

INTERVENTION (CAREGIVERS)

Planning and Structuring the Therapeutic Environment and Session

BALANCE STRUCTURE AND FLEXIBILITY:

Children with autism can benefit from a predictable routine. When possible, keep the timing and general schedule of the session consistent.

Children with autism exhibit great variation in individual needs and learning styles – adapting with flexibility is key.

Consider using a Visual Activity Schedule (VAS) to structure sessions to increase predictability and structure. This visual representation provides an understanding of what to anticipate for a given period. Pictures can be used to represent the waiting room, completing weekly assessments, treatment components (e.g., drawing pictures, practicing coping skills), and portions of treatment that include caregivers.

EXPECTATIONS FOR BEHAVIOR IN SESSIONS:

Demonstrate appropriate speaking volumes.

Tell how long sessions will be, giving examples based on time-frames familiar to the child. Tell the child which items in the room can be touched.

Reduce items in the clinic that are distracting, provide comforting and sensory stimulating items.

Especially when the social aspects or potential benefits of treatment do not motivate children intrinsically, provide frequent reinforcement for the child's treatment adherence using reinforcers that are relevant to the child.



Assessment

Children with autism often **think concretely**. Examples of thoughts, feelings, or behaviors may not generalize to feelings they experience - **Be specific and concrete.**

Accommodate the **child's developmental skills** in all forms of assessment by providing **both oral and written** presentations and simplifying language.

If the child is unable to describe their thoughts, feelings, or behaviors, use other sources of information, such as the child's caregivers' live observation, to assess behaviors.

Know that **elements of communication**, such as understanding conversational structure, inferring the intent of the speaker, and responding to non-verbal cues, **can be challenging** for children with autism.

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Delivering Treatment

Use **visual stimuli frequently** throughout different elements of treatment.

Allow children to **share in different ways**, such as drawing, playing with their own toys, and sensory activities. While allowing for expression, don't make guesses about the meaning of ambiguous self-expression.

Set up a system that the child understands and can use for **expressing distress** (e.g., a visual cue).

Sensory needs should be taken into account when introducing relaxation and coping skills. Activities such as movement games, sensory tables, blowing bubbles, and listening to calming music can be used.

Teaching about **recognizing and understanding emotions** is an important part of treatment for children who have experienced sexual abuse. This portion of treatment may be a challenge - it's okay to move on if you feel that you have reached the limit of the child's understanding of emotions.

When introducing coping strategies, **increased explicit teaching, structure, and repetition** may be necessary.

When using role-play, provide **concrete directions**. Tell the child about the steps for participating or provide a step-by-step visual.

Social stories may be particularly helpful when teaching safety skills and ways to prevent future abuse.



Web-based Trainings on Autism and Disabilities for Providers

TEACCH Webinars

Free webinar on dual diagnosis and other complex issues in autism identification and treatment.

<https://teacch.com/trainings/online-learning-opportunities/>

The National Children's Advocacy Center offers free trainings (registration required) on a number of topics, including working with children with disabilities.

<http://www.nationalcac.org/online-training-catalog/>

The Support Center for Child Advocates produced a series of webinars about transition planning for youth with disabilities.

<http://sccalaw.org/past-webinars/>



www.paautism.org/BeSafe