Autistic Spectrum Disorders within Early Childhood Educational Settings: The Role of Administrators.

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Why this topic?

A simple question with an alarming answer?

A US study completed in 2009 revealed that the average age of formal ASD diagnosis was 5.7 years of age (Shattuck, et al, 2009).

- Why is this alarming.
  - Children who receive intensive services early have the best outcomes.
  - Missing a year of intervention services is a lifetime for a child with an ASD.
  - Like other disorders (Dyslexia) intervention efforts have the greatest chance of helping to ameliorate symptoms when they are intensive and started early.

The Frontline of ASD Identification

- Professionals within EC settings and pediatricians have a duty to be understand the signs and symptoms of ASDs.

- This is especially important due to the that the there is a clear link between when children start treatment and their general developmental outcomes.

- In short, kids who receive early intervention tend to have less severe presentations of the disorder.

Overview of talk

- What is an ASD
  - Core Deficits
  - Description of some of the most common symptoms.
- Role of the administrator
  - Recognize, Report, Respond
  - Provide an environment that encourages screening
- Supporting Teachers

What is an ASD?

- Current Classification: The **autism spectrum** or **autistic spectrum** describes a range of conditions that were previously classified as <u>Pervasive Developmental Disorders</u> in the <u>Diagnostic and Statistical Manual of Mental Disorders</u> (DSM-IV).

- Prior to the release of the DSM-5 the Pervasive Developmental Disorders included
  - Autistic Disorder
  - Asperger's Disorder
  - Pervasive Developmental Disorder, Not Otherwise Specified
  - Childhood Disintegrative Disorder
  - Rett Syndrome

  - In the DSM-5 clearer, the labels were consolidated into Autism Spectrum Disorders

The DSM-5 sought clarity by.....

- The use of qualifiers.
  - ASD with or without accompanying intellectual impairment
  - With or without accompanying language impairment
  - Associated with a known medical or genetic condition or environmental factor
- Severity Specifiers
  - Requiring very substantial support (e.g., severe deficits in verbal and nonverbal communication, extreme difficulty coping with change).
  - Requiring substantial support (e.g., social impairments apparent even when supports are in place, repetitive behaviors apparent to casual observers).
  - Requiring Support (e.g., difficulty initiating social interactions, difficulty switching between activities).

Core Deficits (DSM-V)

Social Communication Deficits

Restricted and Repetitive Patterns of Behavior
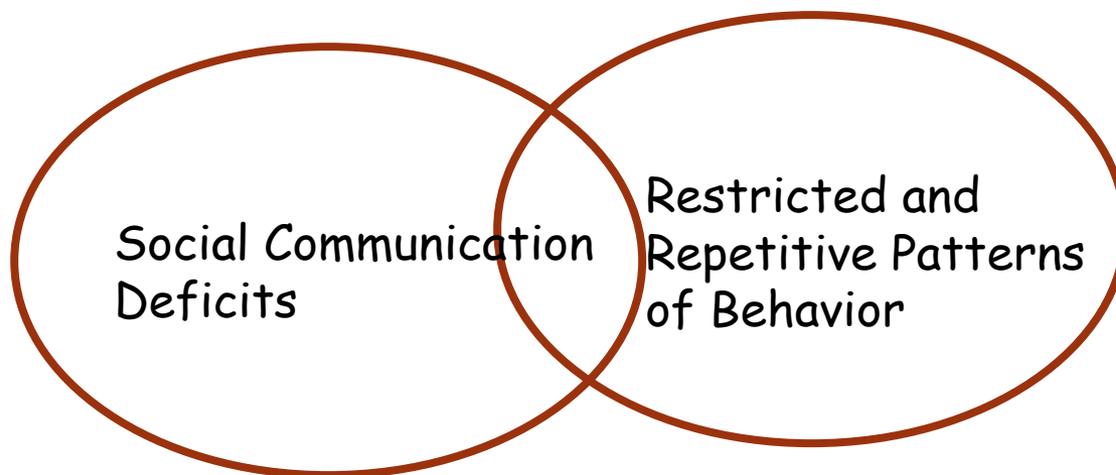
Examples of Social Communication Deficits
1. Deficits in social-emotional reciprocity
2. Deficits in nonverbal communication behaviors used for social interaction
3. Deficits in developing, maintaining, and understanding relationships

Examples of Restricted and Repetitive Patterns of Behavior
1. Stereotyped or repetitive motor movements, use of objects or speech
2. Insistence on sameness, inflexible adherence to routines, or ritualized patterns of behavior.
3. Hyper-or hyporeactivity to sensory input or unusual interest in sensory aspects of the environment (e.g., indifference to pain, adverse reaction to certain sounds).

Core Deficits-DSM-IV
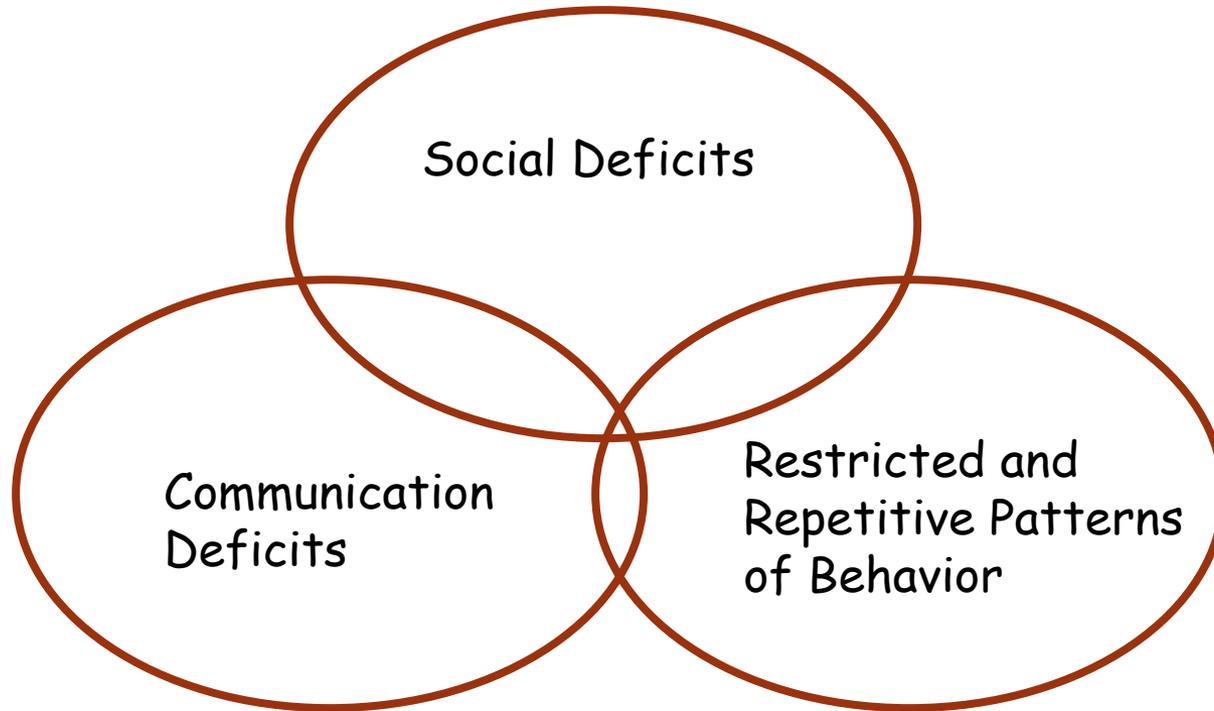
Difficulty in Social Interactions

- Persistent deficits in social communication and social interactions across multiple contexts
  - Deficits is social-emotional reciprocity, failure to initiate or respond to social interactions.
  - Deficits in the use of multiple nonverbal behaviors (e.g., eye gaze, facial expression, body posture, and gestures to regulate social interaction).
  - Deficits in developing, maintaining, and understanding relationships (e.g., not being able to adjust to a social context, inability to engage in imaginative play or making friends, absence of interest in peers).

Qualitative Impairments in Communication

- Marked impairment in ability to initiate or sustain conversation.
- Stereotyped and repetitive language
  - Echolalia
  - Repeating scripts from television, movies, music, or videos
  - In older children vocal tone and content can be overtly odd/unusual
- Lack of varied spontaneous make believe play or social imitative play.

Restricted and Repetitive Patterns of Behavior

- Preoccupation or obsessive interest in one or more stereotyped behaviors (e.g., dinosaurs, vacuum cleaners, Titanic).
- Inflexibly adhering to specific nonfunctional routines or rituals (mac and cheese).
- Stereotyped and repetitive motor mannerisms
  - Hand flapping, finger flapping, complex whole body movements.
- Persistent preoccupation with parts of objects.
- Insistence on sameness (e.g., extreme distress at small changes, difficulties with transitions, rigid thinking patterns, need to eat same food or take same route every day).

Other areas that MIGHT be impacted by ASD diagnoses.

- Attention
- Anxiety
- Sensory-Integration
- Digestive Issues

Prevalence:

- The Centers for Disease Control and Prevention (2012) estimated that 1 in 88 children in the United States has been identified as having an autism spectrum disorder (ASD)
- Large scale study that evaluated data from 14 communities.
- Associated Findings: Autism spectrum disorders are almost five times more common among boys than girls – with 1 in 54 boys identified.

The Administrator's role in supporting teachers and children ….

- Administrators must help prepare teachers to RECOGNIZE, REPORT, and RESPOND to children who MIGHT be demonstrating symptoms of an ASD…….

- Recognize… Administrators have a duty to ensure that teachers know general developmental milestones (first). This will allow a classroom teacher to understand when a child is not meeting milestones and could potentially be at risk for some type of learning difference or ASD.

- Administrators have a duty to provide teachers with quality PD to help them recognize the warning signs of an ASD.

- Administrators have a duty to ensure that children at

Screening Tools

- Screening tools can help administrators and teachers delineate worrisome behaviors.

- Parents who have concerns about their child's behavior can use online tools (e.g., **Modified Checklist for Autism in Toddlers, Revised with Follow-Up).**

- This no cost screener is available online at https://www.m-chat.org/mchat.php

Recognition: NICHD Red Flags for Autism_Social

Social
The child does not respond to his/her name.
The child doesn't point or wave "bye-bye."
The child doesn't know how to play with toys.
The child doesn't smile when smiled at.
The child has poor eye contact.
The child seems to prefer to play alone.
The child gets things for him/herself only.
The child is very independent for his/her age.
The child seems to be in his/her "own world."
The child seems to tune people out.
The child is not interested in other children.

Recognition: NICHD Red Flags for Autism_Langugae

Language
The child cannot explain what he/she wants.
The child's language skills are slow to develop or speech is delayed.
The child doesn't follow directions.
At times, the child seems to be deaf.
The child seems to hear sometimes, but not other times.
The child used to say a few words or babble, but now he/she doesn't.

Recognition: NICHD Red Flags for Autism_ Restrictive and Repetitive Patterns of Behavior

Restrictive and Repetitive POB
The child throws intense or violent tantrums.
The child has odd movement patterns.
The child is overly active, uncooperative, or resistant.
The child gets "stuck" doing the same things over and over and can't move on to other things.
The child does things "early" compared to other children.
The child walks on his/her toes.
The child shows unusual attachments to toys, objects, or schedules (i.e., always holding a string or having to put socks on before pants).
Child spends a lot of time lining things up or putting things in a certain order.

Why is language such an important indicator of developmental progress……

- The ability to use language makes us human.
- We are inherently social beings and from the dawn of time humans have developed social systems that allow us to live better lives.
- Language is also tangible (i.e., something that is fairly easy for parents to see and categorize).
  - For instance, a child who has no language at age 3 is easy to pick out in a crowded classroom of 12 other youngsters. In contrast, it is more difficult for EC professionals to rate the quality of social gestures or eye gaze.

The 2ⁿᵈ R--- Report

- Report… If universal screening of language and/or observation reveal that a child is at risk, it is imperative that administrators and teachers take steps to initiate a more comprehensive evaluation.
  - Centers and districts vary in terms of the processes that are used to make a referral.
  - Imperative that administrators understand the ways to get children evaluated in their community.
- Unfortunately, procedures vary by community and the districts/ECI programs involved.

Report (the 2ⁿᵈ R).

- Once symptoms have been recognized, administrators have a duty to help teachers provide other professionals with information required to initiate and complete some type of evaluations.
  - For example, children between the ages of birth and 36 months can receive services from an Early Childhood Intervention Program.
  - Children older than 36 months are served within public schools.
- Although I understand that school districts are overwhelmed and understaffed, administrators have a duty to ensure that children who are suspected to have an ASD are evaluated by appropriate professionals (e.g., pushing through paperwork required to start the evaluation process within Special Education services).
- Administrators also have a duty to take concerns expressed by teachers and parents seriously.

Report (the 2ⁿᵈ R) continued.

- Administrators and teachers might be asked to complete checklists, participate in interviews, provide work samples, and describe the behaviors of concern surrounding a particular child.

- An observation of the child within the classroom might be scheduled.

- When completing checklists, specificity is critical.
  - Vague comments are NOT helpful (e.g., Jimmy seems kind of odd).
  - Administrators should encourage teachers to provide specific examples of tangible behaviors that can help diagnosticians and school psychologists accurately assess children with ASDs (e.g., Jimmy rarely uses language in the classroom, he actively avoids other children, walks on his toes, covers his ears when the bell rings, and occasionally flaps his hands).

What happens after a referral has been made by an administrator in a public school setting?

- The specific measures used within an evaluation vary by community. However, there are some similarities.
- Cognitive Evaluation (IQ)
  - Wechsler (WPPSI-IV, Stanford-Binet-5)
  - Another measure of nonverbal behavior (e.g., Leiter International Performance Scale-Third Edition, Comprehensive Test of Nonverbal Intelligence).
  - Evaluation of Adaptive Behavioral Functioning (e.g., Vineland Adaptive Behavior Scales, Adaptive Behavior Assessment System).
  - Assessment of Language Functioning (e.g., CELF-Preschool-2, EOWPVT, PPVT).
  - Assessment of symptoms related to ASDs (e.g., ADOS, ADI-R, CARS, etc.).
  - General behavior questionnaires (e.g., CBCL, BASC).

What is so important about an evaluation anyway?

- While it is true that many evaluations seem unnecessary, at the minimum a FIE evaluation serves as a gate-keeping function (i.e., opens the door for specialized services).
- However, a good evaluation provides the following…
  - Accurate description of the developmental levels
  - Provides insight into the types of strategies that might work to motivate a child with an ASD
  - Provides the ARD committee with specific recommendations surrounding the type of educational environment that would be

The 3rd R- Responding.

- Responding… Administrators have a responsibility to help teachers develop skills that allow them to be successful when working with students who have ASDs.

- Administration has a responsibility to assist teachers in implementing educational plans that are put forth in the child's IEP.

Responding:

- Administrators need to provide teachers with the training necessary to respond appropriately to children with ASDs.
- While I recognize that it might take a teacher his/her entire career to become comfortable and effectively work with children with ASDs, administrators have to provide teachers with tools that they can use within the classroom.
- This might occur by providing the classroom teacher with the extra support of an in-classroom aide (prior to the evaluation or ARD meeting).
- In this section of the talk, we will talk about some general guidelines (and conclude with some more specific approaches).

Administrators: Foster collaboration.

- Once a child is identified and a comprehensive evaluation has occurred, administrators should work to ensure that teachers have time to learn from and collaborate with professionals.
  - Speech Therapy
  - Occupational Therapy
  - Social Skills Groups
  - Behavioral support

Administrators: Help teachers understand the range of behavior within ASDs.

- Children with ASDs run the gamut from being nonverbal and self-aggressive to quirky/unusual.
- Important for all to remember the idea that it is spectrum of behavior in almost a literal sense.
- In general, children with severe forms of the disorder that might include self aggression or significant behavior regulation difficulties are likely to be enrolled within a self-contained SPED classroom placement.
- However, that still leaves an incredible range of children who can be served within the regular classroom setting with differing levels of support.
- Teachers have to be provided with the skills necessary to be successful intervening with the type

Administrators and Teachers need to learn to understand the perspective of a child with an ASD.

- One of the things that I have always try to do when assessing a child with an ASD is to understand how they experience the environment.
- While certainly not an exact science, I take time to see if how a child……
  - Approaches others in social contexts
  - Deals with environmental stimuli (e.g., aversion to lights, sounds, etc.).
  - Responds to a touch (e.g., can they handle hand over hand demonstrations, do they allow you to touch their chin to raise their chin for eye contact).
  - How does a child comfort themselves when stressed
  - What motivates the child (praise, tangible rewards, being left alone, ability to engage in some form of self- soothing behavior).
  - Even if you're not an expert at some of the approaches used for children on the spectrum, understanding how the child perceives the environment can help you be successful.

Administrators provide teachers with the ability to learn from other professionals.

- Provide the classroom teacher with time to interact with speech therapists, occupational therapists, or behavioral consultants.
- Administrators need to provide the teacher with opportunities for training within the broader organization.
  - Training utilizing District Resources, Educational Service Centers, or arranging for teachers to attend more specialized training (e.g., local Autism Organizations).
- Ensuring that teachers of children with ASDs have enough planning time to communicate with parents and professionals is a must.

Administrators actively encourage/require teachers to participate in quality training.

- Training opportunities are available within school districts, education services centers, national and local groups (e.g., FEAT, Autism Speaks).
- Teachers who learn skills now have the potential to intervene with current and future students (investment in the future).
- Training needs to be ongoing.
- Allowing teachers to participate in ongoing training is likely to reduce teacher turnover.

Administrators help teachers learn from the family.

- Never underestimate the power and knowledge of a mother of child with Autism.
- Administrators help teachers form relationships with parents.
  - Parents are often able to provide a classroom teacher with insights that will help a child be more successful in the classroom (e.g., what motivates the child, ways to redirect/soothe when frustrated, things to avoid, etc.).
- Administrators should be a facilitator and arrange for ongoing opportunities for teachers to communicate with parents in non-threatening environments (i.e., Not ARD meetings).

Administrators can help ensure that teachers

- Establish and maintain a consistent classroom routine.
  - This is incredibly important as many children on the spectrum have difficulty adapting to change.
  - Children with ASD will benefit from visual schedules which allow a tactile response (e.g., moving a stick or picture symbol with Velcro to the next scheduled activity).

Administrators can help a teacher control the classroom environment.

- Children with ASDs often struggle tolerating different sensory input (i.e., called sensory integration difficulties/disorder). Therefore, administrators can attempt to mitigate the impact of environmental stimuli within the classroom.
  - Keep number of children within classroom to a minimum.
  - Keep noise levels and distractions to a minimum.
- Administrators should always make reasonable attempts to accommodate children's sensory issues.

Administrators should recognize when teachers need additional support.

- Maintaining a child with even a mild form of ASD in a classroom with typically developing children can be incredibly difficult (especially for teachers who lack appropriate training).

- Administrators should ensure that all teachers are provided training for working with children with ASD versus making one teacher the "go-to" teacher for a child who is suspected of being on the Autism Spectrum.

- Administrators need to make sure the learning needs of the other children in the classroom are being met.

with children with mild forms of ASDs

- Concrete language should be used when making requests to children with ASDs.
- Requests presented with pictorial supports have a better chance of being followed.
- Lengthy instructions should be avoided (think Charlie Brown's teacher).
- Use clear directives and avoid questions that could be answered with "no"
  - "We are going to stop and wash our hands now" versus "Do we need to wash our hands now?"

Make establishment of eye contact important

- Children with ASDs struggle establishing eye contact and joint attention.
- Essentially, all program staff (admin, teachers, aides, and support staff) have a responsibility to work to encourage eye contact of children with ASDs.
- In my clinic, I will NOT provide instructions to children who do not give me some indication that they are looking at me.
  - They might not look at me the entire time that I am reading instructions for tasks, but I encourage them to look at me to the best of their ability.
- Looking at a speaker is typically a skill that comes naturally. Children with ASDs need to be taught to engage in this particular behavior.

Encourage teachers to be proactive in terms of gaining knowledge

- Administrators should encourage teachers to soak up knowledge from other service providers.
  - Administrators should make sure that teachers learn from speech or occupational therapists (e.g., "what types of classroom activities can I use that will further the goals of your therapy?").
  - What specific strategies or techniques have therapists found helpful in working with a student with an ASD
  - Administrators actively encourage teachers to seek out training opportunities.

But there is hope….

- Districts, administrators, parents, and professionals are taking the lead in attempting to provide services that are of high quality.
- For instance, school districts are collaborating more with private practitioners who are training teachers/staff to implement high quality programs.
- Example… therapists who conduct social skills groups for children with high functioning ASDs in the private sector actually working for districts on a contract basis.
- In addition, parents are becoming increasingly savvy.

Hope…..continued

- As most of us understand, change can be hard within school districts due to the large bureaucracy.

- While not a cure all, charter schools have the potential to change the landscape for children with ASDs.

- Finally, districts and administrators that understand the importance of collaborating with others, have the greatest chance of making a positive impact.

Administrators, Parents and technology….

- I half jokingly state that "I learned more from mothers of children with ASDs than most of the my professors in graduate school".

- Parents are driving forces behind the technology in AAC devices.

- **Augmentative and alternative communication** (**AAC**) is an umbrella term that encompasses the communication methods used to supplement or replace speech or writing for those with impairments in the production or comprehension of spoken or written language.

- Administrators who understand the benefits of technology and support teachers as they learn how to use new technology will ultimately have children in their school make more progress.

Applications to explore

- Proloque2go
- My Talk Tools
- iPrompts
- iCommunicate
- SpeechTree

- In terms of positives, parents will not tolerate applications that are not intuitive and don't work.

Is there a downside to AAC devices?

- The jury is still out. However, the popularity of these devices makes me wonder about children with mild presentations who might become overly dependent on the machine versus learning to speak via more traditional means (e.g., speech therapy, social-language groups, etc.).

- However, it is hard to argue with some of the anecdotal evidence of parents who describe that it has literally allowed their children to express themselves for the first time.

Some final thoughts….

- Working with children with ASDs provides administrators and teachers with a number of challenges.
  - Professionals have to be creative and persistent to ensure that children make adequate progress.
  - Administrators need to understand that ……**When it comes to Autism, if anyone tells you that it is easy, run the other way…..fast.**
- Schools, parents, teachers, therapists, and children who make significant gains work hard. In short, nothing comes easy.

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