



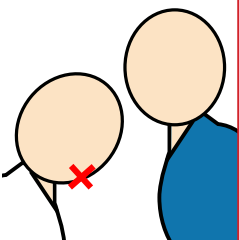
AUTISM SPECTRUM DISORDER

WHAT IS AUTISM? WHAT ARE SOME SIGNS?

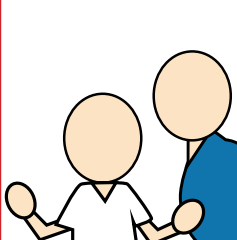
With one in 36 children (CDC, 2023) diagnosed with Autism Spectrum Disorder (ASD), chances are you have already interacted with someone with ASD. Autism is a developmental disorder characterized by impaired communication and social interaction as well as restricted and/or repetitive patterns of behaviors and thoughts. Individuals with ASD may also be particularly hyper- and hypo-sensitive to lights, sounds, and other sensory stimulation (i.e., touch, taste, smell, etc.) which may lead to a meltdown or aggression.

The spectrum is broad; no two people will have the same challenges and/or reactions, and each may have varying degrees of ability across the spectrum (i.e., high-functioning, moderate, severe, etc.).

INDIVIDUALS WITH ASD:



May be nonverbal or may not be as communicative or able to express their thoughts and feelings.



May not respond to your questions or stay focused for very long (i.e., ignoring you, no direct eye contact, etc.). They do not appear to listen but usually do.



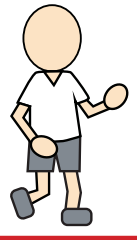
May experience discomfort and become overly stimulated by their environment.



May be agitated or anxious due to a change in routine or schedule.



May find ways to self-soothe and calm themselves by stimming (i.e., rocking back and forth, covering ears, fidgeting, flapping hands, etc.).



May flee or run into unsafe conditions, if not supervised. May also "freeze" or appear unresponsive. Reaction can be over- or under-responsive.

Sirens of Silence
Care Needs No Words



HOW CAN WE COMMUNICATE?

To assist you in communicating with individuals with ASD who may be unable to exactly share their thoughts and express their feelings, consider using a picture board or American Sign Language (ASL).

Some individuals with ASD may repeat and echo your questions in their response rather than provide a clear answer.

INSTEAD, YOU CAN:



Use a picture board* or ASL to provide better clarification or help you to the correct answer.



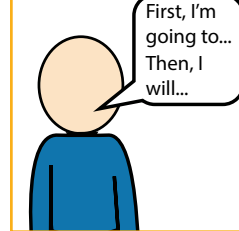
Make direct eye contact with the individual as you speak with them. If they are children, get down to their level to speak with them. Use simple language and gestures.



Ask the individual where the incident is taking place or where the pain is felt: "Show me." You can also model where by using a doll or toy.



Watch for cues and clues that may help you (i.e., their gaze or rock back and forth in a certain direction, they are repeating a phrase, they are pacing, etc.).



Calmly explain and talk about what you are doing step-by-step. A visual schedule* with common procedures may also help.

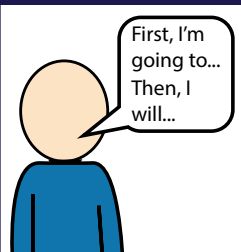


Avoid reacting to direct and blunt comments from individuals with ASD. Avoid mirroring and reacting to their emotions.

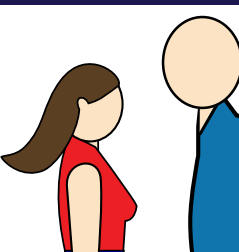
HOW CAN WE HELP?

When an individual with ASD is agitated or self-soothing, it will be important not to react and mirror the emotion.

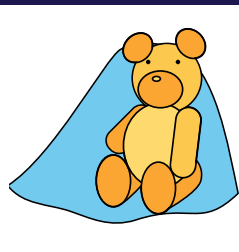
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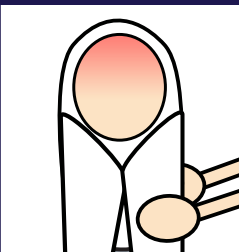
De-escalate the situation by calmly talking about what you are doing step-by-step. A visual schedule* with common procedures may also help.



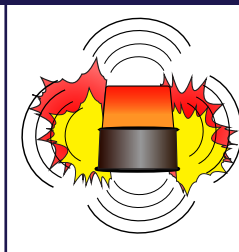
Ask caregivers what may be possible triggers to a meltdown and how to re-direct the reaction.



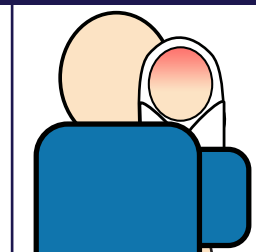
Find out what makes the individual feel better and use it as a re-direct or reward/positive reinforcement (i.e., a favorite toy/item, preferred food, a loved one, a game/app, etc.).



Wrap the individual snugly with a blanket to feel secure, provide safety, or prevent self-injury. It also applies soothing pressure.



Turn down distracting sounds (i.e., radios, static noise, etc.) or turn off lights (i.e., bright sirens, light bars, etc.).



For emergencies, doing what is needed is the most immediate, life-saving option at the time.

*An augmentative and alternative communication (AAC) device, picture exchange communication system (PECS), or picture board, available as apps, may be used as an aid.