

Informational Brochure for Parents of Children with Autism Spectrum Disorders (ASD)

Take heart...there's hope and we are here to help.

Dear Parents,

When our child was diagnosed with Autism at age 3 1/2 it was way back in 1994. We had never heard the word "autism" except from the movie, "Rainman." Understanding by the general population as well as educational opportunities have come a very long way since then.

Those raw, unbelieving emotions you are feeling are probably the same as we once felt. Please be assured that there is hope and a great deal of help for your child and your family.

At 18 our son, Spencer, is a different person than he was as a young child. He reads and writes beautifully. He talks and uses eye contact in the most happy manner. He loves life and the world around him is no longer a scary, solitary, overwhelming place.

You will develop a thick skin when people look at your child at times when he or she is acting loud or strangely. You can whisper or mouth "autism" if you feel like it and most likely they will nod their head with understanding.

One day you will realize your child has a sense of humor and you will laugh at his "autistic" tendencies. The most beautiful part of Spencer is his innocence. He does not know about wars, economic downturns or global warming. His future is about the date the next movie he wants to see is coming out.

Thank you and best of luck to you,

*Alexis T.
Parent*



Diagnosis and services can be con-

Diagnosis-Schools

The school district is concerned with the impact of your child's disability on educational performance. Schools consider his or her ability to function and make progress in the school setting. Schools use the criteria as specified in California Code of Regulations:

"A pupil exhibits any combination of the following autistic-like behaviors, to include but not limited to:

1. *An inability to use oral language for appropriate communication.*
2. *A history of extreme withdrawal or relating to people inappropriately and continued impairment in social interaction from infancy through early childhood.*
3. *An obsession to maintain sameness.*
4. *Extreme preoccupation with objects or inappropriate use of objects or both.*
5. *Extreme resistance to controls.*
6. *Displays peculiar motoric mannerisms in motility patterns.*
7. *Self-stimulating, ritualistic behavior.*

What services can I expect my school to provide and what can I expect from the Regional Center?

Special Education Services...

Special education services are provided to support your child's growth and development in school. The services are specified in your child's Individualized Education Program (IEP). These services are determined by the IEP team, which includes school professionals and the parents.

Services will be provided as necessary to help your child reach those goals. In a school setting, most services are multidisciplinary, which means many people, including the teacher, work with your child to attain and maintain the goals. The IEP team considers the expertise of staff in your child's program as well as additional staff needs in deciding who does what (*For example, a child with a language goal who is in a language-rich classroom environment will have multiple natural opportunities to work on the language goal and may not need additional individualized speech therapy.*)

Regional Center Services...

Services provided by the Regional Center are specified in your child's Individual Program Plan (IPP), which is developed by a person-centered planning process. This is a team process and you are an integral part of the planning team. You may also invite other key people who are familiar with your child to be part of the planning team process. These services help you help your child to be a full participant in daily life.

Based on the strengths, needs and preferences of your child and/or family, services and supports may be provided by generic or public resources, unpaid community supports, or vendors under contract with the Regional Center.



Diagnosis-Regional Center

The Regional Center serves people with developmental disabilities of all ages. Regional Center is concerned with your child's ability to function in daily life activities.

The Regional Center uses criteria from the Diagnostic and Statistical Manual, 4th Edition (DSM-IV) which is used by therapists and doctors. A summary of the DSM-IV criteria for autism is:

Symptoms from all three of the following areas:

1. *Substantial impairment in social interaction (at least two symptoms which are significantly handicapping).*
2. *Substantial impairments in communication (at least one symptom which is significantly handicapping).*
3. *Restricted, repetitive and stereotyped patterns of behavior, interests and activities (at least one symptom which is significantly handicapping).*

What special education services may be appropriate

Special education services are determined by the IEP team (including parents). Services are provided as necessary to assist the student in attaining his/her special education goals.

- Specialized Academic Instruction (SAI) - Adapting the content, methodology or instruction for the student, to make learning more accessible. SAI may be provided in the general education or special education classroom, for all or part of the day or as needed. May be provided by a general education teacher, a special education specialist or a paraprofessional.
- Special Education Classroom—A classroom designed to address the needs of students with various disabilities and taught by a credentialed Special Education Specialist. Some classes are designed to address the needs of a variety of special education students, others specifically for students with Autism Spectrum Disorders (ASDs).
- Speech-Language Therapy—Services provided by a Speech-Language Pathologist (SLP), Speech-Language Pathology Assistant (SLPA) or Speech Aide to assist the student in receptive (i.e., following directions or listening to stories) or expressive (i.e., asking for things or initiating conversation) language.

For students with ASDs, the Speech-language Pathologist (SLP) may be working on having the student use language to get their needs met, and/or use of language for social interaction. Some students may benefit from augmentative communication (such as picture or computerized systems). The SLP may also consult with the teacher on activities for language development.

- Occupational Therapy (OT) - Services provided by a licensed OT, Certified OT Assistant (COTA) or OT Aide. For children with ASDs, OT services may include working on functional skills or sensory strategies. The OT may consult with classroom staff
- School Psychological Services—A school psychologist will assess for special education eligibility as well as learning styles and needs. May also assist with behavioral supports.
- Behavior Intervention Services—For students with challenging or complicated behaviors, a Behavior Specialist may assist in analyzing causes of behavior and developing a plan to change the behaviors.
- Social Skills Development—For students who require support in developing social skills, individual or group lessons may be provided by the Special Education Specialist, SLP, Psychologist, Behavior Specialist or Counselor.

What Regional Center service may be appropriate for my child with ASDs?

Regional Centers provide or coordinate the following services for individuals with autism and their families:

- Information & Referral
- Assessment & Diagnosis
- Lifelong individualized planning and service coordination. Purchase of necessary services included in the individual program plan.
- Assistance in finding and using community or other resources.
- Advocacy for the protection of legal, civil and service rights.
- Early intervention for at-risk infants and their families.
- Family support counseling, planning placement and monitoring for 24 hour out-of-home care.
- Training and educational opportunities for individuals and families.
- Community education about autism and other developmental disabilities.

The Regional Center system provides services and supports to a person with autism from birth to death—we are a long term care system. Infants and tod-

How can the Family Resource Center help?