



Autism for Public School Administrators: What You Need to Know

2nd Edition

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The authors of this publication hereby acknowledge Autism Speaks Family Services Community Grants as the partial funding agency for the project leading to this publication. The views expressed in this publication do not necessarily express or reflect the views of Autism Speaks or any other funding agency.



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Foreword

Today's public school administrators face an incredible number of challenges. A 2010 survey of these leaders found that 98% serve students with autism spectrum disorder (ASD) on their campuses. However, they may not have been sufficiently prepared to do so. Of the 331 respondents, 56% of administrators had no prior teaching experience with students with ASD. More than 50% had no specific mention of ASD in their college coursework, and most of the remaining responses suggested that autism was only briefly mentioned in their studies.

This publication is designed to provide those of you who are superintendents, principals, and special services directors with an increased understanding of students with autism spectrum disorder and their unique learning needs. Resources will also be provided to help identify evidence-based information, strategies, and resources to support your staff and maximize program effectiveness. When we refer to *autism programs* in this booklet, the information is not exclusive to self-contained, specialized classrooms but applicable for students with ASD in various placements throughout your school. The term *staff* is used to represent not just special education teachers, but

general education teachers, related service providers, paraprofessionals, the child study team, and any other involved professionals. [Also, the terms *autism* and *ASD* are used interchangeably.] As one administrator recently stated, “An excellent public school program can give the student with ASD the best of both worlds—a specialized program and exposure to peer modeling.” We hope that this material will help you to provide effective educational experiences for these and all students in your district. Please call 800.4.AUTISM if we can be of further assistance in the important work that you do.

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One administrator wrote, “This booklet gave me a terrific overview of autism—hopes and challenges—as well as a broader scope of the input and expertise necessary to sufficiently contribute to the independence of a student with autism.”

What Is Autism Spectrum Disorder?

Autism spectrum disorder is a neurobiological disorder that is evident in a person's behavior. There are currently no medical diagnostic tests, but trained diagnosticians use specific observational tools to determine if an individual meets the criteria. Whenever you are responsible for a student with ASD, it is critical to look at the supports he or she will need in two main areas: social interaction/communication and restricted, repetitive behavior. Approximately 1-2% of the population has autism spectrum disorder. ASD is 4.5 times more common in males, and it is usually diagnosed in early childhood when a parent or professional recognizes that a child is not meeting developmental milestones. Another 25-30% of those later diagnosed made typical developmental progress until ages 12-18 months when they significantly regressed. Approximately 50% also have an intellectual disability. Autism involves significant safety concerns that may need to be addressed at school: one-third of those with ASD develop seizures, and 50% of parents reported wandering or "bolting" to an extent that the students' whereabouts were unknown for an extended period of time. School performance may also be affected by the eating and sleep difficulties reported by approximately half of families affected by ASD.

The term *autism spectrum disorder* has recently replaced and encompassed the former diagnoses of autistic disorder (autism), Asperger's Disorder, Pervasive Developmental Disorder Not Otherwise Specified, and Childhood Disintegrative Disorder. Within the two main deficits (social interaction and restricted behavior), you will see a wide range of characteristics across different individuals as well as over

one person's lifetime. For example, Brandon may keep trying to play with his classmates but not understand their jokes or how to fit in; Jasmine might show no interest in her peers whatsoever. While individuals with other special needs generally perform at levels consistent with their IQ, those affected by ASD exhibit many highs and lows in their abilities. So they should not be described as being at a certain age-level, such as "Jackson is eleven but is like a six year old." For some skills he may be at or above his age level and for others slightly or significantly below. In other words, four-year-old Marco may be able to design a complex track layout but not "play trains" with a peer.

While science has yielded advances in our understanding of the cause(s) of autism, many questions remained unanswered. Current research strongly suggests that autism is a genetic disorder, possibly triggered by environmental factors yet to be determined. While there is no "cure," early diagnosis and appropriate, intensive intervention can greatly improve individuals' abilities and quality of life. Both children and adults with autism can learn new skills through highly structured, specialized educational programs. Teaching must be individualized to the specific needs of the student and delivered in a consistent, comprehensive, and coordinated way. [For more information on these teaching practices, contact us for *Applied Behavior Analysis and Autism: An Introduction* and other recommended reading.]

Social Interaction and Communication

Even if students with ASD are succeeding academically, it is imperative to assess their social interactions in various school settings and provide any needed supports to teach those skills. Inherent in the diagnosis are difficulties with social-emotional reciprocity, nonverbal communicative behaviors, and developing and maintaining relationships. These challenges are usually due to poor comprehension of social rules, the “hidden curriculum” that most of us pick up incidentally. Because they may find social interaction confusing or unrewarding, students may prefer to focus on something more understandable, such as a favorite topic; yet perseverating on often eccentric or age-inappropriate topics can lead to isolation from other students. Examples of social skills are attending to teachers and peers, initiating and responding to initiations, maintaining friendships, and details such as age-appropriate language and attire that fall under the broad category of “fitting in.” Although these skills may seem less important than other objectives, they can significantly affect an individual’s quality of life and success in the school community and beyond. Social skills deficits that may seem insignificant in young children could later come across as stalking or bullying; they could also lead to harassment from bullies or inability to function at college or work even with the cognitive skills to do so.

All involved staff, the student with autism, and the peer will need to be trained in order to make an activity successful socially. Direct instruction, along with practice and feedback in the natural environment, may allow the student to interact more effectively with peers and increase opportunities for successful inclusion. Teachers and paraprofessionals who are responsible for the student should be taught to create and facilitate teachable moments throughout the day to promote true mastery of these skills.

Communication difficulties are an integral part of the challenges of autism spectrum disorder. Some students with autism may have no spoken language or severely delayed speech. Even if they can communicate verbally, individuals with ASD often exhibit poor conversational skills, a very literal interpretation of language, and unusual vocal qualities.

Using simple and clear language can make a significant difference in the student’s ability to understand you or your staff. Some general communication tips follow. Keep questions brief and give directions in small steps that clarify what **to** do, not just what **not** to do (e.g., “Walk, please” instead of “Don’t run”). Provide frequent and specific praise, such as “Good looking at me” rather than “Good job.” Consistently using if-then and first-then statements can also lead to improved comprehension of expectations and the environment (“First Reading, then Lunch”). Avoid expressions like “That’s cool” or “What’s up?” that do not mean what the separate words do and can be easily misunderstood. Maintaining a calm, firm, and neutral tone of voice can help, as well as getting the student’s attention before you begin talking. Additionally, there are established prompting strategies that have been proven effective for communicating with students with ASD. Visual supports in particular (whether in words or pictures) are often effective teaching tools for students with autism.

When it comes to helping students with ASD to express themselves, there are steps you can take in your own behavior that promote their ability to answer you independently. Phrase your questions as yes/no or short-answer questions if open-ended ones are too difficult; for example, instead of “How was your weekend,” ask “Did you go to the movies this weekend?” Providing additional response time can also be beneficial. Alternative or augmentative

communication (AAC) systems may need to be considered, whether that involves a Picture Exchange Communication System (PECS), sign language, or a technological device. Although professionals and parents are sometimes concerned that providing

one of these communication options will make it even less likely that a student will speak, studies suggest that effective AAC does not inhibit the development of spoken language.

Restricted, Repetitive Behavior Patterns

Restricted, repetitive behaviors may be evident in students with autism in outward ways such as rocking, pacing, spinning, or finger play as well as repetitive speech or use of objects. However, this challenge often affects them cognitively as well. For example, they may have an overwhelming preoccupation with certain interests or be very resistant to changes in routines. Additionally, they may exhibit atypical reactions to sensory stimuli.

It may be effective to systematically teach flexibility and to use any strong interest as a motivator. Understanding reinforcement is essential to working with students with ASD because they may have a limited range of interests and lack of intrinsic motivation. By definition, a reinforcer is something that happens immediately after a behavior and has been shown to increase the likelihood of that behavior happening again. Providing a great consequence for a behavior we want to see repeated can strengthen the

connection between the student's actions and the results. By clearly defining exactly what behaviors will be reinforced, the teaching staff and student will have a better understanding of the goals to be focused on. When possible, focus on reinforcers that are a natural outcome of the behavior, such as going outside when learning to tie shoes. Staff can also conduct periodic preference assessments to determine what is valuable to each student and use the most powerful items or activities as motivators. For example, if Michael really enjoys computer games, high-fives, and pretzels, and he only gets those rewards when demonstrating the target behaviors, then those behaviors may increase and misbehavior may lessen. Teachers should let the students choose between approved options of what they want to work for and illustrate their progress through the use of token boards or other types of individualized motivational systems.

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One principal explained, “Teaching students with autism takes a significant amount of patience and hard work. Their needs are often so great and the observable progress often so small that dedicated professionals may not get sufficient feedback to indicate that they are making a difference. There are times when they feel overwhelmed, but there are other times that they express the rewards of working with them.”

Evidence-based Practices for Autism

Has a teacher ever come to you with concerns that she does not know how to teach a student with ASD? She may be overwhelmed after hours of online research and not know which intervention she should try. Or has a parent ever shared her excitement over her son's progress, but when you try to determine what to attribute the improvement to, you hear about ABA programming, speech therapy, auditory integration training, vitamin supplements, and more? It can be difficult to know how to allot time and finances if you don't have documentation of which strategies are directly improving the students' skills. These are just two examples of the importance of recognizing scientifically validated strategies and collecting data during intervention to measure progress.

Unfortunately, autism intervention has become a business, as evidenced by the conflicting claims and testimonials ever-present in the media. You need accurate and unbiased information to make curricular and financial decisions and lead your teams. While it is possible that individuals may respond to unsubstantiated interventions, it is highly probable that they will respond to scientifically validated strategies. Providing these supports most effectively allots your district's financial resources and your staff's emotional resources, time, and energy. It also prevents the staff from unintentionally wasting instructional time that could be better spent on proven methods.

When deciding on a methodology for your programs, there are two key questions to answer. Which interventions have been established as the most effective for the majority of individuals with autism? And which are likely to be the most effective for a specific student? It is of the utmost importance to look at credible research findings and then monitor each student's progress or lack thereof with any strategy the team selects.

The first step, evaluating intervention options, requires analysis of the quality

of evidence supporting each methodology (specifically for students with ASD). In some cases, proponents of an approach claim to have research support, but upon closer examination, they are referring to vague testimonials that fall short of substantiating their claims. According to federal criteria, "scientifically based research" has a specific research design, has been replicated, and has been peer reviewed by independent experts before publication. "Research-based practices" have been studied, but not with the quality indicators of scientifically based research. In other words, there may be a single case study or poor design that does not demonstrate a direct link between behavior and intervention. "Evidence-based practice" refers to the research's type (replicated, quantitative, measurable effects, clear causality) and magnitude (amount of studies). Federal and state legislation reflect the importance of applying scientifically based research in our schools.

Not only should the selected teaching strategies have research support, but their implementation in your school should have high treatment fidelity, meaning that they are applied in the manner designed. Interventions are only scientifically validated if they are implemented according to the researched protocols. For example, if a teacher who says he uses PECS in his class posts picture symbols everywhere rather than following that specific communication methodology, he is not "doing PECS." All staff members conducting an intervention must be thoroughly trained so they can apply it as intended or it may not be successful. Hands-on consultation may be necessary to reach this level of proficiency.

Once an intervention has been selected, data collection and analysis will be required so you can be sure the methodology is helping each particular student. Progress may be very slow, but well-designed records can illustrate whether there is small but steady improvement, no effect, or a negative

impact on the target skill. If there is a lack of progress, teachers need to know how to adapt the plan or to select a new option. Data collection and analysis can also help professionals uncover patterns of behavior or difficulty so potential causes can be determined. The entire IEP team will have a clear and objective picture of the student's progress when they have relevant data to refer to as documentation.

At first thought, data collection may sound like one more task for busy teachers to

undertake. It can be less overwhelming if teachers prioritize and collect meaningful data for the most important goals, the most costly interventions (in both time and money), and the most restrictive interventions. Training in the most efficient means of doing so can help teachers to design collection systems that are practical and realistic for their classrooms. Most importantly, teachers must learn how to analyze their data and use them to inform instructional decisions.

Resources for Administrators

In the survey mentioned earlier, only 41% of public school administrators rated themselves very effective at selecting instructional methodologies and supports that are scientifically validated. There are several resources available to help you assess the validity of specific interventions that may be proposed by your staff or students' families.

National Standards Project Definitions

- **Established Treatments:** There is compelling scientific evidence to show these treatments are effective.
- **Emerging Treatments:** Although one or more studies suggest that a treatment produces favorable outcomes for individuals with ASD, additional high quality studies must consistently show this outcome before we can draw firm conclusions about treatment effectiveness.
- **Unestablished Treatments:** There is little or no evidence to allow us to draw firm conclusions about treatment effectiveness with individuals with ASD. Additional research may show the treatment to be effective, ineffective, or harmful.”

(quoted from page 9)

Summarizing the amount of scientific research supporting specific educational strategies for students with autism, the National Autism Center published its findings for the *National Standards Project* in 2009. This document classifies each approach as established, emerging, or unestablished so that you can assist your teachers, related service providers, and parents to select scientifically validated practices as mandated in federal and state legislation. According to this document, the overwhelming majority of “Established Treatments” are derived from applied behavior analysis (ABA). The same was found in a 2014 literature review by the National Professional Development Center on Autism Spectrum Disorders; of the 27 strategies that qualified as evidence-based practices, almost all incorporate the principles and practices of ABA.

The Association for Science in Autism Treatment maintains a website (www.asatonline.org)

where you can look up a particular autism intervention and read a brief summary of its current research support or lack thereof. ASAT also directs you to specific studies if you are interested in more detail beyond the summary.

The Road Less Traveled: Charting a Clear Course for Autism Treatment lists specific questions to ask during three phases of decision-making: exploring a treatment's validity,

assessing its appropriateness for a specific student, and monitoring implementation and effectiveness. The article is available at www.autismnj.org.

We at Autism New Jersey can also discuss treatment options and research when you

call 800.4.AUTISM. Additional information is available in our *Position Statement on Treatment Recommendations*. As in the findings of the *National Standards Project*, those methods that are well researched, shown to be effective, and are therefore recommended by Autism New Jersey are based on principles of ABA and the related field of positive behavior support (PBS). Hundreds of studies have demonstrated the effectiveness of techniques that fall under the large umbrella of ABA for teaching skills and reducing challenging behavior in individuals with autism. Studies have also documented greater improvement from ABA than from equally intensive eclectic treatment (a combination of various methodologies). The best available evidence clearly demonstrates that ABA is the current treatment of choice for autism. We use the analogy of red, yellow, and green lights to explain what the evidence says about specific treatment options. See the text box at the left for details. Again, while individual students may respond to a treatment that is not yet in the green light or established category, we are sharing what the research literature to date has documented. Use these resources to decide how to spend your students' precious instructional time, and then follow through by monitoring progress with **all** interventions your school provides.

Autism New Jersey's Position on Treatment Recommendations

GREEN LIGHT (recommended):

- Applied behavior analysis (ABA)
 - Subcategories include PBS, VB, PRT, DTI, NET, etc. (Call 800.4.AUTISM for details.)

YELLOW LIGHT (proceed with caution):

- **More research needed**
 - Developmental therapies (DIR®/Floortime™, RDI®, SCERTS®, etc.)
 - TEACCH
 - Social stories
 - Animal therapies
 - Art therapy
 - Music therapy
 - Herbs and homeopathic treatments
 - Most vitamin supplement therapies
- **Preliminary evidence suggests ineffectiveness**
 - Sensory integration therapy
 - Special diets
- **Preliminary evidence suggests significant risk**
 - Vitamin B6 with magnesium
 - Hyperbaric oxygen therapy
 - Chelation

RED LIGHT (proven ineffective):

- Auditory Integration Training
- Facilitated Communication
- Secretin
- Psychoanalysis

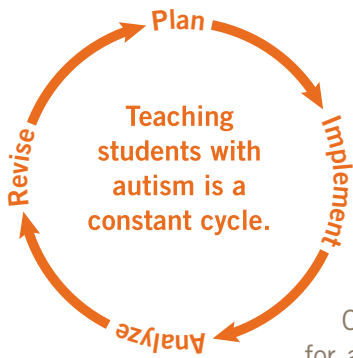
How Can Your School Support Students with ASD?

What to Look for in the Classrooms

The physical environment of the classroom can impact the education of students with ASD. One way to facilitate learning is to keep the classroom as calm and organized as possible. Designated areas for different activities, minimal distractions, and supportive visual cues can make the learning environment more comprehensible and

less overwhelming. Simple steps such as covering shelves with curtains and removing extraneous decorations may help students to focus on the lesson at hand.

Consistency in staff expectations and routine may lead to quicker acquisition and stronger generalization of skills. Every professional



who is involved with the student should understand what behaviors are required, what new skills are being addressed, and any IEP modifications, and follow through as such. It does little good for Cristina to learn to ask her teacher for a drink instead of grabbing it if her paraprofessional, therapists, parents, and babysitter do not require the same. Ideally, she learns to say “Drink, please” because she is thirsty, not because she is sitting at the blue table with Ms. Smith for a language lesson. Teachers should systematically plan for skills to be generalized to different settings, instructors, peers, and materials. Collaboration between teachers, paraprofessionals, related service providers, and child study team members can be valuable in presenting consistent lessons and supports to the student and in brainstorming through any challenges.

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One surveyed administrator wrote, “Generally, they require more support [than other parents], especially at the onset of their child’s school career, but with patience, proper support, and appropriate programming they often become our greatest allies.”

Frequent communication between home and school is often necessary when teaching students with autism. Developing an understanding of the experiences of families affected by ASD may foster the parent-professional partnership so important to each student’s progress. When the teacher knows what happened at home and the family knows what happened at school, the student is more likely to have consistency and success in both settings. Many families have reported difficulties when their children cannot communicate their needs and wants, exhibit challenging behaviors, or do not interact much with other family members. Significant financial expenses, perceived judgment when going into the community, and constant concerns about safety are additional stressors. Acknowledging these concerns and supporting families in addressing them can help the school build positive relationships that benefit everyone involved.

Components of Effective Inclusion

Inclusion occurs when individuals with and without disabilities participate in activities together, in areas such as education, recreation, and work. Ideally, inclusion takes place at the right time, in the right place, and for the right reason(s). Inclusion also involves creating a welcoming climate that fosters understanding of all students, regardless of their instructional setting. For students with autism, educational inclusion is most effective when the student is

supported and the team is accountable for the student’s progress; then you can be certain that it is valuable learning time, whether for social or academic skills. When selecting supported inclusion opportunities at your school, considerations pertaining to the student, site, staff, and family should be addressed. Proactively addressing these critical components will increase the likelihood of a successful and meaningful experience for all.

Functional Curriculum

Some students with autism will need a curriculum that focuses on preparing them to live as independently as possible. The overriding goal of such a program is to

help students acquire and perform age-appropriate, functional skills in a variety of environments for a lifetime. This will include less emphasis on traditional academics and

more on functional academics, prevocational tasks, and life skills. Beyond the day-to-day objectives, teachers must keep in mind the abilities their students with ASD will need for success in later settings, whether that involves life skills, study skills, or simply learning what is appropriate for their next campus. It should include community-based instruction, development of skills to participate in leisure activities, and job

sampling. Teaching to the next environment is crucial to prepare these students for transitions and life beyond graduation so they can be as independent as possible in the places where they will live, work, and play. We must make the most of students' educational years so they will be as prepared as possible for their adult life when services may not be readily available.

Addressing Challenging Behavior

A teacher comes to you for help with a student with ASD who is becoming increasingly aggressive. Where do you start? There should already be a framework in place to address behavior on a systemic level (school policies, staff training, emergency protocols, etc.). Then on an individual level, it is necessary to understand *why* the behavior is happening. All behavior serves a purpose or function, something it accomplishes for the person carrying it out; this is not autism-specific but applies to our own behavior as well! From an ABA perspective, these motivations are attempts to gain attention, items/activities, or sensory stimulation or to escape from specific situations. No matter how inappropriate the behavior in question, if the student continues to do it, it is "working" for him or her and accomplishing a goal. For example, when Jonah has to do a math assignment, he repeatedly pokes his neighbors. The teacher sends him to time-out, where he does not have to complete his math. The next time he wants to escape a task, he is likely to poke his neighbors. The teacher's response did not have the intended effect because she addressed only Jonah's actions not his motivation for doing it in the first place.

So after ruling out any medical causes for a change in behavior, a functional behavior assessment (FBA) should be conducted by a trained professional to determine which of these functions contribute to the student's behavior. Back to our scenario of the aggressive student, while you may

When we understand the function of a behavior, we learn what it may be expressing:

Attention

- "Look what I did."
- "Am I doing this right?"

Tangibles

- "I want..."

Sensory

- "This feels good."
- "I don't know what else to do."

Escape

- "I don't want to do this."
- "I don't understand."
- "I need a break."

have general suggestions for the teacher, it is often more efficient in the long run to embark on the assessment process so the intervention can target the underlying cause. Analyzing detailed data on the behavior, what came before and what consequence followed, allows the team to create a plan that will teach the student more effective ways to meet his or her needs. Federal and state legislation reflect the importance of using positive behavioral supports and FBAs proactively in schools.

It takes a lot of preparation to create an effective system that supports students, parents, and teachers in addressing challenging behaviors. It is necessary to train

everyone involved with the students (general education staff, paraprofessionals, etc.), including personal management training (formerly called crisis intervention) that may be needed during a behavioral crisis. Be sure staff know the ethical and legal importance of maintaining confidentiality so that these situations are not discussed in the faculty room, for example. Encourage your staff to think of behavioral difficulties

as they would academic ones and come up with different approaches to solve these challenges, rather than assume they are an unchangeable aspect of the student's autism. By understanding what behavioral supports the student requires and what other skills need to be taught, teachers can be proactive in reducing dangerous situations and increasing appropriate behavior.

How Can You Support Your Staff Who Teach Students with ASD?

As you know all too well, there are countless administrative responsibilities pertaining to students with autism. Making efficient use of limited resources is a challenge that relates to your programs' overall educational philosophy and the selection of interventions with scientifically based research support. Ideally, staff training and scheduling reflect time for collaboration across staff, lesson preparation, and data analysis. Job descriptions matching the specific needs of particular students should be considered. Access to the community may involve transportation issues. Parent/professional collaboration is a necessary component of teaching students with autism and a specific skill that may need to be built. Program implementation and evaluation involves diverse placements in general and special education classrooms. But the impact of your role is significant: it may be virtually impossible for these programs to succeed without administrative support.

The quantity and quality of administrative assistance has been found to directly affect

teacher efficacy and retention. Teachers often look for logistical support from their administrators through scheduling (including time to plan and collaborate), consideration of class load (severity, size, and ratio), provision of trained paraprofessionals, and budgetary resources. Administrators also provide instructional support in the forms of relevant professional development, expert consultants, and suggestions of resources and evidence-based strategies. Emotional support is the final component required; your staff likely seek to have you understand the singular challenges of serving students with ASD by observing their classrooms frequently, listening to their concerns, and directing them to resources and solutions. Simple actions like allowing teachers of students with autism to request a particular substitute when they are absent (even if that is not the general school policy) can have a significant impact on the success of their class on those days. The deficits associated with autism place extraordinary demands on these professionals, and your support is critical to teacher and student success.

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“Consistent professional development is the most critical component for success of my students and staff,” stated one administrator.”

Best Practice Resources for Administrators

You should always feel free to contact Autism New Jersey at 800.4.AUTISM with any questions pertaining to your students with ASD or their teachers and educational programs. In addition to our own publications, there are other resources that may be helpful. The National Research Council's book, *Educating Children with Autism*, was published in 2001 to summarize the research to date and examine the issues affecting the education of students

with ASD. The *Autism Program Quality Indicators* (APQI) created by the NY State Education Department is a checklist that provides great detail about components of effective educational practices for students with ASD, in areas such as individualized services, curriculum, instruction, family involvement and support, services across settings, challenging behavior, personnel, and program evaluation.

Staff Training

When asked what would maximize the education of students with autism spectrum disorder, 51% of recently surveyed administrators stated that professional development was the key factor. Since most educational professionals have not been sufficiently prepared by their collegiate studies to meet the complex needs of students with autism, they often rely on their employing districts to provide relevant and credible professional development. When they understand what an ASD diagnosis entails and learn how to teach these students effectively, they often have a much more positive experience. In the survey mentioned above, 62% of public school administrators said that their staff members had reported feeling overwhelmed or concerned about teaching students with ASD (and another 10% were not sure). Specific areas of concern were their work load, the other students' education, insufficient support from administrators or parents, and challenging behaviors (ranging from unusual behaviors that teachers have never encountered to dangerous acts of aggression or self-injury). Many of these issues could be addressed through effective professional development.

Staff training is most effective when it includes everyone involved with students with autism: special and general educators, paraprofessionals, related service providers, the child study team, and administrators. Having everyone united in understanding

the philosophy behind the program, as well as specific instructional strategies, creates a supportive environment for the staff and consistency for the students. While lecture-style workshops can be beneficial, it is often necessary to provide additional hands-on training with supervision and feedback. A Board Certified Behavior Analyst (BCBA) can be a valuable consultant for these matters. Autism-specific professional development should be an ongoing process, as new issues arise from different students' needs. If you have heard of a reputable school program in your area, consider sending staff to observe so they can see instructional techniques put into practice in an environment similar to their own. Enhancing the collaborative skills and attitudes of staff (with each other and with parents) is another building block of strong educational services.

Paraprofessionals often have a significant impact on students with autism, but they usually receive little or no training to do so effectively. Lack of preparation, supervision, and ongoing support can lead to confusion about their responsibilities. They may have varied assignments throughout the day such as clerical duties or curriculum modifications, yet their most significant role should be to systematically support the student in crucial ways such as redirecting attention to the classroom teacher, implementing a motivational system, and preteaching academic content. The goal of your autism paraprofessional staff should

actually be to have their role become unnecessary; there will be other students to assist once one has become sufficiently independent. As a campus leader, be sure that your team has clearly defined all staff roles and responsibilities. Teachers may benefit from professional development that addresses effective collaboration with paraprofessionals.

In order to provide effective feedback, staff can benefit from being evaluated in specific areas critical to their effectiveness with students with autism (such as prompting, reinforcement, teaching skills, reducing problem behavior, and promoting social interactions). Each program should be evaluated by staff, parents, consultants, and any other stakeholders to be sure it is providing appropriate educational opportunities. An external evaluation by a

professional outside of the district can also yield valuable input.

Staff Training Topics

- Overview of autism, ABA, and learning theory
- Instructional strategies
- Curricular modifications
- Challenging behavior
- Facilitation of peer interactions and social skills
- Functional curricula and life skills instruction
- Data collection and analysis
- Generalization and maintenance strategies
- Parent collaboration
- Interdepartmental collaboration
- Relationship-building with the students

Putting It All Together

The most common legal violations of IDEA in legal cases pertaining to autism were unqualified school personnel, lack of adequate student progress, and lack of meaningful data collection to guide decisions. It has been suggested that schools focus on the following guidelines for teaching students with ASD: follow IDEA procedural requirements, conduct thorough student assessments to develop IEP goals, teach intensively enough to meet both academic and nonacademic needs, use scientifically validated strategies and train the entire staff in them, and collect and analyze meaningful data. Ensuring that your school meets these criteria will help you to establish defensible programs that meet your students' needs.

A recent literature review found these core elements recommended in the education of students with ASD:

- Individualized supports and services
- Systematic instruction
- Comprehensible and structured learning environments
- Specialized curricular content
- Functional approach to challenging behavior
- Family involvement

The extent to which each student needs these supports should be assessed individually, but they are fundamental principles to keep in mind regardless of the student's placement. If you have a strong foundation in place for your programs, then you and your staff can tailor them to individual students as needed. Your dedication to increasing your understanding of autism spectrum disorder, the complex and unique educational needs of your students, and the particular challenges faced by your staff will improve the outcome for everyone involved.

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About Autism New Jersey

Autism New Jersey serves as a collective and influential voice for the community. We systematically and compassionately improve the lives of people with autism every day through our four core service pillars:

- **Information** – Provide referrals and service navigation assistance through our Helpline (800.4.AUTISM) and website (www.autismnj.org) for thousands of parents and professionals
- **Education and Training** - Share clinical expertise through regional trainings and statewide conferences
- **Public Policy** - Serve as the collective voice for the community through public policy initiatives in collaboration with the Legislature and the state departments that serve the autism community
- **Awareness** - Build community acceptance through our successful autism ambassador campaign and community outreach





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