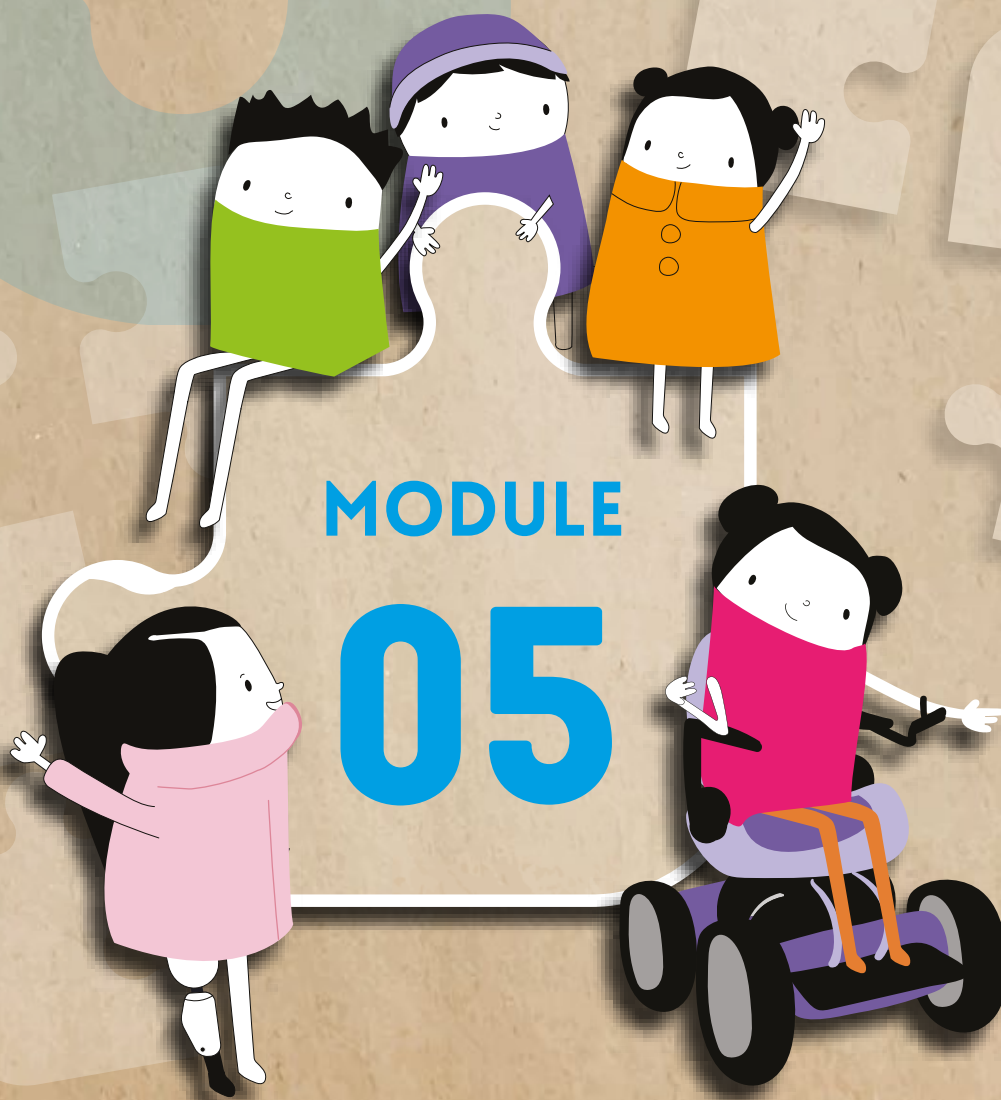


+ INCLUSIVE EDUCATION:  
FROM REFLECTION TO ACTION

[ GOOD PRACTICES MANUAL ]

INCLUSIVE EDUCATION IN PRACTICE:

LEARNERS ON THE  
AUTISM SPECTRUM



## MODULE 5

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## 5. INCLUSIVE EDUCATION - STUDENTS ON THE AUTISM SPECTRUM

The term  
**"autism"**  
comes from the Greek **"autos"**  
that means  
**"turn to yourself"**



## 5.1 KNOWING TO UNDERSTAND AUTISM

Autism Spectrum Disorder (ASD), is a recent terminology that emerged as a way to designate a set of subgroups, with specific characteristics, that affect the behaviour and social relationships of subjects with this medical condition. It is known as a neurodevelopmental disorder where communication and social interaction deficit as well as behavioural change are characteristics associated with this condition. It is fundamental to emphasise that because it is a spectrum, children diagnosed with this condition present different levels, not only of difficulties and needs, but also of abilities, namely at the intellectual level. The Diagnostic and Statistical Manual of Mental Disorders DSM-5 designates this condition as a spectrum precisely because they manifest themselves at different levels of intensity. A person diagnosed with grade 1 has mild impairments, which may not prevent him/her from studying, working and relating to others. However, an individual with grade 2 has a lower degree of independence and needs some help to perform daily functions, such as bathing or preparing his/her meal. A person on the autistic spectrum with grade 3 will manifest severe difficulties and will usually need specialised support throughout life.


The medical diagnosis of Autism Spectrum Disorder occurs during the first years of life, more precisely in the first three years. However, it is possible to recognise some of the symptoms up to 18 months of the child's life and the diagnosis rarely comes after 24 months.

It is important to note that children whose school skills and competencies develop during the usual age or are overdeveloped (maths, memorisation, for example) in comparison with their peers, may be diagnosed after the first years of school life. However, there is a possibility that they may be diagnosed as adults, which makes it difficult not only to intervene, but also to allocate the support they need.

Science has not yet discovered the real cause of this disorder, but there is a consensus that a combination of factors, not only genetic but also neurological and environmental, may be the basis of this medical condition.

**FUNDAMENTAL**

Knowing that, because it is a spectrum, children diagnosed with this condition have different levels, not only of difficulties and needs, but also of abilities, namely at an intellectual level.



## THE CONCEPT OF NEURODIVERSITY

*Neurodiversity is a concept that encompasses all human neurological compositions, whether typical or atypical - the case of people with ASD. The neurodiversity look allows us to understand neurodevelopmental disorders not as something out of the ordinary or in need of cure, but as part of the immense variety of natural brain formations possible among human beings. It is the idea of neurodiversity that helps us understand that ASD has no cure. This is a condition - among many others - with which some human beings are born and that, due to its specificities, requires specialized monitoring so that the person, like any other, can develop fully within their potentialities (Instituto Inclusão Brasil, 2021).*

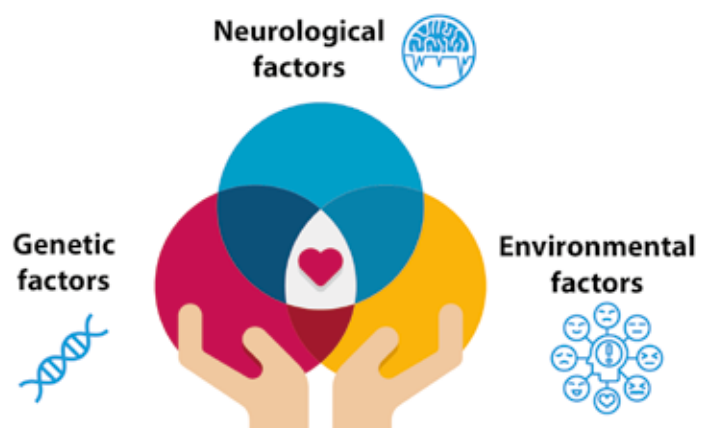
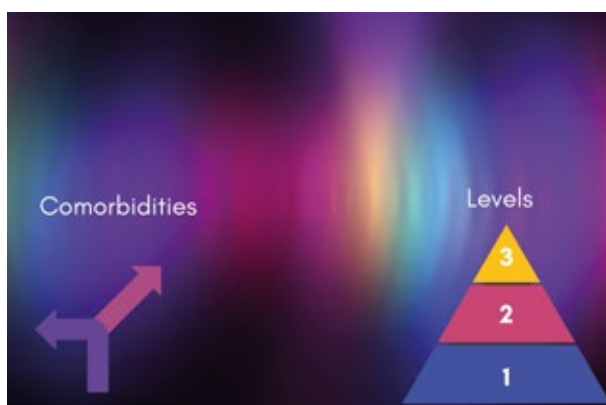
The taboo around this disorder has been decreasing as the access to diagnosis, cultural productions (series, movies, books) in which autistic people are represented and also the understanding of the concept of neurodiversity advance. The increase in prevalence is also linked to the understanding of the diversity of manifestations of this disorder - hence comes the term spectrum, the letter E of the acronym ASD. When it is stated that autism is a spectrum, reference is made to its wide variety of manifestations.

There are two factors that must be present to confirm that a person is on the autism spectrum. The so-called “diagnostic criteria” are:

- The presence of impairments in communication and social interaction.
- The existence of repetitive and restrictive behaviours.

Each person with ASD will manifest these two elements at different levels of intensity, which will define where they are on the autism spectrum. But this is not a disorder that occurs in isolation, and that is where comorbidities come in. Besides the 3 levels associated to this disorder, the variety is immense - autism can manifest an infinity of comorbidities and also be associated to different syndromes - such as Down’s, for example.

Comorbidity is a medical term that describes other conditions that can manifest alongside Autism Spectrum Disorder. “They are present in about 70% of individuals with ASD, and 48% of them may have more than one comorbidity.” (Autism and Reality, 2020) These associated conditions may be psychiatric, such as ADHD, or medical, such as sleep disorders.



**OTHER EXAMPLES OF COMORBIDITIES ASSOCIATED WITH ASD ARE:**

**Intellectual disability**

This is a developmental disorder that causes deficits in generic mental abilities and impairments in daily adaptive function.

**Language deficits**

All subjects within the autism spectrum have some level of limitation in communication, such as not understanding facial expressions. "More than half of autistic people develop some problem with speech and 25% are nonverbal." (Autism and Reality, 2020).

**Anxiety**

or in a more correct terminology, **Generalised Anxiety Disorder**, defined as a persistent and excessive preoccupation with different issues. Emphasise that, throughout life, the focus of distress may vary from one issue to another.

**Attention problems, impulsivity or hyperactivity**

About 59% of people with ASD have symptoms of Attention Deficit Hyperactivity Disorder (ADHD), making these two disorders often confused (Autism and Reality, 2020).

**Sleep alterations**

Over 70% of people within the autistic spectrum may develop some alteration in sleep (Autism and Reality, 2020).

**Obsessive Compulsive Disorder (OCD)**

OCD is characterized by the presence of obsessions and/or compulsions. Obsessions are recurrent and persistent thoughts, impulses, or images that are experienced as intrusive and unwanted, while compulsions are repetitive behaviors or mental acts that an individual feels compelled to perform.



**NEUROATYPICAL OR NEURODIVERGENT?**

To clear up any doubts about adopting the most correct terms to refer to people with autism, without autism or with other types of disorders, we have listed simple definitions:

**Neurotypical**

It is a term that refers to subjects who present typical neurological development and functioning, that is, within the regular patterns. We may use this term to mention, for example, a functional adult or child who does not present significant alterations in memory, attention, cognition, among others.

*The term neurotypical refers to individuals who do not manifest neurological or neurodevelopmental changes, such as Autism Spectrum Disorder.*

*People with Autism Spectrum Disorder are considered neuroatypical people.*

*All of us, neurotypical and neuroatypical, are neurodiverse.*

**Neurodivergent**

A concept used to refer to people who have alterations in cognitive, behavioural, neurological and neuro-anatomical functioning. In other words, they refer to alterations such as Autism Spectrum Disorder (ASD), Attention Deficit Hyperactivity Disorder (ADHD), Tourette's Syndrome, Depression, Dyslexia, Schizophrenia, among others.

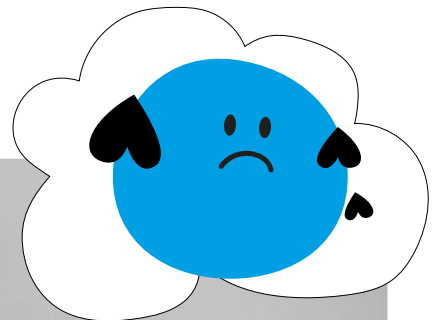
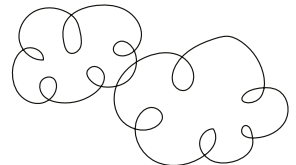
## THE CONCEPT OF “CAPACITISM”

Capacitism is the name of discrimination against people with disabilities, a group of which people with ASD are a part. It is a manifestation of prejudice towards people with disabilities by assuming that there is an ideal body standard and the escape from these standards makes people unfit for activities in society (Instituto Inclusão Brasil, 2021).

The practice of the Capacitism reaches the person with disability in different ways, both in the access to the physical environment and the creation of barriers for them to exercise activities. independently, as the socio-emotional barriers when these people are treated as incapable, dependent, without will or own voice to express their wills.

Treating a disabled person as an infantile person and/or incapable of understanding the world is very common in Education. An example of this is the common practice of treating children with diminutives.

**Capacitarianism thus denies citizenship by emphasising disability rather than the human person.**



### SYMPTOMS ASSOCIATED TO ASD

Despite the existence of subgroups within this disorder, we can highlight a triad of symptoms that affect behaviour in the following dimensions:

#### Understanding and use of verbal and non-verbal communication

Many children with this disorder show difficulty, not only to develop an effective communication, but also to understand the communication and language of others. Besides, many of them present speech delays and others do not develop this competence at all. In these situations, it is important to use resources such as images, photographs and gestures, for example, as a way to stimulate this competence.

#### Capacity to interact with children and adults and difficulty in establishing/maintaining social relationships

Children with an Autism Spectrum Disorder have difficulties at the level of social behaviour and interactions. It is difficult for them to understand the social behaviour of others, as well as to maintain socially appropriate behaviour.

These children, in social contexts, regularly manifest difficulty in playing/ socialising and communicating with peers and sometimes this behaviour can be perceived as impolite or even as lazy. Misinterpretations arising from total ignorance of this disorder.

#### Repetitive and obsessive behaviour

It is normal for children with this condition to manifest repetitive behaviour. For example, these children do not play with toys in the traditional way. They prefer to watch or spin objects repetitively and constantly or, for example, spin a wheel of a trolley with excessive concentration and for long periods of time. On the other hand, there are children who develop interests in activities or themes.

Despite the above, there is a tendency for these children to play in isolation from their peers (APA, 2013, cited in Lima, 2018).

Other **relevant symptoms** more associated with communication and social interaction are:

- ✓ Delay, or even absence of speech, including loss of previously acquired language.
- ✓ Misuse of pronouns (exchanges the “I” for “you”).
- ✓ Difficulty in playing with peers.
- ✓ Absence of eye contact or difficulty to.
- ✓ Taking the family member’s hand with the intention of guiding them to an object or activity they wish to do.
- ✓ Rare play interests or activities.
- ✓ Atypical responses to sounds, smells and textures, tastes and images.
- ✓ Resistance to changing routines.





Some children with an Autism Spectrum Disorder (ASD), as we have already seen, may have different perceptions at the level of the senses, i.e. at the level of sounds, smells, touch, sight and tastes, affecting their reaction to them. This hypersensitivity has implications not only at home, but also at school.

Nevertheless, they may manifest irregular sleep patterns as well as behavioural problems. Therefore, these children have, in fact, a peculiar way of seeing, feeling and reacting to reality.

Despite the difficulties previously mentioned, the truth is that most of these subjects have a set of abilities, namely

- ✓ a) Ability to concentrate on details and activities of interest, often for long periods of time.
- ✓ b) Capacity to direct the attention to a certain task and/or activity, thus developing, most of the times, an excellent ability level, comparatively to the other subjects.
- ✓ c) Better capacity to capture information through vision than orally.
- ✓ d) Due to their specificities, these children have a greater propensity to achieve academic success in technical-mathematical areas, such as engineering, ICT and music.

We know that ASD presents a set of characteristics that hinder the child's way of being and being, however, it is fundamental that we perceive these as a way of seeing and feeling the world, distinct from the others. Taking on this vision is crucial for society not to focus only on the difficulties that this condition brings to the subject. On the other hand, it is important to encourage people to value the abilities of these children, so that they can develop their interests and activities in a healthy way. Here, parents, relatives, teachers and other professionals are invited to assume an empathic role and try to "put on the shoes" of these children, so that they can understand them and consequently help them to overcome their difficulties and enhance their abilities through the appropriate adaptation of strategies.



## 5.2 EDUCATIONAL ENVIRONMENT

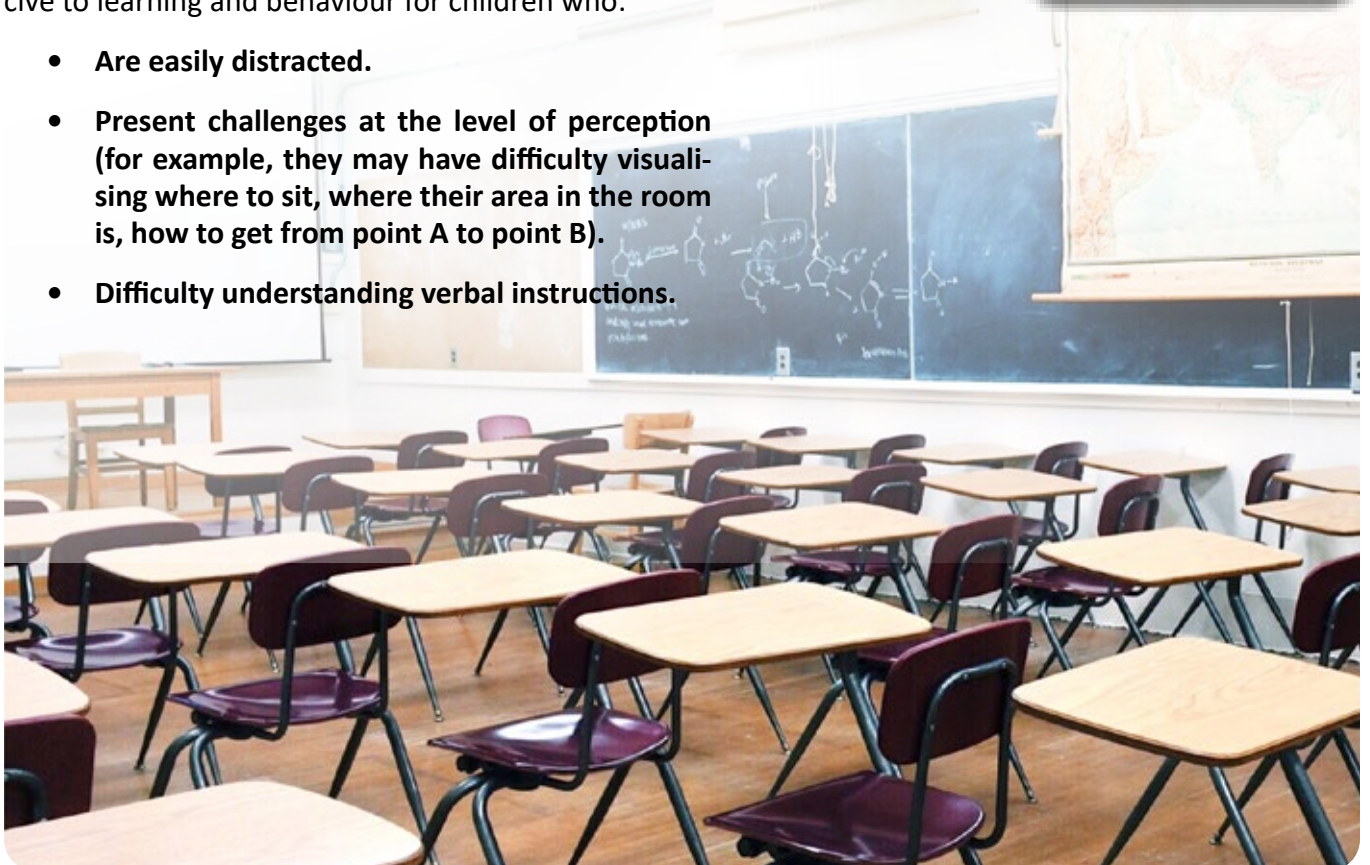
*The educational needs of children with ASD vary according to their potential, needs and interests. Therefore, an individual assessment is fundamental to determine the most appropriate pedagogical strategy.*

In Portugal, for example, these children develop their academic pathway in mainstream schools, where they are allocated learning support measures. However, this reality is not transversal to most of the education systems. In other countries, the reality is different, since these children attend schools aimed at the education of children with learning difficulties or specific schools in the area of autism.

### 5.2.1 THE CLASSROOM ENVIRONMENT

The classroom environment can impact on how the student with ASD develops their learning. A distraction-free and structured/predictable environment is more conducive to learning and behaviour for children who:

- **Are easily distracted.**
- **Present challenges at the level of perception (for example, they may have difficulty visualising where to sit, where their area in the room is, how to get from point A to point B).**
- **Difficulty understanding verbal instructions.**



**We share 5 tips for keeping the classroom space distraction free and organised:**

**1. KEEP MATERIALS OUT OF SIGHT WHEN NOT IN USE**

Some children, such as those with Autism Spectrum Disorder, can become overwhelmed or over stimulated in the face of too much visual and tactile information so it is important to reduce clutter. In this sense it is important to

- a. Determine a specific place for things (e.g. toys in a container, papers and pens in a drawer, etc.) Like an example in figure 1.
- b. Keep material which may distract the child away from its environment.
- c. In case there are visible containers on the classroom shelves, they should be camouflaged, so as not to distract the student, thus avoiding situations such as moving and taking away the materials.
- d. Draw up and determine a timetable for students to fetch the materials or give direct and clear instructions for doing so. For students who have difficulty reading and/or understanding verbal language, use words and pictures to indicate what is intended, this will help the student to identify where, for example, they can fetch the toys or materials. Let us look at the example in figure 2.



Figure 1



Figure 2

**2. REDUCE WHAT IS DISPLAYED ON THE WALLS**

Children with this condition can often be easily distracted by the materials on display and/or decorations on the walls. In order to minimise distraction, it is important to take care to keep these decorations in one place in the classroom, rather than using the whole space. The reduction of visual stimulus is important for the stability of these children. Consider the example in figure 3.



Figure 3

### 3. DEFINING AREAS IN THE CLASSROOM OR LEARNING SPACE

This strategy is adopted in classroom environments where there are several spaces (reading space, science space, playful space, among others). In order to delimit these areas, professionals may use different coloured carpets, or even dividers with shelves with books or other materials.

A classroom environment with these characteristics benefits students who present the following characteristics

- Who are easily distracted.
- Difficulty in staying in a certain space of the classroom.
- Difficulty in orienting themselves in the classroom.

The use of images or words to identify the spaces is essential.

Take as an example Figure 4, where the student's study space is identified.



Figure 4

### 4. MAKING A TIMETABLE (WRITTEN OR WITH PICTURES)

In order to organise how students will use the classroom space, it is important to draw up a timetable. With a timetable the student knows when he will be in a certain space.

Some students find it easier when they use mini-schedules, for example: first do the puzzle, then computer activity).

In order for children to know what activities they have completed, teachers can opt for a timetable where the different components are removed so that children know what parts have already been completed and what they still have to do (Figure 5).



Figure 5

Fonte: Fundación Purísima Concepción  
Hermanas Hospitalarias

### 5. PERSONALISED DEFINITION OF THE SPECIFIC PLACE OF THE STUDENT

Many students have the need to have their specific place to develop a certain task. For example, a child who has difficulty staying in his/her designated area in the classroom may benefit from floor tape around his/her seat, so that he/she knows where he/she is expected to be.

Another way, is to define each student's area of the class using different coloured mats, making it easier to show where they need to be when needed, as shown in the example in figure 6.



Figure 6

We address some good practices to consider in the classroom context regardless of the difficulty the student presents. When talking about students with ASD, it is essential to mention more specific strategies.

A **warm and relaxing environment** is essential for students with autism. Creating this environment implies, for example, including books, comfortable blankets and some calming objects, such as:

- a. Stability ball.
- b. Swivel chairs (some classrooms are replacing traditional chairs with this alternative).
- c. Suspended swing, or a trampoline.

Besides the objects mentioned, there is the possibility of including resting or self-regulation spaces aimed at students who need breaks throughout the day.

Nevertheless, sensory objects can also be included in classrooms. Incorporate sensory/fidget items, as shown in the example in figure 6, also in the break area, or allow students to use fidget objects as a way to self-regulate and provide well-being. It should be noted that students should have direct and clear guidance on how these objects are used in the classroom, thus avoiding moments of distraction.

Briefly, to maintain a **positive classroom environment**, we should consider the following points:

- ✓ Minimise classroom distractions.
- ✓ Keep the classroom space and materials organised.
- ✓ Establish a schedule of activities and spaces to be used in the classroom.
- ✓ Define the classroom spaces (computer, reading, and recreational spaces, among others).
- ✓ Maintain a calm and relaxing classroom environment
- ✓ Include swivel chairs, in order to allow movement.
- ✓ Include and allow the use of sensorial objects.



Figure 7



Figure 8

### 5.2.2 THE PLAYGROUND AND LUNCHROOM ENVIRONMENT

Playground and lunchtime are the least structured and therefore most difficult times of the day for a child with communication and organisational challenges. Figuring out how to keep busy and have fun in a playground, with no set rules, is the big challenge.

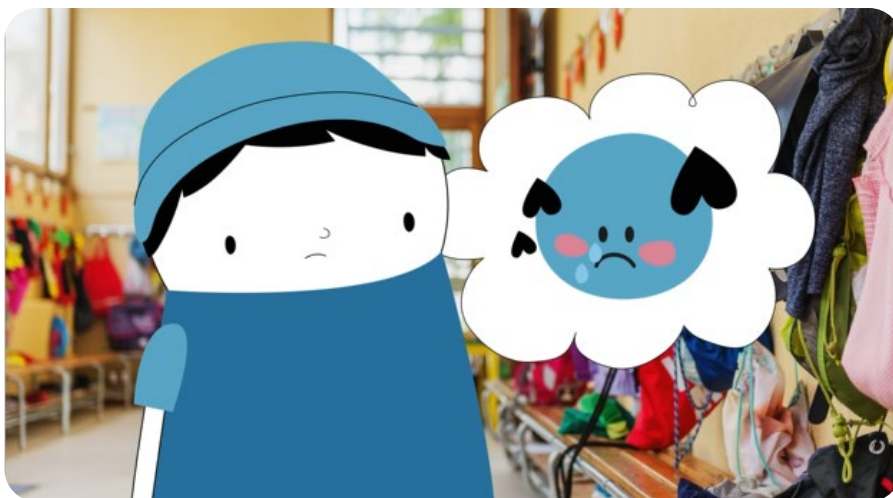
How can the school welcome these students, without segregating them into more isolated and quiet areas of the school? By creating specific signs and spaces that make it easy to interpret where they can go and what they will find. In the same way, in the canteen area, the area where the child sits may be visually signposted. The child should avoid having lunch during the busiest periods. You can choose a quiet place, within the dining area, in order to guarantee less hectic lunches.

**Having a visual menu available at all times facilitates the student's choices and communication.**

Besides the organisational and sensory issues, this is a time when deficits in communication and social skills become noticeable and very painful.

Lunchroom management and playground responsibilities are the responsibility of operational staff, and it is necessary to give these professionals some understanding of what autism is and the basic strategies that will make a difference for a student in the autistic setting.

It should be noted that in these spaces, fire alarms or certain bells or chimes may represent sensory violence for children with ASD.



**DO NOT MAKE LOUD NOISES**



## 5.3 PEDAGOGICAL PRACTICES

Students with autism are challenged daily in several contexts, namely the educational one. It is important that educational professionals understand this disorder in order to better intervene and help these children to achieve their educational success. For this, it is essential to implement pedagogical strategies appropriate to the real learning needs of these students.

We consider the following pedagogical strategies to consider in the teaching-learning context:

### 5.3.1 LIMITING SENSORY STIMULATION

According to some studies, people with ASD experience sensory hypersensitivity, triggering unusual and excessive reactions. Classrooms can be hectic spaces, where the permanence of sensory stimuli can be quite disturbing for these children. Here, the teacher has an important role, not only in identifying the stimulus, but also in managing the sensory overload present, not only in the classroom, but also in the playground. Thus, it is essential that the teacher gives, for example, some minutes to relax after the break, allow students to use the changing rooms when they are empty, among other important behaviours for the well-being of these students. Allowing students to leave five minutes early to avoid confusion in the corridors is also good practice.



### 5.3.2 USING THE APPLIED BEHAVIOUR ANALYSIS METHOD

Applied behaviour analysis, or ABA, is a therapy that contributes to teaching new skills as well as supporting the learning of the student with ASD. This intervention consists, not only in the acquisition of skills, but in the improvement of those that already exist. Furthermore, it also focuses on the attenuation of certain behaviours that compromise the social interaction of these students.

In an initial phase, it involves the identification of the behaviours and skills that need to be improved, for example communication, social interaction, among others. Subsequently an intervention based on behavioural strategies is outlined. This intervention is known as an assessment, before, during and after the interventions, something fundamental, not only to analyse the student's progress, but also to help in decisions regarding future interventions, in order to improve and promote the development of communication, social interaction, daily life activities, motor and academic skills.



This method can be applied by any health or educational professional, provided that they are certified to do so, i.e. the Behavior Analyst Certification Board - BACB (Nascimento & Souza, 2018).

Studies show that this long-term intervention brings benefits to students with this condition, namely in terms of behaviors, communication, and socialization (Rosa, 2022).

### 5.3.3 GIVING APPROPRIATE RESPONSES TO STUDENTS

Students with this condition have difficulties in communication and it is therefore essential to maintain a coherent, clear and direct speech when responding, asking questions or giving directions.

Care should be taken to avoid metaphorical and abstract language, as this will make it easier for the student to understand.



### 5.3.4 READING COMPREHENSION STRATEGIES

Reading skills are essential to the development of lifelong learning for the subject. According to The Children's Reading Foundation, children with poor reading comprehension are more likely to have "low self-esteem and feelings of inadequacy", and may even be in danger of "attendance and dropout problems".

Reading difficulties are common among children with this condition, so teachers need to pay attention to the appropriateness of literacy strategies for these children. We highlight some strategies to develop and stimulate reading:

- Encourage interest in reading and books as early as possible.
- Encourage the family to develop reading activities in the home context.
- Teach the literacy process using various resources, namely technological ones.
- Provide summaries or pre-exposure to a new reading book before its initiation. Identify the story line, plot, main characters and setting with visuals - if possible - to situate the student to the book.
- Provide specific structure for questions when an answer is expected for comprehension. Use multiple choices, closed sentences, with a word bank, or starter answers. Considering that it could be very difficult to answer "John, how did the wolf find Grand-





ma’s house?”, A student with autism can show understanding by asking, “John, did the wolf find Grandma’s house by crossing the river and...?”

- When giving choices, know how many choices are appropriate. Some may be able to choose from four choices, some from only two. Reducing the number of choices is a simple way to make a task simple for the student.

It is important to be aware that a high proportion of students with high-functioning ASD are adept at coding and use words, but may have significant problems with comprehension. Some students may be diagnosed with hyperlexia.

### 5.3.5 STRATEGIES FOR PROMOTING AND IMPROVING WRITING

It is essential to recognise that writing involves expressive language skills, word retrieval, thought organisation and fine motor skills, which are often challenges for pupils with autism. Strategies to support each of these areas of need are often needed.

Some good practices when it comes to writing, according to Autism Speaks:

- Use visual resources to prompt language - pictures, word banks, etc.
- Start with loose sentences.
- Teach/develop descriptive vocabulary.
- Use organization model tools for all written assignments - webs, outlines, etc. As using these tools requires specific instruction and consistent, repeated use of them will likely result in greater independence and success.
- Consider using dictation, computer graphics programs to support your student. Consider an AlphaSmart keyboard as a support resource.
- Look for content, rather than staging or writing a play, knowing that writing may need to be assessed by alternative methods than those used for the class in general. For example, consider whether the student has answered the content questions rather than assessing only the writing.



### 5.3.6 CURRICULUM APPROACH STRATEGIES

The same source (Autism Speaks), suggests that in addressing curriculum issues and making academic modifications or accommodations, it is important to keep the following suggestions in mind:

- Define basic curriculum objectives and focus on them - for some students this may be as simple as one or two basic components within a unit.
- Focus on teaching less content, but teaching mastery and, where appropriate, fluency.
- Ensure students have classroom materials ahead of time.
- Pre-teach new vocabulary and relevant key concepts, focusing on those that build and are repeated across the curriculum
- Confirm that the information presented by the teacher is accessible to the student: know how much verbal information the student can process, consider ways of breaking down the information into manageable chunks, highlighting key points, providing outlines, study notes, etc.
- Use visual aids, where possible, to organise. enhance understanding and evaluate.
- Consider in homework, establishing a recording method, present set expectations, and consider possible schedule accommodations if necessary.
- When assessing, lower performance expectations in areas of difficulty for the student - to test knowledge concepts, replace essays with multiple choice or fill in the blank questions with word banks or replace paragraphs with webs that show relationships, etc.
- Teach and test regularly and in small chunks: check for understanding.
- Consider allowing more time or an alternative setting for tests.
- Review, repeat and move on when student demonstrates proficiency.
- If a student is having difficulty learning a concept or skill, rethink how the material is being presented.



**IMPORTANT**

It is essential to keep in mind that if a student with autism has an interest in an area, they may become the class expert on a particular topic. This can be a way to allow that student to shine, as well as provide an opportunity for motivation by using their particular area of interest to motivate flexibility or willingness to learn new subjects.



### 5.3.7 STRATEGIES FOR TEACHING MATHEMATICS

Recognising that this area often represents a wide variability in ability levels means that instruction is likely to need individualisation. A student who can perform two digit multiplication head on may have great difficulty in conceptualising negative numbers or in measurement. Word problems, in particular, are a notable area of struggle. Use the student’s strong areas to build their self-confidence and motivation to work on challenging areas.

**In addition:**

- Similar to other subjects, break maths down into specific parts using visual and manipulative data.
- Use strategies like TOUCHMATH to help - This is a multi-sensory maths programme that makes critical maths concepts appealing and accessible for students who struggle to understand the content.
- Students with autism often learn patterns involved in a skill rather than its concepts.
- For skills that require accurate learning and execution, employ teaching strategies that ensure the skill is developed correctly from the beginning. As corrective teaching is generally less effective, unlearning bad habits can be much more difficult for students with autism.

*Again, it is important to be conscious about learning and never forget that a child who spends months learning how to add and months learning how to subtract, may take months to learn how to look at the mixed addition / subtraction sign.*



### 5.3.8 STRATEGIES FOR PE LESSONS

First, it is important to be aware of the student’s motor part, timing, language and attention problems that may affect their performance and interest, and make appropriate accommodations. Do not exclude the student from participation in these classes.

Secondly, it is also essential to recognise that although the pupil may not be able to keep up with the pace of learning and activity of the whole class, they may be able to learn components of a sport or activity, and it always represents a valuable opportunity for social exercise.

### 5.3.9 STRATEGIES FOR MUSIC CLASSES

Did you know that many individuals with autism are strong in music, and you can use this fact to reward, motivate and teach?

A sense of rhythm and interest in music can be used to motivate a child to participate in an activity.

As music is processed in a different area of the brain than language, some individuals with limited language ability are able to sing, and song can be used to teach concepts or aid memory development.

### 5.3.10 STRATEGIES FOR ART CLASSES

Strong visual skills, a sense of visual perception or a unique perspective can often result in significant artistic ability in some individuals with autism. Others may have a special interest in colour, and be the class experts on colour combinations and application of colour wheel principles.

However, due to sensory/tactile issues, some students may have difficulty with the art class or certain art projects (e.g., clay on hands, smells of materials, etc.).

#### Good practice recommended by Autism Speaks:

- Pay attention to the presence or input of highly sensory stimuli that may affect the pupil, particularly in locker rooms and enclosed halls (echoes, whistles, pupils running and shouting, etc).
- Break tasks into small components and reward successes - a pupil learning to shoot hoops gains a valuable skill in return and an opportunity for social interaction with peers.
- Solicit input from special education in shaping appropriate locker room behavior, social conventions regarding privacy, using social narratives, etc.



### 5.3.11 STRATEGIES FOR INFORMATION AND COMMUNICATION TECHNOLOGY (ICT) LESSONS

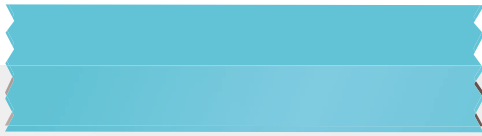
Even a very young child with autism can show a great affinity for technology, being able to immediately find the “on” button on any TV they encounter.

Visual acuity and various ways of storing/accessing information and creating thought processes often make some individuals with autism adept at using computers in the specifics of programming, sound operation, film production, etc.

A student in the autism picture may be a great asset in developing technological resources, but communication difficulties may prevent them from being able to explain how things work.

Try turning to a student with resolution problems and technical knowledge to make other tasks easier (substitute typing for writing, produce a video instead of writing a paper) or to motivate attention to other areas.





In conclusion, regardless of the pedagogical practices presented, **it is important that ALL teachers:**

- ✓ Be aware of the characteristics of autism as well as the specificities of each student, which must be considered, avoiding or managing situations.

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- ✓ It is essential to have knowledge of the characteristics of autism in general and of the student in particular. Knowing their learning style, preferences, needs and strengths are promising measures and of double student-teacher benefit.

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- ✓ Be aware of communication challenges with students in the autism setting - They should request guidelines for communication from the special education team (or multidisciplinary team), knowing that waiting time for an answer to a particular question, use of an alternative communication device, or use of communication strategies such as photo exchange may be necessary.

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- ✓ Collaborate with special education staff to provide strategies for curriculum modification such as visual support, communication access, organizational tools, and directly teaching study skills (note taking, time management, etc.).

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- ✓ Make sure activities such as outings, class presentations are taken care of ahead of time. Think of ways the student can be included, plan everything in advance with support staff.

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- ✓ Field trips: use a social narrative to describe for the student, where the trip is, that they will be with the reference figure, what will happen and the timeline for the day. Where possible include images.

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- ✓ Be aware of the student's need to develop daily living skills and promotion of ability and independence as much as possible. Explore opportunities for school staff to think creatively - Example: recess could be a great time for an intervention by the speech or occupational therapist, who could model strategies and create games that daily staff (and colleagues) could continue on days when they do not provide direct therapy.

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- ✓ The operational technicians present on the playground should be in tune with the strategies modelled by the student's teachers and therapists and ask for their help with sensitive areas.

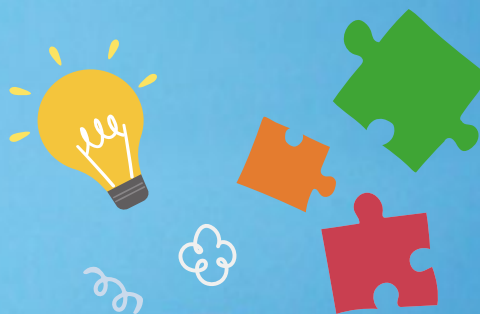
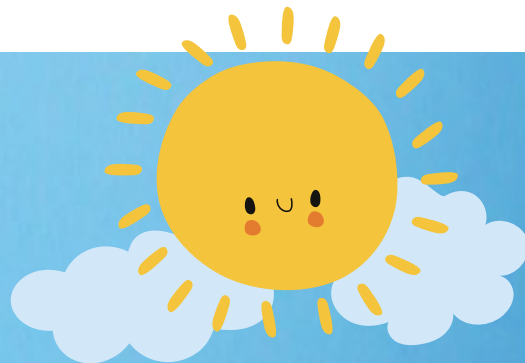
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- ✓ Don't forget that friendly greetings, acceptance and patience can help make the child feel comfortable at school and small responsibilities can help them feel a sense of belonging to the school community.

Nevertheless, we should also consider the guidelines set out in the manual “Good practices in the inclusive classroom” of the Gil Eanes School Grouping (2020), in order to make educational practices in the classroom context, not only more flexible, but also more inclusive.

In this sense, **we share the following attitudes:**

- ✓ To expose, before the students, clear expectations and rules regarding behaviour.
- ✓ Share and install behaviour related to social etiquette (to be considered in situations where there is absence or difficulty at this level).
- ✓ Instilling in students knowledge about what they can and cannot do/say through exposure, as well as through the creation of ‘make-believe’ situations
- ✓ Always use positive reinforcement, in order to obtain a certain behaviour from the student.
- ✓ Promote group work.
- ✓ Give the student a break, or divert their attention to something they like, whenever they show anxiety, agitation or inappropriate behaviour.



### 5.3.12 PRACTICES IN COMMON SPACES - PLAYGROUND AND DINING HALL

#### Follow the recommendations of Autism SPeaks:

- Start the lunch queue routine five minutes before other groups arrive.
- Reduce the number of choices.
- Visual programming can assist in establishing and continuing routine tasks by ensuring compliance (such as placing the tray and cutlery in the appropriate places) and managing behaviour.
- Visual instructions and cues can be employed to help the child make choices or know how to initiate or respond (e.g., "I would like chicken, please" hint card)
- Give positive instructions that allow incomplete language processing.
- Use descriptive praise to build desired behaviors (e.g., "I like the way you put the board in place!")
- Seek help to create settings for organising games in a small group setting and in a quieter playground. Use children with interest skills to motivate them to participate, as the social demands are enough for her to work with.
- For a pupil with particularly challenging behaviour, work with the education team to develop and employ a specific support element of the positive behaviour plan for needs in lunch /recreation.
- Set up and explain the rules of playground games. If the playground is too much for a student, determine a quieter area for board or card games.
- Minimise the use of 'no' and 'stop'. Instead of 'Don't stand in the corridor' say to the student (who cannot hear 'no' or who doesn't know the correct place to stand), 'Please sit at the lunch table'.
- Allow peers who are a reference for the child the opportunity to be a lunch buddy.
- Work with the school education team to offer social narratives to help the student understand a rule or expectation. (e.g., why sitting too close is annoying to the peer, toilet or sink etiquette, etc.).
- Work with education staff to offer written or visual support for 'unwritten canteen or playground rules' and establishing social conventions.
- Consider colleagues as support for vulnerable pupils - it may be helpful to have the help of other staff to find a way of 'pairing' pupils.



#### REMEMBER

It is important to be aware of the social vulnerability of this population of pupils and the propensity to be victims of aggressive behaviour.



#### REMEMBER

Students with autism are not socially experienced and therefore if a student is being bullied or tortured into silence they are likely to react or respond..



#### REMEMBER

The communication difficulties of a pupil with autism. Take other classmates to understand a situation before coming to a judgement regarding lack of behaviour, for example







# “ At school EVERYONE IS INVITED! ”

As a way of mobilizing and empowering all the human resources of an educational community, we indicate the **10 Commandments of Help:**

- 
1. Know all your students well and how their disabilities manifest themselves.
  2. Learn your students’ perspectives, and realise that they have considerable difficulties.
  3. Always look beyond the students’ behaviors to determine the roles those behaviors may serve.
  4. Don’t underestimate your students’ strengths or impose rules they can’t meet.
  5. Plague appropriate support in relation to the level of the students’ skill development and behaviour.
  6. Promote the pupil’s skills as well as independence.
  7. Actively seek information to assist your students in preparing and delivering the support they need to be successful.
  8. Don’t usurp the role of teachers.
  9. Leave your ego at the door of home or school!
  10. Perform your duties attentively, responsibly and respectfully at all times.

Source: *How to Be a Para Pro* by Diane Twachtman-Cullen

### WE ALSO REMIND YOU THAT:

Para Pro Education and training can occur across the board, where students learn that differences and sensitivity are not related to a particular student.

Autism Awareness Month (April) offers many opportunities to focus on a class and learn more about the statistics and impact of autism.

This may also be a topic to bring to school assembly, or to include in classroom programs by matching the content with the age level of the students.

For younger children the message might be more about the word autism and how to treat people who may be different, with tolerance and understanding. Students from other school years could learn more about the specificities of this neurodevelopmental disorder, such as what they could do to help a classmate with ASD.

## 5. 4 CHALLENGING BEHAVIOURS AND BEHAVIOUR MANAGEMENT PRACTICES

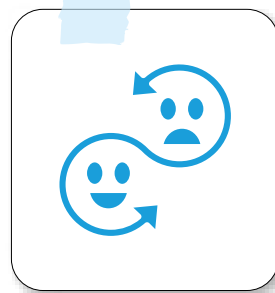
All behaviour is a form of communication. And in the case of challenging behaviours, these are no exception to the rule. There are in fact four main reasons for challenging behaviours:



1.  
they are trying to  
communicate something.



2.  
They want to see our  
reaction.



3.  
They are trying to balance  
sensory overload.



4.  
They are trying to do what  
they think will protect them.  
(Beat Autism)

According to Paro. S (2020) these are usually behaviours that should be identified and are not the fault of the child:

- “Stimming” self-stimulating behaviour is a type of repetitive behaviour. It includes: rocking, jumping, spinning, head banging, repeating words or sounds, staring at lights or spinning objects. It is usually harmless behaviour.
- Collapses, on the other hand, are usually caused by a complete loss of control when children are overwhelmed.

Whenever the behaviour occurs, it is important to consider the purpose or function of such behaviour. While some behaviours are biologically caused, many are learned over time and through experiences, and shaped by what happens before and after a behaviour occurs. Other behaviours may have started as a biological outcome - such as scratching - but may morph into something that presents a different function - such as scratching to get a teacher’s attention. (Autism Speaks, 2012)

Challenging behaviour may reflect an individual’s only way of coping with a difficulty at a particular time. Without appropriate intervention, these behaviours tend to persist and may worsen, creating an increasingly challenging cycle for the educational team/family.

Thus, promoting and teaching adaptive behaviour as early as possible is essential for long-term growth.

To develop best practice in this regard it is essential to empower ourselves as educators to learn and master the tools to address and reshape challenging behaviour.

Many parents and educators make adjustments to accommodate the behaviour of the child with ASD, but over time there are drifts from the patterns that become a ‘new normal’. This can lead, for example, to families not isolating their children from certain habitual activities such as a trip to the supermarket. The same happens in a school environment, when, due to such behaviours, educators see the need not to allow the student to participate in certain activities, such as a study visit. It is important to stress that these attitudes on the part of educational agents compromise the child’s opportunities for social interaction.



**Challenging behaviours can have a significant impact on the individual in many ways, such as:**

- Disrupting learning and, as a result, limiting long-term growth and development.
- Compromise an individual’s psychological state, resulting in depression, stress, anxiety and reduce self-confidence and self-esteem.
- Limiting experiences and excluding a person from many opportunities for growth throughout life, including play, attending traditional classrooms, leisure options and eventually work options, living conditions as well as the ability to be integrated into the community.
- Impair social relationships as well as long term interactions with siblings, parents, teachers and other reference figures.
- Cause physical fatigue, pain, injury, especially when aggression and self-harm are involved.
- Reduce independence and choice.

When a person within the autism framework has two or more diagnosed conditions, we call it a comorbid condition or dual diagnosis. Challenging behaviours are common in individuals with dual diagnosis, and they may also happen to have another undiagnosed mental health condition.

According to Autism Speaks (2012), the most common challenging behaviours are:

**INTERRUPTION** occurs when an individual exhibits inappropriate behaviours that interfere with the function and flow of what is around them. Ex: the interruption of a lesson. These behaviours may include hitting, kicking or throwing objects, knocking things over, tearing things, yelling, crying or swearing.



**EVASION** refers to running away and not returning to the place a person has left. In autism, avoidance is often used to describe behaviours in which a person leaves a safe place, a carer or a supervised situation by locking themselves in, wandering or running away.



**INCONTINENCE** is, in general, the inability to control the elimination of faeces or urine. For some people, this can be a sign that there is difficulty recognising body signals before it is too late. Other times this behaviour manifests itself as a means of gaining attention or escaping an undesirable task or situation.



**NON-COMPLIANCE** is used to describe when an individual fails or refuses to follow another person's instructions, rules or wishes. Non-compliance can be passive, such as not following a direction, or active, such as whining/complaining, becoming aggressive with another or against oneself. It is worth remembering that non-compliance can be purposeful, but sometimes it can also result from lack of understanding, lack of motivation, fatigue or poor organisation, or motor coordination issues.



**OBSESSIONS, COMPULSIONS AND RITUALS** are often strong and irresistible urges that can result in a person finding it difficult to cooperate, cope with a change or be flexible and adjust. The compulsion surrounding obsessions and rituals can often lead to new challenging behaviours if stopped or prohibited.

An obsession occurs when a person's thoughts or feelings are dominated by a particular idea, image or desire. For example, a person who only wants to talk about lifts.



A compulsion is the urge to do something in a particular way or in a particular way. For example, the need to put away all the pencils or toy cars.

The term ritual is used to describe a repetitive behaviour that the person seems to use in a systematic way, to calm themselves or avoid anxiety. For example, arranging all the pillows in a certain way before going to bed to sleep.



**PHYSICAL AGGRESSION** is an act of force that can cause harm to another person and can include hitting, biting, grabbing, pulling hair, slapping, kicking, pinching, scratching, pulling, pushing, headbutting or throwing things.



**DESTRUCTION OF PROPERTY** includes behaviour in which belongings or property are damaged, or destroyed and can include breaking, throwing, scratching, tearing, disfiguring belongings - yours or other people's - among others.



**SELF-HARM** is the attempt or act of causing harm to one's own body. Self-harm can be present in a variety of behaviours, including head-banging, head-slapping, assaulting one's own body, hitting or slapping someone, pressing on the eyeball, biting oneself, squeezing wounds and pulling hair.

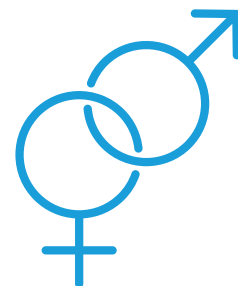


**SELF-MUTILATION**, such as cutting someone's skin, burning or breaking a bone, is less common in autism unless other psychiatric conditions co-occur.



**SEXUAL INADEQUACY** can take many forms in autism, and can be described as a lack of sexual inhibition or 'acting out' behaviour. Lack of impulse control and poor social understanding can result in actions of sexual impulses that people normally keep to themselves, such as sexual advances (offering), sexual touching, promiscuity, exposing someone's genitalia, masturbating in public, sexual moaning, obscene phone calls, or voyeurism (observing other people's intimacy).

Depending on the severity and circumstances, sexual inadequacy can generate or be considered sexual assault.



**THREATENING BEHAVIOR** includes physical actions that do not involve injury or actual contact with another person - holding a knife, for example - as well as explicit or written threats to people or property.



**ANGER OR BOUTS OF RAGE** describes an emotional outburst that may involve crying, shouting, screaming and stubborn or defiant behaviour. The person may lose control of their physical state and they may find it difficult to calm down, even if the desired outcome has been achieved.



**VERBAL AGGRESSION** usually involves the use of threats, bullying tactics, negative language, ultimatums and other destructive forms of communication.



#### 5.4.1. CAUSES OF BEHAVIOUR

There are many possible physical causes and medical issues related to behaviour. Gathering information about pain and symptoms can be especially difficult in individuals with ASD, due to communication difficulties, variable responses to sensory stimuli and pain, even in people with good verbal skills but lack of self-awareness.

It is important that educational staff and families are aware of medical issues that commonly accompany autism or, more specifically, challenging behaviours. Treating these less obvious issues can often change behaviours.

Among the most well-known, Autism Speaks cites:

**SEIZURE DISORDER** or epilepsy occurs in up to a quarter of individuals with autism. The occasional seizures can be confusing, as some may occur at night but leave effects during the day, and others may appear in milder forms, such as furtive stares.

**GASTROINTESTINAL COMPLAINTS OR DIGESTIVE DISORDERS** such as reflux, stomach pain, constipation, intestinal pain and diarrhoea are frequently reported in autism.

**SLEEP DISORDERS** or disorders such as difficulty falling asleep, insomnia, sleep apnea (interrupted breathing) and staying awake at night are usually reported in autism.

**SENSORY ISSUES** should be taken into consideration, as many individuals with autism respond to sensory stimuli in altered ways. Sounds are louder, lights are brighter, words and visual stimuli cannot be grasped at the same time and the world is painful or confusing. It is also important to assess sensory stimuli. The child’s vision and hearing should undergo specific tests, for example.

Any of these factors can alter a person’s reactivity and generate a behavioural response.

**ALLERGIES, IMMUNE DYSFUNCTIONS OR AUTOIMMUNE** conditions can point to behavioural characteristics that vary according to exposure.

**HEADACHES OR MIGRAINES** can leave a person with autism pacing back and forth with pain that could easily be eliminated with a painkiller. The inability to report pain - even in more verbal individuals - can lead to discomfort that results in challenging behaviour.

“ I had a terrible stomach ache and didn’t know what to do about it. So I wanted to run. I would run for miles just to try to get away from the pain. Of course, it was a small town and everyone knew me, so every now and then I would end up coming home. ”






– RT, adult with autism

### 5.4.3 PERSON-CENTRED APPROACH

*Looking at the person first - and not at their disability or behaviour - will be the most correct and useful approach, starting from the discovery of their strengths and their challenges. The person-centred approach will allow the educational team to find the tools and strategies that will be most useful for the child with ASD as an individual and for the professionals/family as reference educators.*

In this sense, the family-centred approach is also important, so it is essential to consider the values, priorities and specific needs of the family of the student with ASD, namely:









-  What does the family consider significant about their child?
-  What are his/her strengths? What preferences and fears do they observe in him/her?
-  How does the child respond to questions asked at home?

Ask all the questions that allow you to understand your student with ASD, their family dynamics, priorities, strengths, challenge/disruptive factors, etc.

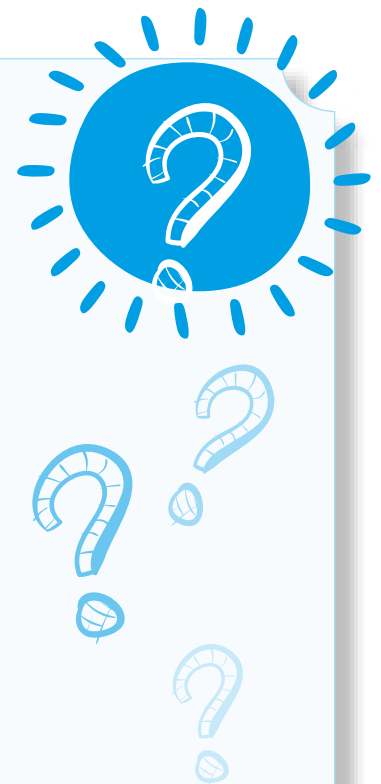
Moving from the mindset that seeks to understand how a particular behaviour affects us to a mindset that wants to know what may be happening from the individual's perspective is an important step in finding ways to understand behaviour.

Understanding behaviour will allow the educator to support the replacement of maladaptive behaviour with functional skills.

Going back to the root of the behaviour is important to consider the possible purpose or function:

-  How does this behaviour work for the person?
-  Does she get something out of it?
-  Does it get them out of something boring or difficult?
-  Does it get them attention?
-  Does this behaviour allow them to have some control over their life or environment?
-  Does it help block out pain?
-  What is good about the behaviour?
-  Is this person trying to tell me something?

Analysing the behaviour is essential in order to choose the best strategy to support the improvement of the behaviour.





#### 5.4.4 POSITIVE STRATEGIES FOR BEHAVIOUR IMPROVEMENT

Often, the right approach to controlling behaviour involves a combination of physical or mental health issues and the use of behavioural and educational supports to teach replacement and self-control skills. There is no recipe or magic solution, just a set of strategies that can often be helpful.

##### ✓ Positive Behavioural Supports

The use of Positive Behavioural Supports is more than a politically correct approach to managing behaviour. Research shows that they are effective.

Positive strategies and an **intervention plan** can be developed using an educational team, usually in response to what is learned in a functional assessment of behaviour.

Another widely used methodology that serves as a basis for defining these positive behavioural supports is ABC Analysis, an approach to understanding behaviour by analysing the Antecedent (the cause), the Behaviour, and the Consequence (the outcome).

##### ✓ Prioritisation

When there are several challenging behaviours, it is important to set priorities. It may be best to start with the target behaviours that are particularly dangerous, or the skills that can help improve situations in various behavioural scenarios.

It is important to set goals that are realistic and meaningful:

- ☀ Start with small steps that can be developed over time. A non-verbal child is not prone to speaking full sentences, but if he learns to make a card asking for “a break” when he needs to leave his desk, it will allow him to leave without having to alter the classroom dynamic.
- ☀ Being realistic in the beginning is key. This can help the school and family to realise that you are working for small, but significant changes in the lives of these children and, consequently, in the lives of their carers.
- ☀ Being realistic also allows you to maintain positivity: to focus on progress towards a goal rather than perfection.
- ☀ Goal-setting allows you to objectively measure progress towards a desired outcome.
- ☀ Setting goals also allows the family to reflect on:
  - “What behavioral changes would really represent the most improvement in our lives?”
  - “What does it really matter to do?”

*Ex: It may be more important to address a behavior like throwing things during a classroom activity than to address the person’s tendency to get up during meals. (Targeting the Big Three cit in Autism Speaks, 2012)*

Recognize that many skills take time to develop and that behavior changes require ongoing supports to be successful. In some cases, especially when recurrently ignoring a behavior that is used to “work” with your student/child, the behavior may become more intense or more frequent before it improves.

In liaison with the special education team try to keep good records and monitor progress and responses to intervention so they know if the plan is effective.

### ✓ Aspects to consider in the transition between educational environments

As we saw above, changing the environment can often reduce behavioural episodes. Expand worthwhile situations, relationships, places and opportunities.

If possible, try to adjust or avoid situations that provoke the challenging behaviour. Incorporate ways to reduce frustration and anxiety and increase understanding.

In addition to the specific recommendations about the environment and the strategies already suggested, we stress the importance of these for the behavioural issue:

- ☀ Inform transitions and change: recognise that change can be extremely unsettling, especially when it is unexpected.
- ☀ Grouping colleagues or staff appropriately for challenging activities or periods: some people are calmer than others in certain situations.

### ✓ Building a sense of pride in personal achievements and responsibility.

These types of strategies will help reduce anxiety and reactivity that results in aggression or other behaviours:

- ☀ **Celebrate and build energy and successes:** tell the student what they do well and what you like them to do. Having a sense of ability often promotes interest and motivation. Strive to give positive feedback much more often than any correction or negative feedback. *“you did a great job of putting the dishes in the sink”.*
- ☀ **Respect and listen to the student:** you may have to look at the things the child tells you, verbally or through their choices and actions. Ex: *“You are still sitting on that side of the table. Is the sun hitting your eyes?”*
- ☀ **Confirm the student’s concerns and emotions:** don’t dismiss their fears or say they don’t need to worry. His emotions are very real. Help give language to what he is feeling. Ex: *“I know you don’t like spiders. I can see that you are very scared right now.” “I can see that you are angry because our plans have changed...”*
- ☀ **Provide clear expectations for behaviour:** Show or tell what you expect the student to use visual aids, photographs or video models. The Talk-Show-Do technique is a great way to teach new skills.
- ☀ **Set the student up for educational success:** help. Accept a one-word response rather than demanding a whole sentence.

- ☀ **Ignore challenging behaviour:** do your best to prevent challenging behaviour from serving as a way to communicate or win. It may be difficult, but it is effective in the long run. Don't allow the student's shouting, to get them what they want. Behaviours can get worse before they start to improve. Be firm! Make sure that all members of the educational team are consistent in this approach and that it is combined with other positive strategies.
- ☀ **Alternate tasks:** Do something that is fun, motivating or that your student is good at. Then try something difficult. He will be less inclined to give up or get agitated if he is already in a positive setting.
- ☀ **Offer choices, but within parameters:** You can have control over the choices you offer. *"Do you want to read the story first or paint?"*
- ☀ **Provide access to breaks:** teach the student to ask for a break when he needs to pull himself together (for example, use a PECS card that represents "break"). Make sure you provide the break when he asks for it so that he learns to rely on this option and doesn't have to resort to challenging behaviours.
- ☀ **Promote the use of a safe, quiet place:** Teach him to recognize when he needs to go there. This is a positive strategy, not a punishment.
- ☀ **Establish reinforcement systems:** Use simple, predictable processes that reward your student for exhibiting the desired behavior. Surprise them by doing something good and reward them verbally and with activities, objects or "payoffs. *You earned a trip to the playground with me!"*
- ☀ **Set aside times and a place for him to do what he wants:** it is important to provide these options with school being such a noisy and populated space.
- ☀ **Reward flexibility and self-control:** *"I know you wanted to go to the pool today and that it was boring because the teacher was absent. For accepting this change of plans, let's take some time in the sensory room or sandbox?!"*
- ☀ **Choose your battles:** Strive for balance. Focus on the behaviours and skills that are most essential. Make sure you include positive feedback and intersperse opportunities for success and fun. Be resilient. Celebrate the fun and the good things!
- ☀ **Use positive/proactive language:** use language that describes what you want the individual to do. Ex: *"I love the way you used the colours"*

Research shows that positive, reinforcement-based strategies are most effective in creating long-term behavioural change. However, it is also important to have an immediate response to a behaviour in order to maintain safety or minimise confusion. Planning ahead and anticipating the type of possible situations is important.

## MORE REACTIVE STRATEGIES

- ☀ **Ignoring the behaviour (extinction)** is a commonly used strategy when the behaviour is used for attention and is moderate or non-threatening. Ignoring difficult behaviour means not giving in to the behaviour you are trying to eliminate.
- ☀ **Redirection**, which is often aided with visual elements, may involve redirecting to an appropriate behaviour or response and is usually associated with positive strategies.
- ☀ **Removal of a situation or effort** using a moment of isolation is often used to calm the person. Contrary to what most people believe, isolating a child is not about leaving him sitting in a chair for a few minutes. Isolation causes the child to lose access to cool and fun things as a result of problematic behaviour, usually by removing them from the environment that has those cool and fun things. Isolation can only occur when the individual is engaged in the activity. That is, if nothing fun was happening before the isolation, it will simply be removing the person from a non-stimulating and non-engaging environment to one of the same kind. (Autism Speaks, 2012)

Certain behaviours (those that are dangerous or harmful) are harder to ignore and sometimes need to be redirected or blocked (e.g. putting a pillow near the child's head so they don't hurt themselves while hitting), even while the adult is trying hard not to let the behaviour 'win'.

### 5.4.5 CRISIS SITUATIONS

Generally, when the child is involved in the active and disruptive state of a behaviour, such as an angry outburst or aggression, **the primary focus should be directed towards the safety of the child and those around the child.**

It is important to remember that when a child is in full breakdown mode, he or she is not able to reason, be redirected or learn replacement skills. However, this level of agitation usually does not start from nothing.

It is possible, as an educator, to learn skills that help you to anticipate and control an escalating behavioural situation that seems to be heading for a breakdown.



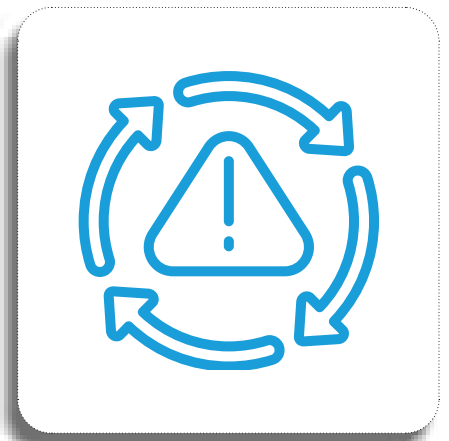
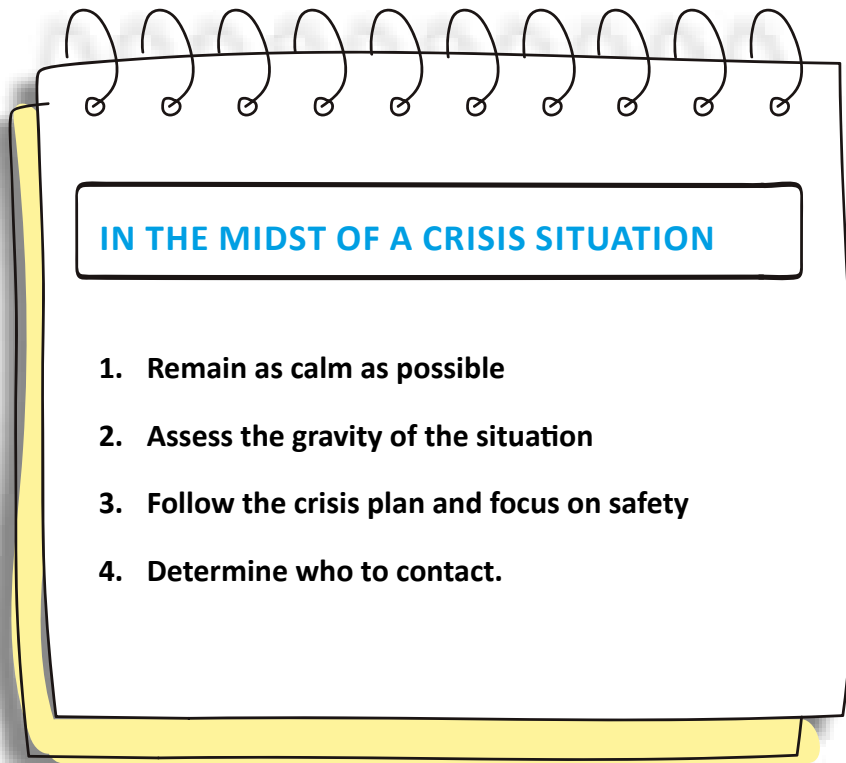
Preparation and strategies for dealing with these situations and staying calm during them are key steps and therefore it is important that the educational team and the family develop a crisis plan together. According to Autism Speaks (2012), a well-designed plan will include:

- ✓ Defined events or signs that indicate a crisis situation may develop.
- ✓ Tools and strategies to keep the person and anyone nearby safe in any setting (school, home, community).
- ✓ Intervention steps and procedures that prove the decrease in behaviour and are associated at each level with increasing levels of agitation.
- ✓ List of things to do and NOT to do that are specific to the individual’s history, fears and needs.
- ✓ Training/practical training for carers and education staff.
- ✓ Data collection and monitoring for ongoing reassessment of the effectiveness of the plan.
- ✓ Knowledge of the best prepared facility in case a hospitalisation or emergency visit is required.

### HOW TO CALM AN ESCALATING BEHAVIOUR SITUATION

- Be aware of warning signs.
- Try to reduce stressors by removing distracting elements, offering a calming activity or object, or moving to a calmer space.
- Remain calm, as the person’s behaviour is likely to arouse emotions in you.
- Be gentle and patient.
- Give the individual space.
- Give clear instructions and use simple language.
- Focus on getting the person back to a calm and stable state by providing a few minutes in a quiet, relaxing activity.
- Praise attempts at self-control and the use of strategies such as deep breathing.
- Discuss the situation or teach alternative and more appropriate responses once the person can become calm.
- Do a recapitulation with the person and the educational team so that everyone is prepared for further recognition of self-control signs and strategies in future situations.





Often, when serious and dangerous behaviors pose a risk of physical harm to the person or others nearby, it is necessary to use physical restraints or isolation to maintain safety.



**Physical restraints** include immobilising or reducing a person’s ability to move their arms, legs, body or head freely.

**Isolation** (placing the person for a few moments in a room, alone, to ‘calm down’) is often used in schools and other group settings. Isolation can serve as a quick alternative to an immediate threat, but in the long term it is not a solution to the behaviour itself, especially if the function of the behaviour is to escape or avoid something.

It is important to note that while restraints and isolation may serve to maintain safety, they are interventions that should be used as a last resort and only when alternative, less restrictive interventions are not effective, feasible or safe.

Misuse of these techniques can have serious physical and emotional consequences. Parents and caregivers should seek and receive professional guidance and training on: positive behavioral interventions and supports, crisis prevention, and safe implementation of restraint and seclusion techniques when necessary.

## 5.5 EDUCATIONAL RESOURCES

The learning characteristics of children with Autism Spectrum Disorders are variable. The use of teaching resources and methods will help children with Autism Spectrum Disorders to access all aspects of the curriculum. Below are some of the most effective resources for autism and inclusive strategies to help these children feel included in the classroom setting.

### 5.5.1 UNIVERSAL THINKING FRAMEWORK:

This instructional toolkit, expressed in the example in Figure 7 and 8, provides teachers and children with an organised language for learning. The symbols and simple descriptions of learning actions enable children of all ages to access the curriculum more effectively.



Figure 7



Figure 8

### 5.5.2 THE IMPORTANCE OF COLOURING

Studies on Autism Spectrum Disorder indicate that colouring in activities have been shown to be a key exercise in calming and focusing children. Colouring exercises such as those in figure 9 and 10 are options to consider.



Figure 9



Figure 10

### 5.5.3 FIDGET TOYS

Fidget toys, like the example in image 11, are a popular sensory resource to help children with Autism Spectrum Disorder and other sensory processing disorders stay focused and calm.

Teachers can buy ready-made fidget toys for their classroom or



Figure 11

use ones they have co-developed with their students. This toy can relax the child’s mind and, in doing so, improve their working memory and executive functioning skills.

**5.5.4 EMOTION CARDS**

These cards, like the ones in figure 12, are printable for children with this neurodevelopmental disorder and can help them recognize various emotions in others and in themselves.

*Sample activity: The teacher shuffles the emotion cards. Then show each card to the students and see if they can identify the emotion without looking at the text. If they are unable to recognize the emotion, the teacher shows the word and explains the emotion shown. For example, if the card is “happy”, the teacher could say: “When someone is happy, they can express it by smiling or laughing out loud”.*

**5.5.5 GRAPHIC ORGANIZERS**

Visual tools such as mind maps and Venn diagrams, such as those shown in figures 13 and 14, which facilitate students to develop new ideas and capture their thoughts.

# Feelings Cards



Figure 12



Figure 13



### 5.5.6 SENSORY BOXES

These boxes are useful for children with ASD for two reasons:

- a. They encourage independent play providing educational benefits to the pupil.
- b. They provide an accessible sensory experience for students with this condition.

Sensory boxes, such as the example shown in Figure 14 and 15, provide a great opportunity for children with ASD to learn and explore through tactile play.



Figure 14



Figure 15

## APPENDIX 1 - I HAVE A STUDENT WITH AUTISM IN MY CLASSROOM. WHAT NOW?

### SURVIVAL GUIDE

#### STEP 1

**In Primary 1**, if I am the class teacher: I should meet with parents and collect concrete information from parents about what their child likes and what their child doesn't like, to determine what should be avoided and what can be done to motivate/control more disruptive behaviour.

**In the remaining cycles:** if I am the class director, I should meet with parents and collect concrete information about what the child likes and dislikes, to determine what should be avoided and what can be done to motivate/control more disruptive behaviour. I should then send this information to all teachers of the class council and to all teaching assistants (in the 2<sup>nd</sup> cycle, 3<sup>rd</sup> cycle and secondary, it can be done through the head of the assistants).

**NOTE:** *this work should be done in conjunction with the teacher of Inclusive Education.*



#### OBSERVATIONS:

- There are behaviours from the teacher, from the teaching assistants and from the classmates that may generate uncontrolled moments on behalf of the student with autism. These should be avoided and can only be avoided if the school community knows which behaviours they are. No one knows the child better than the parents and it is only through the parents that we can reach the student more quickly. On the other hand, there are behaviours which calm them down in stressful situations. With the help of the parents we will know more quickly what they are and we can apply them when necessary.
- It's essential that the teachers' aides are informed as they are a fundamental part of success. In fact, the teachers' aides often spend more time with these students than the teacher/s.

#### STEP 2

As the class teacher or class director, I should seek reliable information about this spectrum and its main characteristics. Also here I can shorten the way and ask the Inclusive Education teacher for help. From here, I highlight two situations:

**Provide training for teachers and assistants:** a pamphlet should be produced, or a search for what has already been done by Autism Associations and make it available at school. these associations should ask for help with training. These associations are specialized in the spectrum, often created by parents of children with Autism.

**Work in class for the inclusion of this classmate:** with autism associations, a video and activities appropriate to the age of the students in question should be sought to raise awareness of the inclusion of the student with autism. Classmates should be aware of the limitations and potentialities of this classmate. they should know what behaviours to avoid and what behaviours to promote with this classmate. a peer tutor can/should be appointed for the student, who should be a colleague with a profile, who volunteers. He/she cannot be nominated without having a will or a profile.



#### OBSERVATIONS:

- In the previous points the parents' testimony can be requested, if they are capable of it. (There are parents who are not capable, because they are still living their state of denial, mourning, revolt. They should accept and understand themselves).

## WHAT TO AVOID IN GENERAL WITH A STUDENT WITH AUTISM

- ✘ Do not treat the student by the diminutive of his name. He should be treated as the rest of the students. The diminutive name shows pity and coitus, which hurts the parents very much.
- ✘ Touch should be avoided, especially grabbing or holding in crisis or out of control situations.
- ✘ All situations should be explained and any change in routine should be anticipated. For example, if the following day there will be no music lesson because there is a trip to the library, the student should have this information in his possession in advance. They cannot only know at the moment, as this may trigger disruptive behaviour, bringing out stereotypes (involuntary movements they cannot control).
- ✘ They should be given the opportunity to replace books and notebooks with tablets and computers. They usually have impaired fine motor skills (they hate writing) and are very good at technology, and are highly motivated to use it.
- ✘ They should favour teaching through the use of images: videos, power points, interactive games. They have a fantastic visual memory.
- ✘ The contents should be simplified and schematized.
- ✘ Whenever possible, the subject should be taught using elements from the daily life of these students. For example, if I want to teach the subject, the predicate, the verb, the direct complement, and the student is called Luís and loves trains, I can put the sentence: Luís loves trains. The fact that the sentence is about oneself, about one's own reality, increases motivation and understanding.
- ✘ All the contents that are taught should have two phases: the presentation in video or power point, and then activities in which the apprehension is verified.
- ✘ The worksheets should be small. Never put several exercises on the same sheet. It makes visual confusion/distraction and demotivates the student by the fact that he sees at once that he has a lot of work to do.
- ✘ Pay attention to noises and sounds. If possible, place the student with headphones and he himself regulates the volume. If the audio is only for the rest of the class, talk to the parents about the possibility of the student always having ear protectors in his backpack (they are a kind of earphones that cut the sound).
- ✘ For these students, homework cannot be dictated. The teacher must ensure, himself, or supervise, that the record is made.
- ✘ The student's autonomy should be worked to the maximum and he should not let his colleagues do everything for him because they consider him incapable. If we do not teach him to do, if we do not let him try, he will never succeed. (This should be explained to the class).

### ATTENTION:

- It is not a recipe. All students on the autism spectrum are different. You may find a student with autism who loves to receive and give cuddles, for example.
- We should never try to change the student. The school must mould itself to him.
- We should always believe that they are capable, because they are. However, they can only show it if we give them the possibility to do it through a different pedagogical path.



# APPENDIX 2

Pamphlet to support the class/school community information

### IT IS IMPORTANT

Look at the person first rather than their behaviour or disability.

Discover their strengths and their challenges.


**WHAT NOT TO DO**

- Calling a person by their diminutive name.
- Touching and holding without knowing whether the person will tolerate it.
- Not explaining that something is going to change in the face of routine.
- Not asking to do several things at once.
- Do not do things for the person. Stimulate the person's autonomy.

**DID YOU KNOW THAT?**

Albert Einstein  
Bill Gates  
Isaac Newton  
Vicent Van Gogh  
Steven Spielberg  
Leonardo Da Vinci

were autistic?

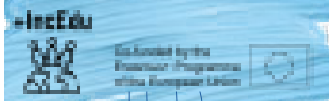


## WE ARE ALL INVOLVED


*All children matter and they really matter!*

*School is for each and every one.*

UNESCO





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## AUTISM

Knowing to understand





Flyer available to print (front and back).



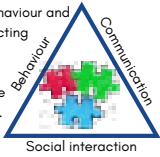
inc4edu@gmail.com  
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### WHAT IS IT?

Autism is not a disease! It is the most common developmental disorder in the world.

There is no one cause: for genetic reasons, biological and environmental factors the brain does not develop according to the standard.

It is a severe disorder of social interaction and communication, which conditions the child's behaviour and attitudes, affecting their way of relating to others and to and to get involved in the surrounding environment.



**KNOW MORE...**

Autism is 4 times more frequent in boys than in girls.

It manifests itself between the ages of 18 months and 3 years.

**It is a syndrome and, as such, appears on a spectrum with several levels.**

There is no cure for autism. However, some children make significant progress.

### CHARACTERISTICS

- Repeats words, phrases or sounds hears ("echolalia").
- Avoids physical contact and, often, eye contact as well. Reveals difficulty in relating to other people.
- Has a special interest in aligning objects. Fixation on objects or themes.
- Difficulty interpreting facial expressions.
- Stereotyping/repetitive movements. Insists on repetition and resists routine change.
- Some motor incoordination. Perceived hyperactivity or extreme inactivity.
- No sense of danger. Difficulty in expressing needs.
- Apparent insensitivity to pain. BUT sensory hypersensitivity (noise, smell, light).

### WHAT IS IMPORTANT TO KNOW

Children in the autism spectrum often have challenging behaviours.

What are the child's potential reasons for this?

- Trying to communicate
- See reactions
- Balancing emotional overload
- Self-protection

### HOW CAN I HELP?

- Keep an eye out for warning signs.
- Decreases/removes everything that causes stress and distraction by offering an activity or object that transmits calm.
- Be kind and patient. Give the person space.
- Gives clear instructions to the person and speaks simply.

**KEEP CALM**

Stay calm. The person's behavior will also arouse emotions in you.

## IT IS IMPORTANT

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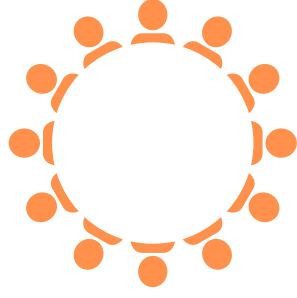
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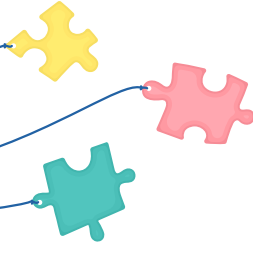
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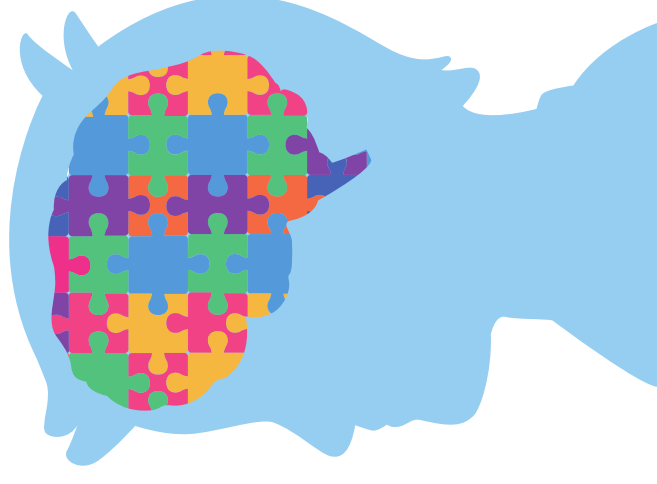


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*Knowing to understand*



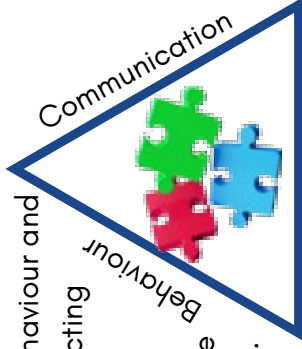
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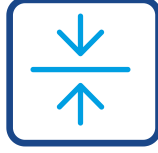
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## KEEP CALM

## ADDITIONAL RESOURCES



**THE AUTRAIN PLATFORM** is the first multipurpose open online resource that will act as a European framework for information and courses related to active social inclusion in the daily lives of people with ASD. As mentioned, the AuTrain platform is the only resource that can be used for multiple purposes. Firstly, to obtain general information about ASD, namely characteristics, etiology, or interaction and communication, in situations of daily life, with people with ASD. Second, to implement a training course that fits modern standards of education and vocational training in blended learning environments.

For this reason, the AuTrain Platform can establish itself as a European resource and a joint centralizing platform for theoretical and practical work in the area of ASD and the social inclusion of people with ASD.



**SERCRI** was born from a project, initially called “Ser Criança”, aimed at the sale of materials related to Occupational Therapy and Sensory Integration, a project initiated by pediatric occupational therapist Ana Teixeira, specialized in sensory integration. SerCri is currently a company that provides a platform with an online store for the purchase of these products, facilitating access and purchase for parents, teachers, educators, therapists, among others.

The other products are often recommended for children with certain types of difficulties, such as difficulties with self-regulation, fine motor skills, eating, etc. In this way, we provide access to solutions that allow adapting the way certain tasks are performed or training/facilitating the development of different skills, with the ultimate goal of promoting the child's participation and performance in various activities/occupations of their daily life. The range of products available are frequently used by Occupational Therapists in their clinical practice and, often, also recommended to parents, teachers and educators.

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