or cope with stressful social situations.

For an example on ways social stories can aid a child with autism, take a look at the piece by Angelina M, MS, BCBA, MFTI in *Autism Parenting Magazine* called HELP: My Autistic Child is Absolutely Terrified of Storms Now to learn excellent ways to help a child cope with overwhelming storm anxiety.

Comic Strip Conversations, on the other hand, seek to help the child learn the social rules he/she might otherwise find challenging. These conversations involve drawings with bubbles, which represent a conversation that can overlap (indicating the continuous nature of conversation).

For example, a child with ASD who might be offended by the lighthearted phrase "You can't catch me!" can learn through the comic that his/her friend is not demeaning his abilities in any way, but rather, trying to entice him/her into playing a fun game of tag.



Special Diets for Children with Autism

Various studies have proven that the food we eat can affect not only our bodies, but also our mood, behavior, and mental growth and development. For children with autism, there are certain diets that may help reduce symptoms and even improve overall functioning:

Gluten-Free and Casein-Free Diet

Gluten is a protein found in the seeds of wheat and grains such as barley and rye. It can be found in many products and is known to cause digestive problems in some people. Casein, on the other hand, is a type of protein present in dairy products. Like gluten, it can cause digestive issues.

To learn more about the basics, take a look at the piece called *Q&A Section: How Does Gluten Free Casein Free Diet Work and is it Effective?* published in *Autism Parenting Magazine*.

Diet Rich in Omega-3 fatty acids

Omega-3 fatty acids, which are found in fish oils as well as in supplement form, has been touted to help with brain development and function. The journal *Biological Psychiatry* revealed that based on previous studies, adding omega-3 fatty acids to a child's diet can help minimize hyperactive and repetitive behavior, especially among those with ASD. Other studies suggest that omega-3 fatty acids can also help boost a child's learning and social skills.

However, there are also studies that argue against the inclusion of omega-3 fatty acids into the diet of children with ASD. As such, before you give this diet a try, it would be wise to consult a doctor or a professional dietitian to help decide what is right for your child.

Feingold Diet

The Feingold Diet is a type of diet in which salicylate and artificial additives, such as synthetic colorings, flavorings, and preservatives, are removed from one's diet. It is based on the idea that some additives are harmful to our health. Salicylate, which is a natural plant toxin found in certain kinds of foods like citrus fruits and medicine like aspirin, is believed to have a similar effect as artificial additives.

Research on the effectiveness of the Feingold Diet is still underway, but the Feingold Association of the United States is claiming that the diet can be used for **treating autism** as well as other issues.

Yeast-Free Diet

A yeast-free diet consists of removing fermented foods, such as vinegar, barley malt, chocolate, and soy sauce, from the daily food intake of children with autism. It is based on the idea that yeast Candida albicans, which are present in our intestinal tract and mouth, can amplify the symptoms of autism. By refraining from eating food with high yeast content, children on

the spectrum can better cope with or even reduce the symptoms of autism.

Probiotics to treat digestive health

There has been a lot of research to suggest that there is a stong link between the brain and the digestive system. Improvements in mood and behavior can result from using probiotic supplements.

Animal-Assisted Autism Therapies

Interacting with animals can go a long way toward helping improve our mental and physical health and the quality of our lives. But for children with autism, its effects can be even more significant. Apart from serving as furry companions, animals can provide children with therapeutic benefits, too.

To learn more about the therapeutic benefits of animal-assisted therapies, please take a look at autism mom and dog trainer Michelle Huntting's piece called Pets Can Make all the Difference in the World of Autism published in *Autism Parenting Magazine*. The Lifetime Benefits of Spending Time in the Garden with ASD

Dogs

According to a study published in the *Journal of Alternative and Complementary Medicine*, dogs can have a positive effect on the social behavior and skills of children with autism. Senior researcher Francesca Cirulli of the National Institute of Health in Rome, Italy, and the rest of her research team found that children with ASD tend to be more responsive, engaged, and open to communicating during therapy sessions where a dog is present. In another study, they found that children, particularly boys, were friendlier and less aggressive toward their playmates when in the presence of therapy dogs.

However, Cirulli noted that it's also possible that a dog might have negative

effects on children with ASD. For instance, the animal could increase hyperactivity.

If you're wondering whether or not to adopt a dog, you might want to see how he/she reacts to a friend or neighbor's dog first before you proceed with your plan. Also, when adopting a canine companion, it would be wise to consider the needs of your child, as well as the personality and characteristic of the dog you want to adopt.

Cats

A well-chosen cat can also form a strong bond with children on the spectrum. For a firsthand success story of a young girl and her remarkable kitty, be sure to read Arabella Carter Johnson's piece published in *Autism Parenting Magazine* called *How an Amazing Cat Changed My Child with Autism's World*. Also, take a look at Amy KD Tobik's piece called *Special Kitty Encourages Young Girl with Autism to Interact*.

Horses and Therapeutic Riding

A study published in the *Journal of the American Academy of Child and Adolescent Psychiatry has found that riding horses, known as* ***hippotherapy,*** *can have a therapeutic effect on children with autism. According to the study, children involved in therapeutic horseback riding lessons are less irritable and less hyperactive. They were also more communicative and showed other improvements, as compared to those who didn't take lessons.*

To learn more, take a look at the article called *What is Hippotherapy and How Can it Help Children with Autism and ADHD* published in *Autism Parenting Magazine*.

Accessing horse riding lessons can be a challenge for some families. Fortunately, parents can purchase a hippotherapy device known as the

Relaxing Equine Simulator Therapy or REST. This device replicates the rhythmic motion of a horse's gait, which can help children with ASD relax and feel more at ease.

To learn more about REST, take a look at an informative article in *Autism Parenting Magazine* called *New Equine Simulator Therapy Provides a Unique Sense of Calm* by Will Turbow as he explains the many benefits of this form of therapy.

Sleep Interventions and Autism Therapies

Many children with ASD have trouble sleeping, and this lack of sleep can often lead to other problems, such as aggression, depression, hyperactivity, and increased behavioral problems. Fortunately, there are interventions, therapies, and solutions to help your child sleep soundly and peacefully:

Establishing Bedtime Routines

Forming bedtime routines can be very effective for children who have difficulty falling asleep or who lack quality sleep, especially among those with ASD. Children with autism are known to respond well to routines or a set of activities that are done repeatedly and consistently. These activities help send a signal to their brain that it's time to calm down, get ready for bed, and go to sleep.

Establishing bedtime routines is easy to implement. It doesn't usually require the assistance of a therapist since parents can do it on their own and in the comfort of their home. Also, it doesn't cost anything. However, to be effective, parents must take certain things into consideration. For instance, parents should start by selecting a reasonable time for bed that they and their child can follow without fail.

Also, activities prior to bedtime must be chosen carefully. They should be pleasant and relaxing. More importantly, they should match the needs and

interests of the child.

Faded Bedtime with Response Cost

In faded bedtime with response cost, parents first determine the actual time the child falls asleep after being placed in bed. Then, add an additional 30 minutes to the child's succeeding bedtime. When using this method of sleep intervention, it's important for parents to keep a "sleep log" so they can easily monitor the child's sleeping patterns.

For instance, when a parent puts a child to bed at 8 pm and he/she falls asleep at 8:30 pm, the child should be put to bed at 9 pm the following night. When the next bedtime is set at 9 pm, the child should be kept awake until 9 pm. This is to increase the likelihood that he/she will be tired by the time 9 pm rolls around.

In the event that the child falls asleep within 15 minutes of being put to bed, the bedtime should be faded back. This is done by reducing bedtime by 30 minutes the following night. Using the example above, the 9 pm bedtime should now be adjusted to 8:30 pm.

What if the child doesn't fall asleep within 15 minutes of the newly appointed bedtime? When this happens, he/she should be brought out of bed for about 15 minutes. During this time, any activity that promotes excitement or restlessness should be avoided. This is to motivate the child to go to sleep. Once the 15 minutes is up, the child should be placed back into bed. If he/she doesn't fall asleep again, this procedure should be repeated until he/she does.

Light Therapy

Also known as phototherapy, light therapy involves the use of artificial light to help children diagnosed with autism spectrum disorder to sleep better by aiding their body's natural circadian rhythm. It is also known to positively

affect the brain chemicals that are responsible for our mood. This is why light therapy can also be utilized to help reduce the symptoms of a seasonal affective disorder (SAD).

During light therapy, the child sits near a device called a light box. This box gives off a bright light that is similar to natural outdoor light. To be effective, a combination of three vital elements must be present: timing, light intensity, and duration. It also requires routine and proper scheduling. In addition, it's important to find a light therapy box that matches the child's lifestyle.

While light therapy doesn't necessarily cure SAD, depression, and insomnia, it can improve the health and well-being of the child. Aside from helping to ease the symptoms of insomnia and SAD, it can also boost the child's energy levels, improve his/her mood, and enhance the quality of life.

Scheduled Awakenings

Scheduled awakenings are another method that may help children with ASD who have difficulty remaining asleep. Again, with this method, it certainly helps for parents to have a sleep log for their child.

Using the information from the sleep log, parents determine the time their child usually wakes up. Then, about 30 minutes before that time, they wake the child up by gently touching or speaking softly to him/her. After waking the child up, the parents should let him/her fall back asleep.

This procedure should be repeated every night until the child is able to sleep undisturbed and without waking up through the night for the next five to seven days. Once the child is able to achieve this goal, parents can skip one night of awakenings per week until the child no longer wakes up in the middle of the night.

Sleep Training

Aside from having problems falling asleep, some children with ASD also experience difficulties staying asleep. Fortunately, there are various sleep training methods that can help parents deal with this issue.

To ensure a good night's sleep, experts say a parent should leave a child's bed, crib, or room without long, drawn-out words. If the child is still not sleeping, parents can wait a few minutes before going back to the room to check on him/her.

Once inside the room, parents can touch or rub their child. However, these gestures should not last more than a minute. They can also gently but firmly reassure the child that it's OK for him/her to go back to sleep. Afterward, parents must leave the room until the need to check on the child arises.

Like most treatments for autism, sleep training should be done consistently. However, many experts agree that this method can be harder on the parents than on the child, as it could take a couple of hours for the child to fall to sleep, especially during the first few nights. Also, there's a possibility that the child's behavior could get worse for a few days before showing significant improvement. To make sleep training much easier to accomplish, parents can put up a gate or barrier at the child's bedroom door. This will remind him/her that it's time for bed and, therefore, the child must stay inside the room and go to sleep.

The Bedtime Pass

If the child refuses to go to sleep and leaves his/her bedroom, one type of intervention that may help is the use of a bedtime pass. With this method, parents provide the child with a pass that will allow him/her to leave his/her bedroom briefly. This pass can be a small index card or any token with the child's name written on it.

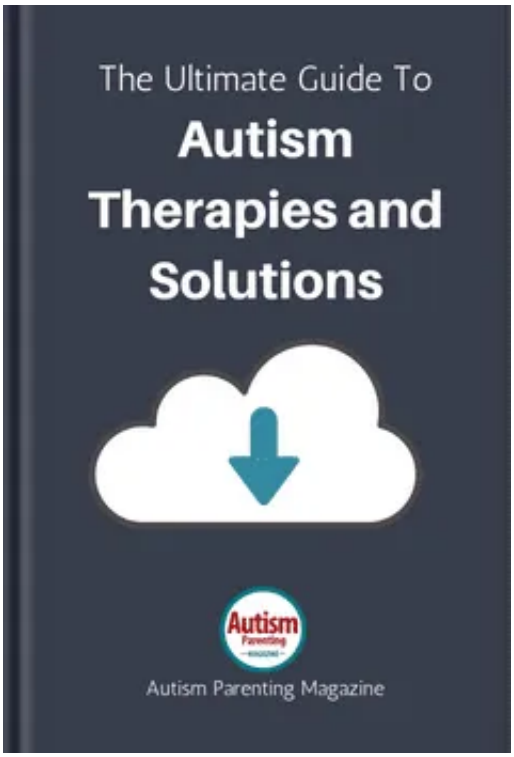
The bedtime pass must always be used to fulfill a specific purpose. For example, the child should use it for getting a drink or going to the bathroom.

Once the bedtime pass has been used, it should be surrendered to the parent until the following night. If the child displays problem sleep behavior after the pass has been given to him/her, the parent may revoke it during the next bedtime.

For an innovative approach to helping a child with autism sleep without the need for medication, please take a look at the piece by Aditi Srivastava, SROT called *Simple Ways to Help Your Child with ASD Sleep Without Medicine* published in *Autism Parenting Magazine*.

For additional advice on helping a child with autism get the rest he/she needs, take a look at a piece written for *Autism Parenting Magazine* by Angelina M., MS, BCBA, MFTI called *Help: My Child Doesn't Sleep*.

Studies indicate lighting and color are important elements in creating a comfortable space for a child with autism. Take a look at interior designer Carolyn Feder's piece published in *Autism Parenting Magazine* called *Top Ideas to Create a Calming Sensory Bedroom Space* for expert advice on creating the ideal space for your child.



Conclusion

These are just some of the therapies and interventions available for children with ASD today. The good news is that various research and studies are being done every day to explore more ways to improve the challenges of autism spectrum disorder.

As mentioned previously, it's imperative you complete thorough research before using a particular intervention or therapy. And since no two children with ASD are exactly alike, a therapy that works for one child may not work for another. As such, you should learn from the experiences of other parents whose children have developmental needs similar to those of your child. This way, it will be easier for you to determine the most successful **treatment for autism** for your child.

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