



THE INSPIRED COMMUNITY PROJECT

Request for Proposals

The Impact of a Peer-Supported Approach to
Early Intervention with Children 2-3 Years Old

April 2023

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Request for Proposals for Research

Sponsored by The Inspired Community Project

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Introduction

The Inspired Community Project is a non-profit research organization that was established in 2021 with the aim of addressing the unequal access to special education instruction, resources, and career opportunities in the Bronx, and the wider New York City area. The organization is deeply committed to creating a sustainable foundation for future generations within the special education community through research, empowering families as advocates, and in the community. Through its applied research in high-quality training, hands-on support, and people-first focus, The Inspired Community Project envisions a future where all people, communities, and boroughs have equal access to special educational services and resources. The organization's ambitious applied plans include graduating at least 40 Registered Behavior Technicians per year, providing 36,000 hours of Applied Behavior Analysis, engaging families in advocacy coaching, and creating local internship opportunities for those seeking degrees in education and therapeutic fields. In addition to its practical goals, The Inspired Community Project is committed to advancing research in the field of special education with a view to improving the diagnosis, and treatment of developmental disabilities such as autism. With a clear focus on equity, advocacy, and empowerment, The Inspired Community Project is committed to building a more equitable special education system in New York City through robust applied research in the field of early childhood special education.

The focus of this research is on the impact of a Peer-Support Approach to Early Intervention, the initial phase of this research will be run at least twice for a 12-week cycle within the financial year July 2023 - June 2024 on students who attend the Inspired Community Project Bronx-based Early Intervention Center.

The Inspired Community Project's Peer-Supported Approach to Early Intervention with Children 2-3 Years Old

Early intervention is crucial for children with Autism Spectrum Disorder (ASD) to improve their developmental outcomes. Peer-supported interventions have been shown to have positive effects on social communication skills in children with ASD. However, there is a need for further research on the impact of peer-supported early intervention on other areas of development, such as cognitive and adaptive skills, and to determine the effectiveness of this approach in children with different levels of ASD severity.

Research Questions:

1. What is the impact of a peer-supported early intervention program on social communication skills in children with ASD?
2. What is the impact of a peer-supported early intervention program on cognitive skills in children with ASD?

3. What is the impact of a peer-supported early intervention program on adaptive skills in children with ASD?
4. How does the impact of the intervention differ based on the severity level of ASD (Level 1, Level 2, and Level 3)?
5. What is the impact of the intervention on parent and teacher-reported outcomes?

Previous Research

Autism Spectrum Disorder (ASD) is a developmental disorder that affects social communication and interaction, as well as behavior and interests. Children with ASD often experience challenges in forming and maintaining relationships with their peers, which can impact their overall social development and well-being. Peer-based interventions have emerged as a promising approach for improving the social skills and interactions of children with ASD.

Peer-mediated interventions involve teaching typically developing peers to interact and play with children with ASD in ways that support their social and communication development. The goal of this approach is to create a positive and supportive social environment for children with ASD, while also fostering social competence and empathy in their typically developing peers.

There is a growing body of research that supports the use of peer-based intervention for children with ASD. For example, a randomized control trial conducted by Odom et al. (2015) found that children with ASD who received a peer-mediated intervention in inclusive preschool classrooms showed significant improvement in social communication skills compared to those who did not receive the intervention. Similarly, a meta-analysis of 25 studies by Whalon et al. (2015) found that peer-mediated interventions were effective in improving social skills and reducing problem behaviors in children with ASD.

Other studies have also shown the effectiveness of peer-mediated interventions for children with ASD. Kasari et al. (2012) conducted a randomized control trial and found that a peer-mediated intervention improved social communication skills in preschool children with ASD. Schreibman et al. (2015) conducted a randomized control trial with elementary school children with ASD and found that a peer-mediated social skills intervention led to significant improvements in social communication skills. Locke et al. (2010) also found that a peer-mediated intervention improved social communication skills in elementary school children with ASD.

Overall, these studies provide strong evidence for the effectiveness of peer-mediated intervention in improving the social skills and interactions of children with ASD. This approach has several advantages, such as promoting positive social interactions, fostering empathy and understanding in typically developing peers, and creating a more inclusive social environment for children with ASD.

Peer-mediated intervention is also relatively easy to implement and can be integrated into existing educational settings, such as inclusive classrooms or after-school programs. This makes it a practical and cost-effective approach for improving the social development of children with ASD.

In conclusion, peer-based intervention has emerged as a promising approach for improving the social skills and interactions of children with ASD. The research supports the effectiveness of this approach, which involves teaching typically developing peers to interact and play with children with ASD in ways

that support their social and communication development. Peer-mediated intervention has several advantages and can be easily integrated into existing educational settings, making it a practical and cost-effective approach for improving the social development of children with ASD.

The Current Opportunity: Funding for the Initial Phase of Evaluation

The Inspired Community Project is thrilled to announce the launch of our new research project aimed at examining the benefits of short-term, peer-based interventions for improving social, communication, play, and self-help skills among children. We are committed to conducting rigorous and high-quality research to assess the impact of these interventions on children's development and well-being.

To support this critical work, we have already secured funding from NewSchool Ventures, The Butler Foundation and M&T Bank. We are actively seeking additional funding sources to ensure the success and sustainability of this project. With adequate funding, we will be able to partner with qualified researchers and practitioners, purchase necessary equipment and materials, and compensate study participants for their time and effort.

Furthermore, as the research will take place at The Inspired Community Center, located in the Bronx, we have access to the necessary space and resources to conduct the intervention and recruit a potential pool of participants. We believe that this research has the potential to make a significant impact on the lives of children and families in New York City, and we are committed to pursuing this opportunity with the highest level of professionalism and integrity.

Intervention

The Early Start Denver Model (ESDM) is an evidence-based early intervention program designed for children with autism spectrum disorder (ASD) between the ages of 12 and 48 months. It is a comprehensive, play-based intervention that incorporates behavioral, developmental, and relationship-based approaches.

When used as a peer-supported intervention, the ESDM can be implemented in a group setting where children with ASD are paired with typically developing peers. These peers act as social models for the children with ASD, providing opportunities for them to learn and practice social communication skills.

In this setting, the ESDM is adapted to include activities that encourage peer interaction, such as turn-taking games, joint attention activities, and shared play experiences. The typically developing peers are trained in ESDM techniques and work closely with the ESDM therapist to facilitate positive social interactions between the children. This also allows typically developing peers to model desired behaviors and skills.

By using the ESDM in a peer-supported intervention, children with ASD have the opportunity to learn social skills in a naturalistic setting with peers who are close in age and development. This can lead to improved social skills, increased motivation to interact with others, and decreased social anxiety.

Additionally, the peer-supported ESDM intervention can also benefit typically developing peers by fostering empathy, compassion, and understanding of individuals with ASD. It can also help to reduce stigmatization and increase inclusion in the classroom and community.

Research Partner Scope of Work

The participants will be recruited by the Inspired Community Project from children who attend the Inspired Community Project Center in the Bronx during the 2023-24 academic year. The design of the research will be proposed by the research partner and refined in collaboration with The Inspired Community Project staff. The research partner will take the lead in ensuring that the outcome of the study is disseminated within the field to as many professionals and interested parties as possible.

The questions we envision the research addressing are:

- Does the ESDM intervention improve the communication skills of children with ASD compared to a control group who receive a different intervention or no intervention at all?
- Does the ESDM intervention improve the social skills of children with ASD compared to a control group who receive a different intervention or no intervention at all?
- Does the ESDM intervention improve the play skills of children with ASD compared to a control group who receive a different intervention or no intervention at all?
- Does the ESDM intervention improve the self-help skills of children with ASD compared to a control group who receive a different intervention or no intervention at all?
- What is the feasibility and acceptability of implementing the ESDM intervention in a community setting?
- What are the factors that influence the effectiveness of the ESDM intervention for children with ASD, such as age, severity of symptoms, and family involvement?
- How does the ESDM intervention affect the long-term outcomes of children with ASD, such as academic achievement, employment, and quality of life?
- What are the potential cost-benefits of implementing the ESDM intervention for children with ASD, in terms of healthcare costs, educational outcomes, and societal impact?

The research partner to interpret the results of the pre-post or pre-post comparison, as well as the raw data generated by the intervention. The Inspired Community Project's research and program staff will be conducting activities in the financial year July 2023 - June 2024 that will feed into the design of the Phase 1 research including:

- **Monthly meetings with the research team:** with clinicians and supervisors involved in the research project.
- **Data Analysis of the results, and a Brief that summarizes the data outcome:** this can be discussed with the data collection team and the final Brief should be presented within 4 weeks of the completion of the intervention, and should include data visualization.

Research Partner Deliverables

The following list of deliverables is designed to ensure strong communication and collaboration between the research partner and The Inspired Community Project staff.

- Monthly Meetings with The Inspired Community Project staff during the design phase
- Weekly updates during the data collection period
- Monthly progress reports
- Summary of data collection at the end of the data collection period
- Preliminary analyses
- Final report that includes analysis of district data, if available

Timeline of Intervention

The Early Start Denver Model (ESDM) is an evidence-based early intervention program designed for young children with autism spectrum disorder (ASD). It is a comprehensive program that integrates developmental and behavioral approaches to promote communication, socialization, and learning in young children with ASD. The 12-week intervention plan using ESDM:

- Weeks 1-2: Assessment and goal setting
Conduct an assessment (Appendix 1) to evaluate the child's current skills and challenges in various areas (e.g., communication, socialization, and play skills).
Based on the assessment results, identify specific goals and objectives for the child to work on during the intervention.
- Weeks 3-4: Relationship building and joint attention
Focus on building a positive relationship between the children and the therapist.
Teach the child to engage in joint attention activities, such as pointing and following a point, as a foundation for communication and social interaction.
- Weeks 5-6: Communication skills
Teach the child to use a variety of communication strategies, such as gestures, sounds, and words, to express their needs and wants.
Use visual supports, such as pictures and symbols, to facilitate communication.
- Weeks 7-8: Play skills and socialization
Teach the child to engage in imaginative play and play with others.
Use play activities to facilitate socialization and communication.
- Weeks 9-10: Self-help skills and daily routines
Teach the child to participate in self-help skills, such as dressing, feeding, and toileting.
Focus on teaching the child to follow daily routines and participate in activities of daily living.
- Weeks 11-12: Generalization and maintenance
Focus on generalizing the skills learned during the intervention to other settings and situations.
Work with the child's caregivers to develop a plan for maintaining and continuing the child's progress beyond the intervention period.

Throughout the intervention, it's important to track the child's progress, provide positive reinforcement for desired behaviors, and adjust the intervention as needed based on the child's individual needs and progress. Additionally, it's important to involve the child's caregivers in the intervention and provide them with training and support to continue working on the child's skills beyond the intervention period.

The control group, are those participants who do not receive the experimental intervention or treatment that is being studied. In the context of an Early Start Denver Model (ESDM) intervention study, the control group would consist of children who are similar to the children in the experimental group in terms of their diagnosis (i.e., autism spectrum disorder), age, and other relevant characteristics, but

who do not receive the ESDM intervention. Instead, they would receive no intervention at all during the 12 weeks, as an ethical consideration after the 12-week cycle the students in the control group will receive the intervention during the next cycle.

Eligibility

The Inspired Community Project seeks a research agency that can provide a partnership in the development of the research agenda, as well as the analysis and dissemination of the results. The Inspired Community Project will be responsible for the implementation of the intervention and the recording of the raw data.

The Inspired Community Project has a demonstrated deep commitment to diversity, equity, inclusion, and belonging in our internal functioning and work with staff, our engagement with educators, and our selection of partners. We seek partners who are committed to understanding the lived experiences of people from historically marginalized backgrounds and working to mitigate the impact of oppressive systems. Successful applicants will demonstrate that their proposed teams have the following knowledge, experience, and skills:

Scholarly expertise

- Substantive knowledge and experience in planning a proposal, structuring implementing, and disseminating results to applicable fields:
 - The ability to meteor during the developmental phase of the research project
 - Guidance during implementation phases to ensure that the research meets viability standards for a randomized control trial project
 - Support with the dissemination of results so that they have the most impact in the field
- Evidence of scholarly contributions to the field through peer-reviewed papers, conference presentations, and other dissemination avenues
- Using culturally responsive evaluation practices
- Designing and carrying out an evaluation of the data collected
- Create reports of the collected data
- Developing measures of fidelity and tracking implementation fidelity
- Obtaining research approval from participating districts

Other requirements

- Commitment to Equity: a clear demonstration that equity is centered in both strategy and practice for the evaluation and more generally in the organization
- A track record of collaborative engagements with research sponsors and partners

Proposal Guidelines:

Qualifications

- Please identify the specific project staff proposed to work on this study and the roles that they would play.
- Please describe the team members' experience with the following activities:
 - Applying an equity lens in evaluation or research studies
 - Show a Plan for Mentoring TICP a a researcher organization
 - Conducting a design task that also includes primary data collection to inform the design of a follow-on study
 - Obtaining district and IRB research approvals
 - Disseminating findings about research evidence
- Please describe examples of effective working partnerships with non-profit organizations and how the team anticipates working with The Inspired Community Project specifically.

Budget

- The amount of time allocated by personnel, and the amount of time each researcher would spend on each task. To ensure sufficient senior leadership time, we expect that the Study Director would spend at least 20% time on the project.
- Direct costs such as stipends for subjects, travel, consultant fees, supplies, etc. We would require a launch meeting in-person or via zoom to discuss this, as well as ongoing meetings at significant stages of the project.

Appendices

Please include the following in an appendix (these pages do not count towards the total number of pages):

- Timeline with major research activities (Be sure to include the timing for obtaining research permissions from districts and IRB approval.)
- Budget, including the number of days allocated to all proposed team members
- Curriculum Vitae of all project personnel

Appendix 1: Pre-Assessment

Child's name		Date	/ /
Assessor's name		Assesment	Pre / Post

Communication Skills

1. Does the child use words to communicate?	Yes	No
2. Does the child use gestures (e.g., pointing, waving) to communicate?	Yes	No
3. Does the child use any vocalizations (e.g., babbling, making sounds) to communicate?	Yes	No
4. Does the child use any vocalizations (e.g., babbling, making sounds) to communicate?	Yes	No
5. Does the child respond to their name when called?	Yes	No
6. Does the child follow single-step related instructions (e.g., "Come here")?	Yes	No

Social Skills

7. Does the child make eye contact?	Yes	No
8. Does the child smile or laugh in response to social interactions?	Yes	No
9. Does the child engage in joint attention (e.g., pointing to objects, following a point)?	Yes	No
10. Does the child show interest in playing with others?	Yes	No
11. Does the child imitate others' actions or vocalizations?	Yes	No

Play Skills

12. Does the child engage in symbolic play (e.g., pretending to feed a doll)?	Yes	No
13. Does the child engage in imaginative play (e.g., pretending to be a superhero)?	Yes	No
14. Does the child engage in repetitive or stereotyped play (e.g.,	Yes	No

spinning objects, lining up toys)?		
15. Does the child initiate play with others?	Yes	No
16. Does the child take turns during play?	Yes	No

Self Help Skills		
17. Does the child dress themselves with minimal assistance?	Yes	No
18. Does the child feed themselves with minimal assistance?	Yes	No
19. Does the child use the toilet independently?	Yes	No
20. Does the child brush their teeth independently?	Yes	No
21. Does the child follow a simple routine (e.g., washing hands before meals)?	Yes	No

Overall Functioning		
22. Does the child have any additional medical or behavioral diagnoses?	Yes	No
If Yes please state: _____		
23. Does the child have any sensory sensitivities (e.g., to loud noises, bright lights)?	Yes	No
If Yes please state: _____		
24. Does the child have any challenging behaviors (e.g., aggression, self-injury)?	Yes	No
If Yes please state: _____		
25. What is the child's current level of adaptive functioning (CARS score)?	_____	

References

- Kasari, C., Rotheram-Fuller, E., Locke, J., & Gulsrud, A. (2012). Making the connection: randomized controlled trial of social skills at school for children with autism spectrum disorders. *Journal of Child Psychology and Psychiatry*, 53(4), 431-439.
- Locke, J., Williams, J., Shih, W., & Kasari, C. (2010). Characteristics of socially successful elementary school-aged children with autism. *Journal of Child Psychology and Psychiatry*, 51(7), 814-824.
- Odom, S. L., McConnell, S. R., McEvoy, M. A., Peterson, C., Ostrosky, M., Chandler, L. K., ... & Favazza, P. C. (2015). Randomized comparison of comprehensive and targeted interventions for prekindergarten children with autism spectrum disorder. *Journal of Consulting and Clinical Psychology*, 83(3), 488-499.
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- Whalon, K. J., Conroy, M. A., Martinez, J. R., & Werch, B. L. (2015). Peer-mediated interventions to increase social interaction skills for children with autism spectrum disorders: Consideration of peer expectancies. *Focus on Autism and Other Developmental Disabilities*, 30(2), 90-101.