

#### Changing Developmental Trajectories of Young Children with ASD for Success in Pre-K to 2nd Grade Classrooms Presented by Amy M. Wetherby, PhD, CCC-SLP

A two-day virtual conference hosted by ACT.

Thursday, March 30, 2023 Friday, March 31, 2023

#### **Territorial Acknowledgement**

As visitors on this land, ACT - Autism Community Training is grateful for the opportunity to work and learn on the ancestral and unceded territory of the Skwxwú7mesh (Squamish), x<sup>w</sup>məθk<sup>w</sup>əýəm (Musqueam) and səlilidəta?t (Tsleil-Waututh) people who have lived in this area since before recorded time. These nations are həndəminəm and Skwxwú7mesh speaking peoples. The həndəminəm (Halkomelem) and Skwxwú7mesh (Squamish) languages are part of the Salish Language family, which dates back many millennia. We pay our respects to elders past, and to those present and emerging. As settlers to this land, we are committed to working towards reconciliation.

Simon Fraser University respectfully acknowledges the x<sup>w</sup>məθk<sup>w</sup>əỷəm (Musqueam), Skwxwú7mesh Úxwumixw (Squamish), səlilidəta?+ (Tsleil-Waututh), qícəỷ (Katzie), k<sup>w</sup>ik<sup>w</sup>əλəm (Kwikwetlem), Qayqayt, Kwantlen, Semiahmoo and Tsawwassen peoples on whose unceded traditional territories their three campuses reside.

#### **Event Schedule**

9:00 am –	9:30 am	Log on with Zoom Link
9:30 am –	10:30 am	Session 1
10:30 am –	10:45 am	Morning Break
10:45 am –	11:45 am	Session 2
11:45 am –	12:30 pm	Lunch
12:30 pm –	1:30 pm	Session 3
1:30 pm –	1:45 pm	Afternoon break
1:45 pm –	2:45 pm	Session 4

All times are Pacific Daylight Time (PDT)

#### Accessibility

ACT is committed to preventing, as well as identifying and removing barriers facing people interacting with our organization. Moving forward, ACT will make every effort to provide real time captioning as well as American Sign Language (ASL) interpreters for all our events.

#### Acknowledgements

We are grateful to Amy, who will be presenting information regarding early indicators in social communication and repetitive behaviours, to improve early diagnosis of autism. Amy will illustrate how to use the Early Social Interaction (ESI) project to implement and engage with families who have young children with ASD. ACT – Autism Community Training is thrilled to have Amy Wetherby provide evidence-based, practical strategies and supports for autistic children and their families.

Over the years, those who have attended ACT events know that as we are a small not-forprofit organization, we depend on community collaboration and support to sustain our work. We deeply appreciate the many parents, professionals, and organizations across British Columbia who volunteer their time, donate funds, provide sponsorship, and help spread the word - especially during these challenging times.

Thank you also, to Still Interpreting Inc. for providing ASL Interpretation services.

#### Support evidence-based resources – <u>Donate to ACT</u>!

#### **Free Resources from ACT**

Autism Videos @ ACT (AVA) – Nearly 80 quality online videos available free – without a log-in, thanks to our sponsors. <u>www.actcommunity.ca/videos</u>

**ACT's Autism Intellectual Disability (AID) Search** – Keyword search nearly 1,400 records containing evidence-based, practical, information resources in 36 languages, and 1,100 community resources in British Columbia useful to families and community professionals. <u>aid.actcommunity.ca</u>

ACT in Chinese – <u>www.actcommunity.ca/information/act-in-chinese</u>

ACT's Autism Manual for B.C - 13 chapters! <u>www.actcommunity.ca/autism-manual-for-bc</u>

**ACT's Monthly News Round-Up & Event Alerts** - Sign-up to keep in touch with developments affecting the special needs community. <u>www.actcommunity.ca/updates</u>

ACT's Facebook - ACT carefully sources interesting, insightful stories to inform our nearly 9,000 followers. <u>www.facebook.com/autismcommunitytraining</u> ACT - Autism Community Training

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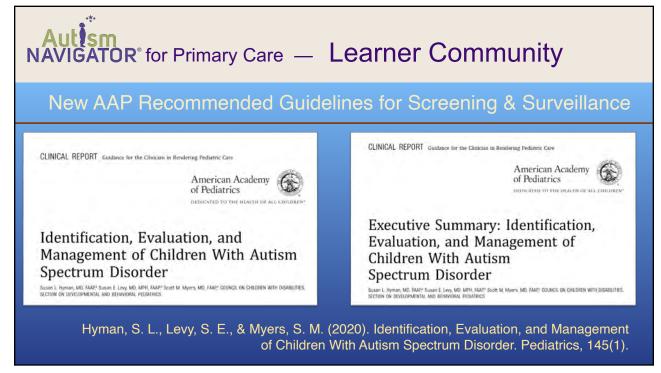
Changing Developmental Trajectories of Young Children with Autism Spectrum Disorder for Success in PreK to 2nd Grade Classrooms

**Presenter: Dr. Amy M. Wetherby**, Distinguished Research Professor Clinical Sciences • College of Medicine | Director • FSU Autism Institute

Hosted by Autism Community Training (ACT)

British Columbia, CANADA

March 30 and 31, 2023



# **Advances and Challenges**

✓ American Academy of Pediatrics has recommended screening all children for ASD at 18 and 24 months since 2007.

✓ Autism can be diagnosed by 18-24 months, **and yet** the median age of diagnosis in the US still hovers at 4-5 years.

✓ Children from minority, low income, and rural families are diagnosed 1 to 3 years later.



Changes in CDC and Percentage who a			
	• 1:36	2023	33%
	• 1:44	2021	35%
*****	• 1:54	2020	40%
******	• 1:59	2018	50%
Mining North	• 1:68	2014	
	• 1:88	2012	
	• 1:110	2009	67%
<u>, u, u,</u>	• 1:150	2007	
	• 1:500	1995	75%
	• 1:2,500	1970	

#### Limitations of the M-CHAT—most widely used screener

#### ✓ Screening Rates are High but Referral Rates are Low

In a study of 290 primary care providers, rates of M-CHAT screening were <u>93%</u> at 18 months. Only <u>31% of children were referred</u> to a specialist for an evaluation. (Monteiro et. al | *Pediatrics*, 2020)

# ✓ Universal Screening is Possible with EMR but Accuracy of M-CHAT is Low in Primary Care Settings

Nearly universal screening was achieved (<u>91%</u>). Of 26,000 children screened using the M-CHAT-F at 16-26 months, <u>sensitivity was 38.8</u>% and was lower in younger toddlers. (Guthrie et. al | *Pediatrics*, 2020).

# ✓ M-CHAT Missed 70% of Toddlers with ASD and Flagged 80% of Nonspectrum Toddlers with Intellectual Disability

Follow-up of Norwegian Cohort Study on the <u>M-CHAT at 18 months</u>, identified 834 children with ASD. Positive screen on M-CHAT identified <u>28.8 % of children with ASD</u>, 4.4% with language disorder, and <u>81.3% with Intellectual Disability without ASD</u>. (Stenberg et al. | *JADD*, 2020)

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of Development	e Early Identification al Disabilities. iving Special Education or Early Intervention Service	S
in 2018:		
School-Age Children		
6 to 11 years	12.3%	
Preschool Children		
3 to 5 years	6.8%	
<ul> <li>Infants and Toddlers</li> </ul>		
Birth to 2 years	3.5%	
This means we are missi	ng more than 70% of infants and toddlers	5.
This means we are missi	ng more than $70\%$ of infants and toddlers	S

autism

SAGE

Maybe we need . . .

- more questions
- different questions
- more than a list of questions



Original Article

The Early Screening for Autism and Communication Disorders: Field-testing an

12 to 36 months of age

autism-specific screening tool for children

The Early Screening for Autism and Communication Disorders (ESAC)

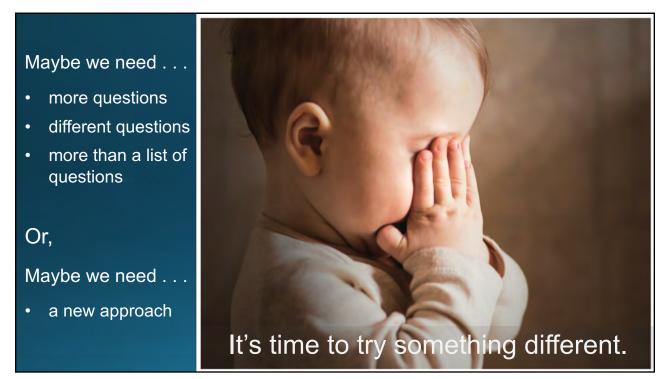
- We conducted field-testing in <u>five sites</u> with <u>471 children</u> screened for communication delays in primary care or referred for possible concern for ASD in children 12-36 months.
- We identified <u>30 items from a larger pool that best discriminated ASD</u> from children with developmental delay without autism or typically developing children.
- We established cutoffs for each age group with <u>sensitivity between 0.86 and 0.92</u> and <u>specificity between 0.74 and 0.85</u>.
- These results provide preliminary support for the validity of the ESAC as an autism-specific screener even down to 12 months.

Wetherby et al., 2021. Autism.

Funded by NIDCD & NICHD

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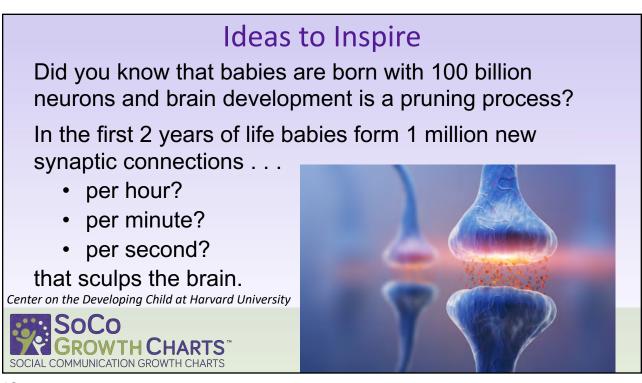








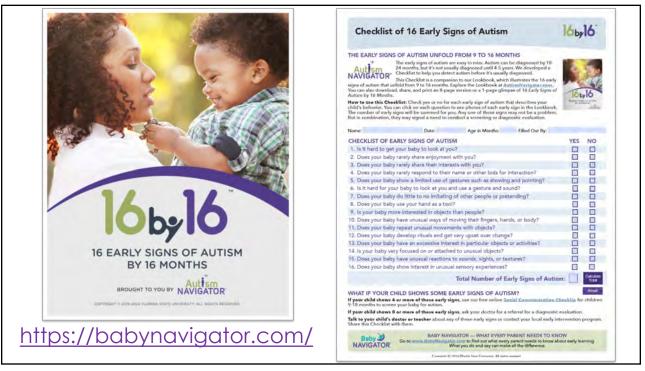








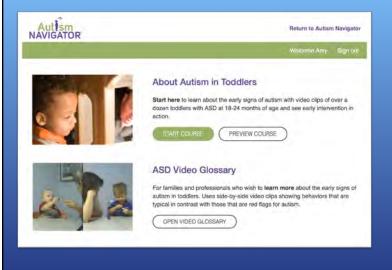






#### 16 Early Signs of Autism by 16 Months Hard to Get Your Baby to Look at You 10. Unusual Ways of Moving Their Fingers, Hands, or Body 2. Rarely Shares Enjoyment with You 11. Repeats Unusual Movements with 3. Rarely Shares Interests with You Objects 4. Rarely Responds to Name or Other 12. Develops Rituals and May Get Very Bids Upset Over Change 5. Limited Use of Gestures Such as Excessive Interest in Particular Show and Point **Objects or Activities** 6. Hard to Look at You and Use a 14. Very Focused on or Attached to Gesture and Sound **Unusual Objects** Little or No Imitating Other People or 15. Unusual Reaction to Sounds, Sights, Pretending or Textures 8. Uses Your Hand as a Tool 16. Strong Interest in Unusual Sensory 9. More Interested in Objects Experiences Than People

#### Autism NAVIGATOR<sup>®</sup> About Autism in Toddlers

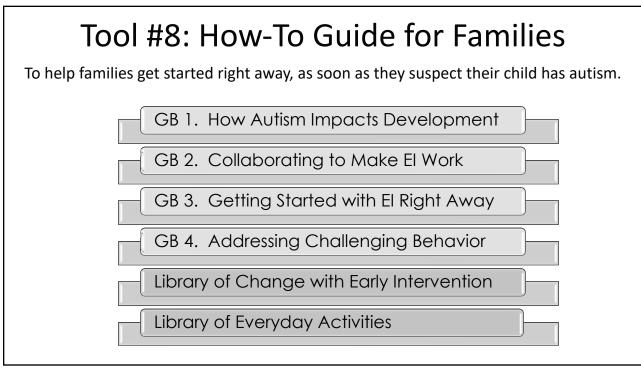


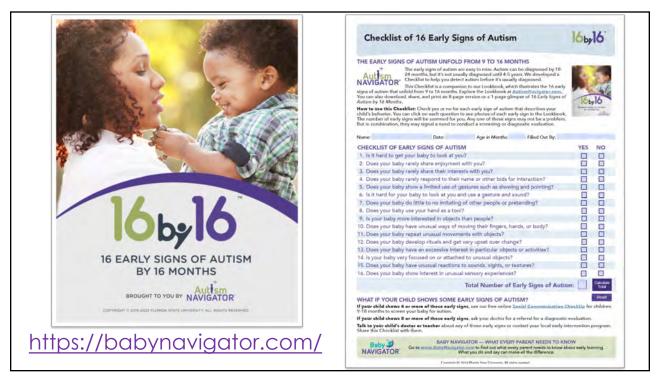
# Tool #7:

### About Autism in Toddlers Course

After a positive screen for autism, to help build consensus with families on the early diagnostic features of autism and the importance of early intervention

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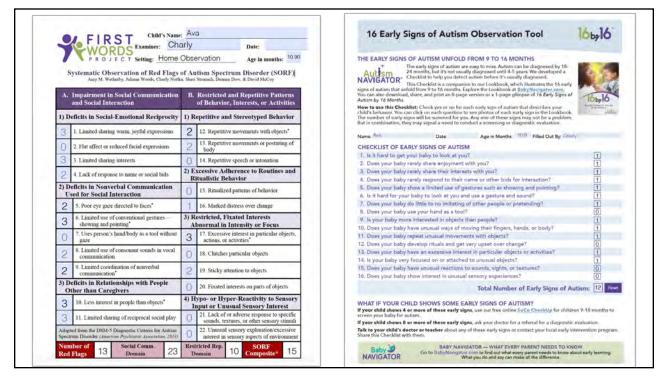








Child's Name Examiner: PROJECT Setting: Home Systematic Observation of Red Flags Any M. Wetherly, Jalana Woods, Charly North		PROJECT Setting: Clini	Date: ic Sample (CSBS) Age: of Autism Spectrum Disorder (SORF) ke. Shen Strouach, Dennas Dow, & David McCoy
A. Impairment in Social Communication and Social Interaction	B. Restricted and Repetitive Patterns of Behavior, Interests, or Activities	A. Impairment in Social Communication and Social Interaction	B. Restricted and Repetitive Patterns of Behavior, Interests, or Activities
1) Deficits in Social-Emotional Reciprocity	1) Repetitive and Stereotyped Behavior	1) Deficits in Social-Emotional Reciprocity	1) Repetitive and Stereotyped Behavior
1. Limited sharing warm, joyful expressions	12. Repetitive movements with objects*	1. Limited sharing warm, joyful expressions*	12. Repetitive movements with objects*
2. Flat affect or reduced facial expressions	13. Repetitive movements or posturing of body	2. Flat affect or reduced facial expressions*	13. Repetitive movements or posturing of body
3. Limited sharing interests	14. Repetitive speech or intonation	3. Limited sharing interests*	14. Repetitive speech or intonation*
4. Lack of response to name or social bids	2) Excessive Adherence to Routines and Ritualistic Behavior	4. Lack of response to name or social bids"	2) Excessive Adherence to Routines and Ritualistic Behavior
2) Deficits in Nonverbal Communication Used for Social Interaction	15. Ritualized patterns of behavior	2) Deficits in Nonverbal Communication Used for Social Interaction	15. Ritualized patterns of behavior*
5. Poor eye gaze directed to faces"	16. Marked distress over change	5. Poor eye gaze directed to faces*	16. Marked distress over change*
6. Limited use of conventional gestures- showing and pointing	3) Restricted, Fixated Interests Abnormal in Intensity or Focus	6. Limited use of conventional gestures- showing and pointing	3) Restricted, Fixated Interests Abnormal in Intensity or Focus
7. Uses person's hand/body as a tool without gaze	17. Excessive interest in particular objects, actions, or activities"	7. Uses person's hand/body as a tool without gaze	17. Excessive interest in particular objects actions, or activities*
8. Limited use of consonant sounds in vocal communication	18. Clutches particular objects	8. Limited use of consonant sounds in vocal communication*	18. Clutches particular objects
9. Limited coordination of nonverbal communication*	19. Sticky attention to objects	9. Limited coordination of nonverbal communication	19. Sticky attention to objects*
3) Deficits in Relationships with People Other than Caregivers	20. Fixated interests on parts of objects	3) Deficits in Relationships with People Other than Caregivers	20. Fixated interests on parts of objects
10. Less interest in people than objects	4) Hypo- or Hyper-Reactivity to Sensory Input or Unusual Sensory Interest	10, Less interest in people than objects*	4) Hypo- or Hyper-Reactivity to Sensor Input or Unusual Sensory Interest
11. Limited sharing of reciprocal social play	<ol> <li>Lack of or adverse response to specific sounds, textures, or other sensory stimuli</li> </ol>	11. Limited sharing of reciprocal social play*	21. Lack of or adverse response to specific sounds, textures, or other sensory stimul
Adapted from the DSM-5 Diagnostic Criteria for Antism Spectrum Disorder (American Proclambre Association, 2013)	22. Unusual sensory exploration/excessive interest in sensory aspects of environment	Adapted from the DSM-5 Diagnostic Criteria for Autism Spectrum Disorder (American Psychiatric Association, 2013)	22. Unusual sensory exploration/excessive interest in sensory aspects of environmen

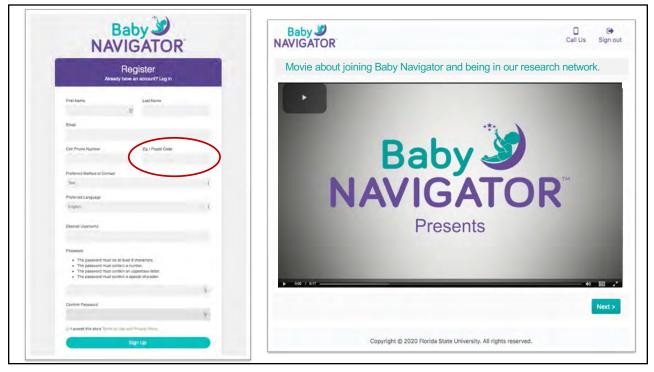


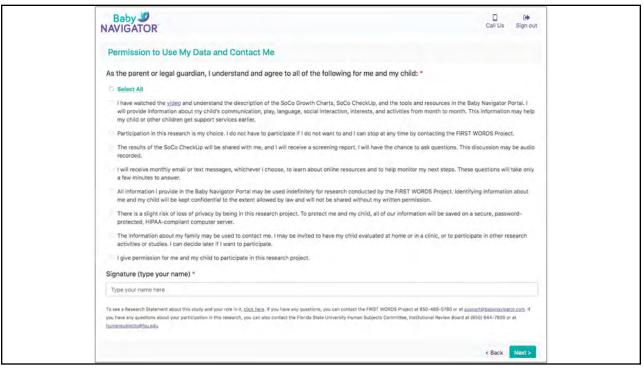






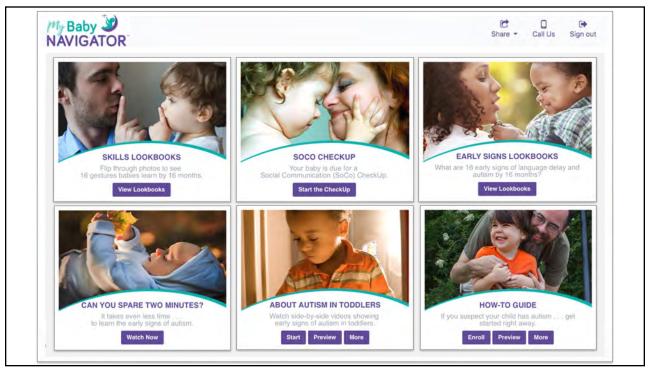


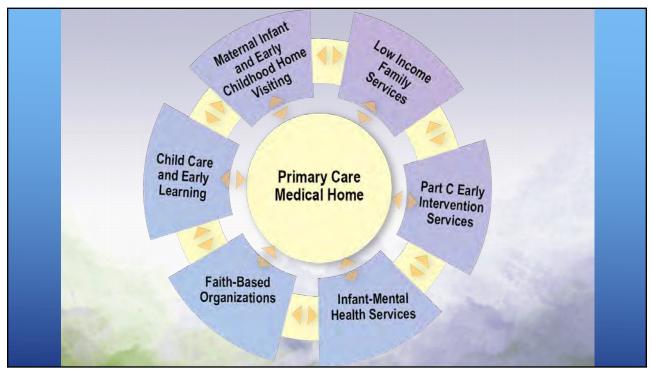




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Child's First Name * 40		Child's Middle Name	40	Child's Last Name * 🐠	
Child's Sex • 40		Child's Race *		Child's Ethnicity *	
Choose	\$	Choose	\$	Choose	;
Child's Date of Birth * 40		Was this child born m	ore than 4 weeks		
mm/dd/yyyy		early? *			
Your Relationship to Child * 😡 4	10		Who referred you to u	s? *	
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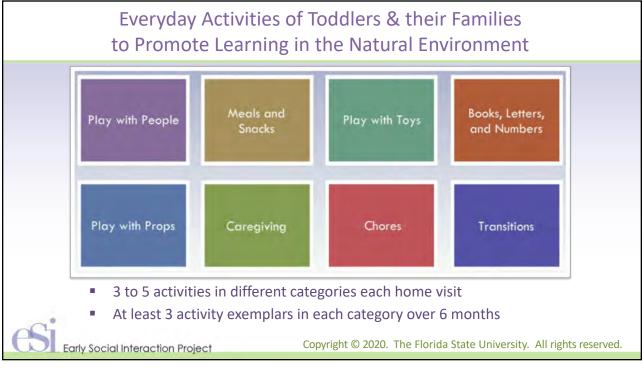








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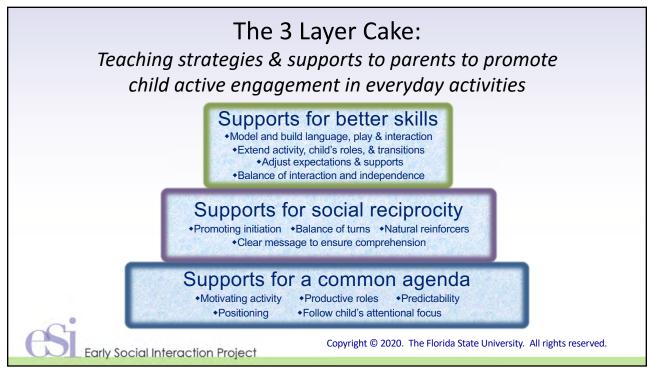


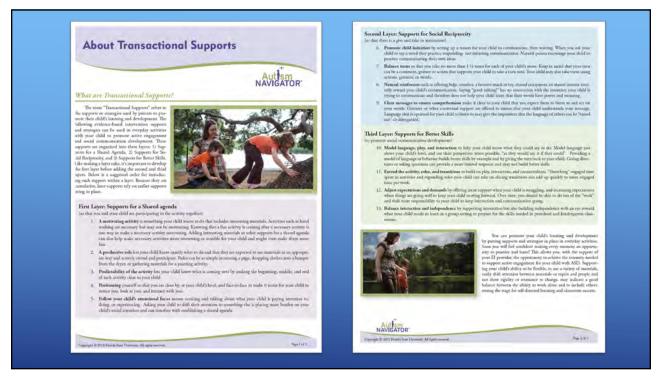


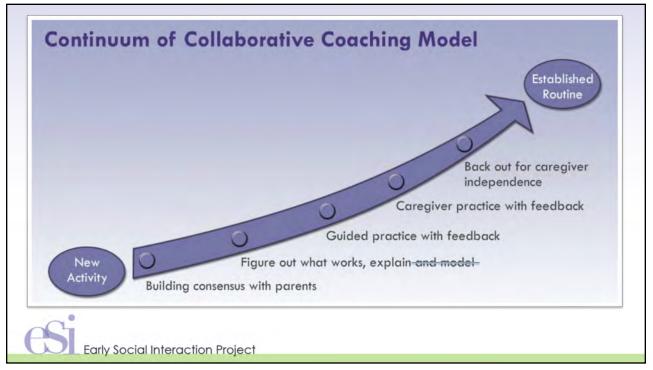


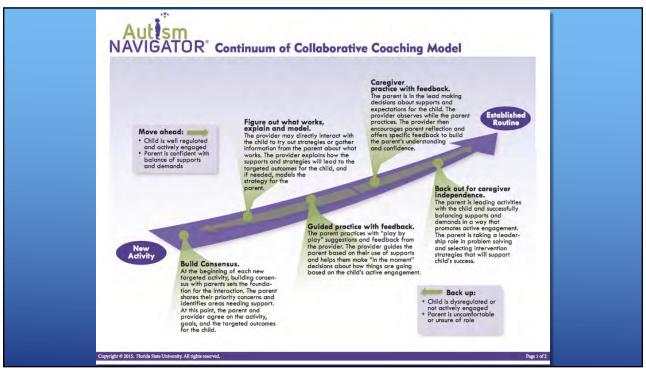














## Intensity matters...

... so how do we achieve 25 hours per week in which the child is engaged *actively* and *productively* in meaningful activities?

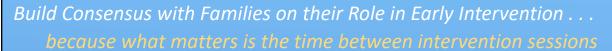
Early Social Interaction Project

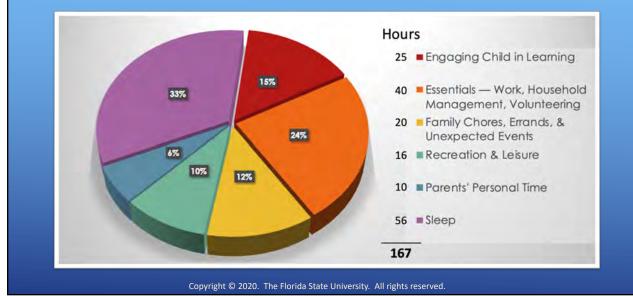


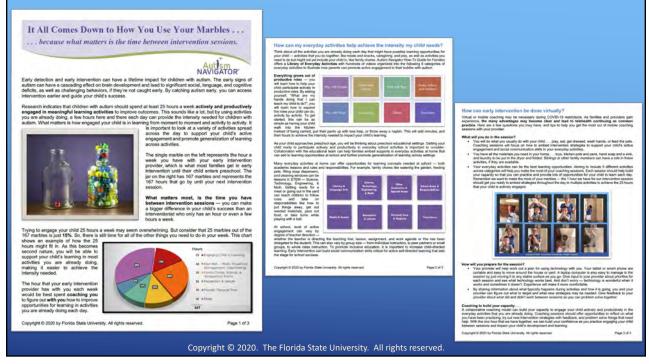
(National Research Council, 2001)

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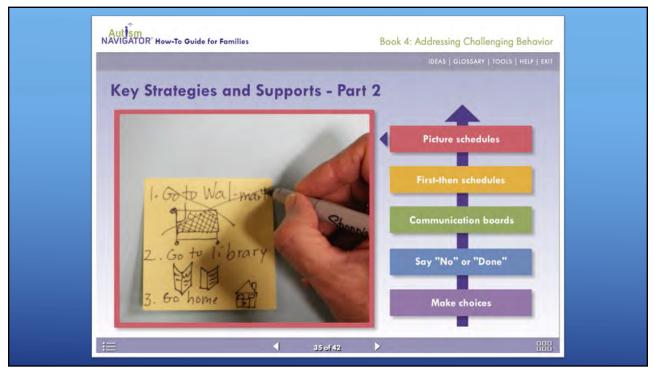


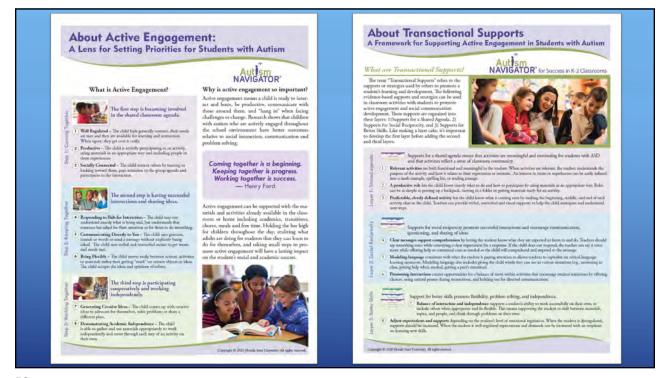


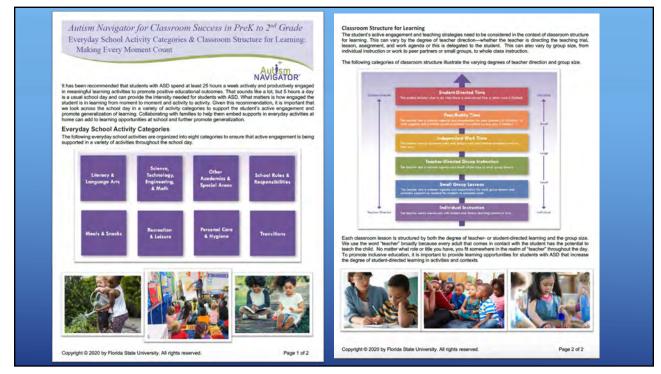












SOCIAL COMMUNICATION GROWTH CHARTS

# Milestones that Matter Most

Early communication sets the stage for talking, learning, and later success in life. What you do and say now can make all the difference in your baby's development. Especially because your baby's brain is developing at an amazing rate.

Our Social Communication Milestones cover 5 developmental domains—Play, Language, Social Interaction, Emotional Regulation, and Self-Directed Learning—with two developmental threads in each domain. Here you will find a list of 10 milestones every 2 months. Follow the threads to find out what's in store for your baby from 1 to 24 months and celebrate as your baby reaches each new milestone.

For more detail on our **Social Communication Milestones**, click on your child's age to download and print the milestones every 2 months with lots of examples: scgc.firstwordsproject.com.

At **Baby Navigator** you can get started using our **Social Communication Growth Charts**—a powerful new online tool to help parents encourage the milestones that matter most, with videos to explore and questions to chart your child's growth. Go to Baby Navigator to find out what else you get when you join. Everything is FREE and all of our resources are virtual so you can access them from anywhere anytime.



#### **1-2** MONTHS

	Gestures & Meanings	I can orient toward your voice and change what I'm doing in response to you.
Language	Sounds & Words	I can make gurgling sounds when I'm happy and different cries when I'm upset.
Disu	Using Actions with Objects	I can move my fingers and bring my hands to my mouth.
Play	Social Sharing with Objects	I can easily look at faces and objects that are near me.
Contal Internetion	Social Attention	I am drawn to look at your face when you are holding me or come near me.
Social Interaction	Intentional Communication	I can make sounds and move my arms and legs when I'm excited.
Emotional Regulation	Sharing & Managing Emotions	I can smile back at you when you smile at me.
	Regulating Challenging Moments	I can calm myself briefly by putting my hands in my mouth and sucking on my fingers.
Calf Disseted Learning	Understanding Messages	I notice you and turn my head toward you when I hear your voice.
Self-Directed Learning	Creating New Ideas	I explore my body by touching and mouthing.

#### 3-4 MONTHS

	Gestures & Meanings	I can turn toward you and bat at a toy you offer.
Language	Sounds & Words	I can make cooing sounds when I see you or see something interesting.
D	Using Actions with Objects	I can mouth or touch an object that you put near me.
Play	Social Sharing with Objects	I can watch and follow a toy move from side to side.
Contal Internetion	Social Attention	I can look at you and smile when I'm happy.
Social Interaction	Intentional Communication	I can look at you to keep the interaction going and look away when it's too much.
Emotional Regulation	Sharing & Managing Emotions	I can smile and laugh with you when you make a silly sound or a toy makes a fun noise.
	Regulating Challenging Moments	l can calm down when you rock me, touch me, or make gentle sounds.
Self-Directed Learning	Understanding Messages	I can notice things that make sounds or move around me.
	Creating New Ideas	I explore things by touching, batting, and mouthing.

#### **5-6** MONTHS

Language	Gestures & Meanings	I can try to roll over and take or touch a toy that you offer.
	Sounds & Words	I can use my voice to make different sounds in a variety of activities.
	Using Actions with Objects	I can reach to take and hold an object while on my back or belly.
Play	Social Sharing with Objects	I can enjoy interacting with you while holding an object.
Social Interaction	Social Attention	I can shift my attention from you to an object and back to you.
	Intentional Communication	I can use my voice and movements when I need something.
Emotional Regulation	Sharing & Managing Emotions	I can use different sounds to let you know I'm happy.
	Regulating Challenging Moments	I can start to calm down when I see you coming to comfort me.
Self-Directed Learning	Understanding Messages	I can notice what you say and do and change my expression or action.
	Creating New Ideas	I can try different actions and watch to see what happens.

#### 7-8 MONTHS

Language	Gestures & Meanings	I can use my hands to take things and move my body toward what interests me.
	Sounds & Words	I can make different noises with my mouth and different sounds.
Diau	Using Actions with Objects	I can grasp, hold, bang, mouth, and let go of objects to explore how they work.
Play	Social Sharing with Objects	I am interested in exploring objects with you and noticing your reactions.
Contal Internation	Social Attention	I notice you, look at you often, and can easily shift my attention to you when you talk or gesture.
Social Interaction	Intentional Communication	I am learning you are the agent of change.
Emotional Regulation	Sharing & Managing Emotions	I can smile, laugh, and use my voice when I'm happy.
	Regulating Challenging Moments	I can use different actions and sounds, in addition to crying, when I'm upset.
Self-Directed Learning	Understanding Messages	I can use different actions and sounds that show I anticipate what will happen next.
	Creating New Ideas	I am interested in learning what I can do with objects.

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# SOCIAL COMMUNICATION GROWTH CHARTS

# **Milestones that Matter Most**



#### 9-10 MONTHS

	Gestures & Meanings	I can use early gestures like giving and reaching to get you to do something.
Language	Sounds & Words	I can use my voice to make different sounds to let you know how I feel.
Disc	Using Actions with Objects	I can explore objects and repeat different actions with objects.
Play	Social Sharing with Objects	l enjoy and anticipate your actions.
	Social Attention	I notice you and what you're looking at.
Social Interaction	Intentional Communication	I can let you know what I want and what I don't want.
Emotional Regulation	Sharing & Managing Emotions	I can share happy moments when I interact with you.
	Regulating Challenging Moments	I can share sad or frustrated feelings to get you to comfort me.
	Understanding Messages	I can guess what you're about to do and use "hints" around me to understand your message.
Self-Directed Learning	Creating New Ideas	I notice you and listen to your voice to guide my actions.

#### 11-12 MONTHS

Language	Gestures & Meanings	I can use gestures like showing and pointing to get you to notice what I am interested in.
	Sounds & Words	I can use speech sounds together as if I am "talking" to you.
DIAL	Using Actions with Objects	I can use functional actions with several objects.
Play	Social Sharing with Objects	l enjoy taking turns exchanging objects with you.
Contal Internetice	Social Attention	I am eager to interact with you and help keep the interaction going.
Social Interaction	Intentional Communication	I can get you to notice me and things I'm interested in.
Emotional Regulation	Sharing & Managing Emotions	I can share enjoyment and flow with transitions between activities.
	Regulating Challenging Moments	I can hang in there during a necessary activity and do things to make myself feel better.
Self-Directed Learning	Understanding Messages	I can follow simple directions like "come here" or "give it to me" when you ask me with gestures.
	Creating New Ideas	l watch you and try to do something with you or take on a job I can do with a little help.

#### 13-14 MONTHS

Language	Gestures & Meanings	I can learn new gestures like clapping and blowing a kiss by watching and imitating you.
	Sounds & Words	I can use a few protowords or early forms of words in familiar situations.
D	Using Actions with Objects	I can use functional actions with you or a stuffed animal.
Play	Social Sharing with Objects	I can learn new actions with objects by watching and imitating you.
	Social Attention	I can watch you and imitate what you do and say.
Social Interaction	Intentional Communication	I can communicate to share my enjoyment and interests with you.
Emotional Regulation	Sharing & Managing Emotions	I can seek out situations that are fun, invite you to join me, and insist on being part of the action.
	Regulating Challenging Moments	I can make it clear to you that I do not "want" something or do not want "to do" something.
Self-Directed Learning	Understanding Messages	I can listen to you and try to figure out your message.
	Creating New Ideas	I can communicate my preference when you offer several choices or let you know I want something else.

#### 15-16 MONTHS

Language	Gestures & Meanings	I can use symbolic gestures to share ideas with you.
	Sounds & Words	I can use at least 5 different words that mean something to both of us.
Play	Using Actions with Objects	I can use pretend actions with objects that have imagined things from everyday activities.
	Social Sharing with Objects	I can use objects in a silly, playful way and in a way that helps you get things done.
Social Interaction	Social Attention	I can communicate to get your attention and check in with you regularly.
	Intentional Communication	I try to figure out what you mean and keep the interaction going.
Emotional Regulation	Sharing & Managing Emotions	I can stay active and engaged with you in fun situations and in necessary activities.
	Regulating Challenging Moments	I can tolerate you helping me stick with a task, even when I am upset.
Self-Directed Learning	Understanding Messages	I can respond when you talk to me and share my ideas with you.
	Creating New Ideas	I can be productive doing my job and stand my ground with you.

# SOCIAL COMMUNICATION GROWTH CHARTS

## **Milestones that Matter Most**



#### 17-18 MONTHS

Language	Gestures & Meanings	I can look at you and use a gesture and word together to tell you what I am thinking.
	Sounds & Words	I can use at least 10 different words that mean something to both of us.
Play	Using Actions with Objects	I can pretend using new actions that you show me or tell me to do.
	Social Sharing with Objects	I can use several objects together to build or create something with you.
Social Interaction	Social Attention	I can hang in and do something with you and monitor what you're paying attention to.
	Intentional Communication	I try to help you know what I mean by adding information to my message.
Emotional Regulation	Sharing & Managing Emotions	I can get motivated or settle down with the help of your words and stay available for learning.
	Regulating Challenging Moments	I can shift attention from something I want to do and engage in a different activity with you.
Self-Directed Learning	Understanding Messages	I can understand words without gestures in familiar situations.
	Creating New Ideas	I notice opportunities for interaction and learning and can get myself involved.

#### 19-20 MONTHS

Language	Gestures & Meanings	I can use my words to share something interesting and to protest something I don't want.
	Sounds & Words	I can use at least 20 words to name people, animals, body parts, objects, actions, and places.
Play	Using Actions with Objects	I can pretend using actions with imagined things from less familiar activities.
	Social Sharing with Objects	I can combine different types of materials to create a play scenario with you.
Social Interaction	Social Attention	I am eager to share my interests and ideas with you.
	Intentional Communication	I can persist in communicating my message to you.
Emotional Regulation	Sharing & Managing Emotions	I can share enjoyment with my words and gestures and stay engaged in the activity with you.
	Regulating Challenging Moments	I can say or do something that helps me manage my emotions and stay focused in a necessary activity.
Self-Directed Learning	Understanding Messages	I can follow simple directions when you ask me to do something.
	Creating New Ideas	I can recognize a problem or challenge and try to figure out what to do.

#### 21-22 MONTHS

Language	Gestures & Meanings	I can learn many new words every week and use them to share ideas with you.
	Sounds & Words	I can use at least 50 words and combine two words to convey different meanings.
Play	Using Actions with Objects	I can combine two different pretend actions with imagined things in a play scenario.
	Social Sharing with Objects	I can tell you about my play scenario and invite you to play with me.
Social Interaction	Social Attention	I can take a few turns sharing my ideas and listening to your ideas.
	Intentional Communication	I can ask you about things that I don't know.
Emotional Regulation	Sharing & Managing Emotions	I can use my words to ask you to help me get motivated or settle down.
	Regulating Challenging Moments	My very upset moments are getting briefer and I can flow with unpleasant or unexpected situations.
Self-Directed Learning	Understanding Messages	I can observe and listen to you to know what I am supposed to do and go along with your plan.
	Creating New Ideas	I can come up a creative idea and let you know my plan.

#### 23-24 MONTHS

Language	Gestures & Meanings	I can use phrases that describe things and request new information.
	Sounds & Words	I can use at least 100 words in phrases that include names, actions, and descriptions.
Play	Using Actions with Objects	I can combine several different pretend actions in a logical sequence.
	Social Sharing with Objects	I can begin to take on a make-believe role in a pretend play scenario with you.
Social Interaction	Social Attention	I can talk with you about a topic I'm interested in like we're having a conversation.
	Intentional Communication	I can let you know how I feel and negotiate when things don't go my way.
Emotional Regulation	Sharing & Managing Emotions	I can use my words to share moments of success with you.
	Regulating Challenging Moments	I can calm myself down, come back to you, and communicate what I want or need.
Self-Directed Learning	Understanding Messages	I can create opportunities to learn about things that interest me in everyday situations.
	Creating New Ideas	I can try out new things and seek out new opportunities for learning.

Changing Developmental Trajectories of Young Children with ASD for Success in PreK to 2nd Grade Classrooms

## **Checklist of 16 Early Signs of Autism**

#### THE EARLY SIGNS OF AUTISM UNFOLD FROM 9 TO 16 MONTHS



Name:

The early signs of autism are easy to miss. Autism can be diagnosed by 18-24 months, but it's not usually diagnosed until 4-5 years. We developed a Checklist to help you detect autism before it's usually diagnosed.

Age in Months:

This Checklist is a companion to our Lookbook, which illustrates the 16 early signs of autism that unfold from 9 to 16 months. Explore the Lookbook at <u>BabyNavigator.com</u>. You can also download, share, and print an 8-page version or a 1-page glimpse of 16 Early Signs of Autism by 16 Months.

**How to use this Checklist:** Check yes or no for each early sign of autism that describes your child's behavior. You can click on each question to see photos of each early sign in the Lookbook. The number of early signs will be summed for you. Any one of these signs may not be a problem. But in combination, they may signal a need to conduct a screening or diagnostic evaluation.



CHECKLIST OF EARLY SIGNS OF AUTISM

- 1. Is it hard to get your baby to look at you?
- 2. Does your baby rarely share enjoyment with you?
- 3. Does your baby rarely share their interests with you?
- 4. Does your baby rarely respond to their name or other bids for interaction?
- 5. Does your baby show a limited use of gestures such as showing and pointing?
- 6. Is it hard for your baby to look at you and use a gesture and sound?

Date:

- 7. Does your baby do little to no imitating of other people or pretending?
- 8. Does your baby use your hand as a tool?
- 9. Is your baby more interested in objects than people?
- 10. Does your baby have unusual ways of moving their fingers, hands, or body?
- 11. Does your baby repeat unusual movements with objects?
- 12. Does your baby develop rituals and get very upset over change?
- 13. Does your baby have an excessive interest in particular objects or activities?
- 14. Is your baby very focused on or attached to unusual objects?
- 15. Does your baby have unusual reactions to sounds, sights, or textures?
- 16. Does your baby show interest in unusual sensory experiences?

**Total Number of Early Signs of Autism:** 

Filled Out By:

#### WHAT IF YOUR CHILD SHOWS SOME EARLY SIGNS OF AUTISM?

If your child shows 4 or more of these early signs, use our free online <u>SoCo CheckUp</u> for children 9-18 months to screen your baby for autism.

If your child shows 8 or more of these early signs, ask your doctor for a referral for a diagnostic evaluation.

**Talk to your child's doctor or teacher** about any of these early signs or contact your local early intervention program. Share this Checklist with them.

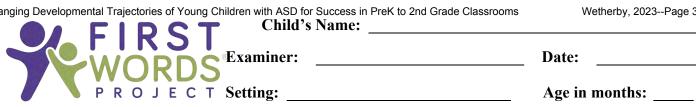


BABY NAVIGATOR — WHAT EVERY PARENT NEEDS TO KNOW Go to BabyNavigator.com to find out what every parent needs to know about early learning. What you do and say can make all the difference.

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16by16

Changing Developmental	Trajectories	of Young Children	with ASD for Success	in PreK to 2nd	Grade Classrooms



Date:

## Systematic Observation of Red Flags of Autism Spectrum Disorder (SORF) Amy M. Wetherby, Juliann Woods, Charly Nottke, Sheri Stronach, Deanna Dow, & David McCoy

A. Impairment in Social Communication and Social Interaction			B. Restricted and Repetitive Patterns of Behavior, Interests, or Activities			
1) Deficits in Social-Emotional Reciprocity			1) Repetitive and Stereotyped Behavior			
	1. Limited sharing warm, joyful expressions			12. Repetiti	ive movements with objects*	
	2. Flat affect or reduced facial expressions			13. Repetiti body	ive movements or posturing of	
	3. Limited sharing interests				14. Repetiti	ive speech or intonation
	4. Lack of response to name or social bids				ccessive A tualistic B	dherence to Routines and ehavior
2) Deficits in Nonverbal Communication Used for Social Interaction			15. Ritualiz	ed patterns of behavior		
	5. Poor eye gaze directed to faces*			16. Marked	distress over change	
6. Limited use of conventional gestures— showing and pointing*			3) Restricted, Fixated Interests Abnormal in Intensity or Focus			
	7. Uses person's hand/body as a tool without gaze					ve interest in particular objects, r activities <sup>*</sup>
	8. Limited use of consonant sounds in vocal communication				18. Clutche	s particular objects
	9. Limited coordination of nonverbal communication*				19. Sticky attention to objects	
3) Deficits in Relationships with People Other than Caregivers				20. Fixated	interests on parts of objects	
10. Less interest in people than objects*			4) Hypo- or Hyper-Reactivity to Sensory Input or Unusual Sensory Interest			
11. Limited sharing of reciprocal social play					For adverse response to specific extures, or other sensory stimuli	
	Adapted from the DSM-5 Diagnostic Criteria for Autism Spectrum Disorder (American Psychiatric Association, 2013)					l sensory exploration/excessive sensory aspects of environment
	iber of Flags	Social Comm. Domain			ricted Rep. omain	SORF Composite*

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### **Checklist of 16 Early Signs of Autism**

### THE EARLY SIGNS OF AUTISM UNFOLD FROM 9 TO 16 MONTHS



Autism by 16 Months.

The early signs of autism are easy to miss. Autism can be diagnosed by 18-24 months, but it's not usually diagnosed until 4-5 years. We developed a Checklist to help you detect autism before it's usually diagnosed.

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**How to use this Checklist:** Check yes or no for each early sign of autism that describes your child's behavior. You can click on each question to see photos of each early sign in the Lookbook. The number of early signs will be summed for you. Any one of these signs may not be a problem. But in combination, they may signal a need to conduct a screening or diagnostic evaluation.



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6 by 10

Name:	Date:	Age in Months:	Filled Out By:
		-	•

### **CHECKLIST OF EARLY SIGNS OF AUTISM**

1. Is it hard to get your baby to look at you? 2. Does your baby rarely share enjoyment with you? 3. Does your baby rarely share their interests with you? 4. Does your baby rarely respond to their name or other bids for interaction? 5. Does your baby show a limited use of gestures such as showing and pointing? 6. Is it hard for your baby to look at you and use a gesture and sound? 7. Does your baby do little to no imitating of other people or pretending? 8. Does your baby use your hand as a tool? 9. Is your baby more interested in objects than people? 10. Does your baby have unusual ways of moving their fingers, hands, or body? 11. Does your baby repeat unusual movements with objects? 12. Does your baby develop rituals and get very upset over change? 13. Does your baby have an excessive interest in particular objects or activities? 14. Is your baby very focused on or attached to unusual objects? 15. Does your baby have unusual reactions to sounds, sights, or textures? 16. Does your baby show interest in unusual sensory experiences?

Total Number of Early Signs of Autism:

### WHAT IF YOUR CHILD SHOWS SOME EARLY SIGNS OF AUTISM?

If your child shows 4 or more of these early signs, use our free online <u>SoCo CheckUp</u> for children 9-18 months to screen your baby for autism.

If your child shows 8 or more of these early signs, ask your doctor for a referral for a diagnostic evaluation.

**Talk to your child's doctor or teacher** about any of these early signs or contact your local early intervention program. Share this Checklist with them.



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Baby 🎾



We want to make a video of you and your child playing together in everyday activities at home for an hour. Below is a description of what we hope to see in the observation and some tips for planning it.

### Why do we need the video?

The purpose of the video is to see how your child interacts, communicates, and plays with you at home during everyday activities. This is important because young children can act differently at home than they do with a new person in a clinic setting. The observation is video recorded to measure social communication and play and possible red flags of autism spectrum disorder. We do not need to see your child playing alone. Instead, we want to observe you trying to get your child to interact and play with you. We hope to get a good picture of your child's strengths and any areas of difficulty during the video. We also want to see what strategies and supports you use that help your child interact and learn. We may ask to make other videos of you and your child to monitor change over time and so we can improve your child's intervention program.

### What should you be doing during the hour?

We would like to see you and your child during activities that your child particularly likes. We would also like to see activities that happen regularly in your house, but that may not be your child's favorite. If your child has any behaviors that you are worried about or that are unusual, it would be helpful to try to get your child to show these behaviors during the video.

Below are 6 categories of activities that parents often do with toddlers, with examples of each category. If possible, we want you to interact with your child in activities from each of these 6 categories:

Play with Toys	Play with People
• stuffed bear & feeding set	Itsy Bitsy Spider
• vehicles and people figures	• Ring-around-the-Rosie
<ul> <li>blocks</li> <li>puzzles</li> <li>play dough</li> </ul>	• I'm gonna get you
Meals and Snacks	Caregiving
• cookies and milk	• hand washing
• bananas & grapes	• taking a bath • brushing teeth
• goldfish crackers & juice	• dressing • changing diapers
Book Sharing	Family Chores
• Goodnight Moon	• doing laundry • picking up toys
• cars and trucks book	• watering plants
• alphabet book	• feeding pets • checking the mail

These activities can be in any room in your home or in your yard. For example, snack may be in the kitchen and then hand washing may be in the bathroom. You can record the home observation yourself or you can have someone help to be the videographer. This can be a family member or friend, or your evaluator can record the observation during a videoconference. The videographer can follow you and your child to different rooms or to your yard. You will need to reposition your smart phone or notebook computer in each room as you move around.

#### Who should be in the video?

The parent who usually takes care of your child should be in the video. If both parents want to be in the video, it is best to take turns so that only one parent is trying to engage the child in each activity. Siblings or other close relatives or friends can be in the video but should not take the lead unless they usually take care of your child.

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Changing Developmental Trajectories of Young Children with ASD for Success in PreK to 2nd Grade Classrooms The person running the camera should not be interacting with you or your child other than a brief greeting at the door. The videographer should not answer questions about how your child did or how your child is developing. The diagnostic team who will be evaluating your child can answer any questions for you after reviewing the video.

### How much time should we spend on each activity?

In order to get through 6 activities in an hour, you should spend about 5 to 10 minutes on each activity. It is fine if you spend a little more or less time on each category. It is also fine if you do not complete activities from each of the 6 categories. We want you to organize the hour observation so that we can see you interact with your child in a variety of different activities that you usually do every day. Please do not feel limited by these guidelines or that you need to finish everything during the hour video.

You do not need to spend the whole 5 to 10 minutes doing the same activity. For example, you might spend about 10 minutes on Play with Toys by playing with blocks for a few minutes, moving to trucks for another few minutes, and ending this activity category with puzzles.

#### What about distractions or interruptions?

We would like to keep distractions during the hour observation to a minimum, such as television, phone calls, or conversations with other people that do not include your child. If an interruption cannot be avoided, please try to get back to interacting with your child as quickly as possible.

The camera and person running it may also be a distraction. The videographer should stay focused on the camera and not talk to your child. This helps the interaction between you and your child to be as natural as possible. During the hour, the videographer might cue you in the following ways:

- Suggest that it is a good time to move to another activity.
- Let you know that everything is going well.
- Remind you about activity categories that you have not yet done with your child.

#### What if my child gets upset or I start to feel uncomfortable?

If your child gets upset at any point during the video, you should comfort your child the way you usually do. Seeing how your child responds when upset will provide useful information about your child. If your child needs a break from interacting, it is fine to take breaks as needed.

You can ask that the video stop or be rescheduled at any point during the video. You can also ask that the videographer pause if you or your child needs a break or for sensitive activities like diaper changing. Diaper changing can be a good activity from the caregiving category to do with your child. If you decide to do this, we will respect your child's privacy.

#### What if I need help planning the hour?

We will contact you to schedule this home video. During that phone call, we will help you plan and organize your hour observation. We realize that planning this hour can feel like a big task, so we will guide you through this. In addition, the videographer can help you remember your plan for the video when at your home. However, you can change plans during the video depending on your child's mood and interests.

When you are done with your hour of activities, record answers to 3 brief questions so we know how typical your child's behavior was during this hour:

- 1. Was your child as comfortable as usual at home with you?
- 2. Did your child communicate more or less than usual?
- 3. Was your child more or less engaged with you in these activities than usual?

Thanks for letting us video you and your child interacting at home. This information will help us know more about your child. The information will also help us improve our screening tools to identify children with autism spectrum disorder and other communication problems earlier.

Developed by the FIRST WORDS<sup>®</sup> Project



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# What does it take to learn to talk?

It takes gestures, sounds, play... and much more. Baby NAVIGATOR What every parent needs to know

What you do and say now . . . can make all the difference.

Learn how you can encourage the magic.

### Join Baby Navigator

from pregnancy until your baby is 24 months old.

One of the most exciting things about being a parent is watching your child grow and reach new milestones. *How can a parent know what to expect?* 

# Join Baby Navigator to find everything you need to know to track your baby's progress.



### 16 x 16 Lookbook Series

Did you know that ... all children should have 16 gestures by 16 months?

- Learn the critical social communication skills to launch language learning, literacy, and much more by 24 months using our 16x16 series
- Catch small delays early to prevent bigger delays later



#### Social Communication Growth Charts

A new tool for you to support your baby's development from birth to 24 months.

- Learn about the early social communication milestones from video tutorials select by age or by question
- **Explore** video clips that show the milestones and how to support your child's learning in everyday activities
- **Chart** your child's development to monitor which milestones they've reached and which ones to look for next



#### Resources

Download, print, and share documents and browse web resources.

- **Download** our print documents to help you learn our milestones and strategies to encourage the magic
- **Link** to other websites with information for parents of infants and toddlers



Early communication sets the stage for talking, learning, and later success in life. What you do and say now can make all the difference. Especially because your baby's brain is developing at an amazing rate.

When you join Baby Navigator, you'll have access to resources and tools that are customized for your baby's age and grow as your baby grows to help monitor and support your child's development.

Starting at 2 months, we'll help you celebrate your baby's monthly birthdays by inviting you to tell us about new things your baby is learning and about concerns you may have about your baby.

Good communication skills are the best tool to get ahead of the terrible twos and make it easier to handle moments of frustration that all infants and toddlers face.

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# Why is it important to have a Social Communication CheckUp?

Your baby's first smiles, sounds, movements, gestures, and words are especially important social communication milestones because they help your baby connect with you and the world around them. These milestones also predict the development of language, play, and success in school.

For many children, delays in social communication are the first signs of a language delay. Some children with social communication delays are also at risk for other developmental delays, including autism.

It's important to catch these delays early when your baby's brain is developing most rapidly and is shaped by the experiences you provide. Social communication delays can be detected early – even before your baby is talking. Research shows that catching delays early can make a big difference in your child's future.

### How can you screen for a communication delay in a child who can't talk yet?

Infants and toddlers can be screened for skills that develop before children learn to talk, such as gestures, sounds, and actions with objects used in play. These early skills provide clues about which children will need extra help or support to do their best. We screen your baby by asking you questions about these early skills.





### Register

When you join Baby Navigator, you create your very own account – *My* Baby Navigator – that will be customized for your baby's age, with links to resources that grow as your baby grows. The earlier you join, the more resources you can be using as your baby is growing.

**The mission of Baby Navigator** is to provide resources and tools for families to celebrate and support their baby's early learning and nurture the development of language and success in school... and in life.

## Has your baby had a Social Communication CheckUp?

In *My* Baby Navigator, you'll be invited to fill out our Social Communication CheckUp, or SoCo CheckUp for short – every 3 months, starting at 9 months until 24 months.

- The SoCo CheckUp asks parents questions about gestures and sounds your child uses and how your child plays to screen for language delay, social communication delay, and autism.
- The SoCo CheckUp takes only 10 to 15 minutes to complete, and results are automatically scored online – so you have access from anywhere anytime. And it won't cost you anything.

### What if something doesn't seem quite right?

In *My* Baby Navigator, you will have resources customized to your baby's results on the SoCo CheckUp. These are to help you learn how early signs of language delay and autism can impact your child's development, what you can do about it, and how you can build your care team. We have other research opportunities that we may invite you to join. You can decide later whether or not you want to learn more about or participate in any research opportunity.

### How will this help families?

By participating in our research study, you are joining a network of families dedicated to improving outcomes for all children worldwide. The information we gather on children who are developing typically and children who are delayed is used to improve our screening tools and online resources. Through our research findings and resources, we aim to improve early detection of social communication delays by helping families learn how to support their child's development in everyday activities and access intervention services sooner.



Baby Navigator is grant funded, so everything is FREE. All of our resources are virtual so you can access them from anywhere anytime.

Baby Navigator is developed by the FIRST WORDS Project with funding from the following agencies:

- National Institute of Mental Health
- Eunice Kennedy Shriver National Institute of Child Health and Human Development
- National Institute on Deafness and Other Communication
  Disorders
- Institute of Education Sciences
- State of Florida Legislature

The content of our tools and resources is solely the responsibility of the authors and does not necessarily represent the official views of these agencies.

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### Everyday Activities of Toddlers and Their Families Making Every Moment Count

### Baby 3 NAVIGATOR



Toddlers learn by doing. They learn about their world and how to interact with others by exploring and participating in activities around them. For children with social communication delays or autism spectrum disorder (ASD), this is very important. Learning in everyday activities where they use what they learn makes the skills immediately useful and functional and more likely to generalize. Everyday activities and routines at home provide an incredibly rich source of learning opportunities for toddlers. Everyday activities can vary widely across families and cultures, but there are many common activities that families share. Despite differences, most families spend time eating, caring for each other, doing family chores, playing, and learning together. By taking advantage of the activities that you are already spending time doing, you can provide the intensity needed to support your child's learning. This extra support is critical for children with social communication delays and ASD to reach their potential.

### All families of toddlers spend some time in everyday activities in the following 8 activity categories:



**Play with People** includes social games such as peek-a-boo, "I'm gonna get you" and hide & seek. It also includes songs and rhymes like "Ring-around-the-Rosy" and "Itsy-bitsy Spider." Because children with ASD can become overly focused on objects, keeping objects out of the activity removes the competition for their attention. It is a good category to get started with because you can quickly learn to provide supports for many components of active engagement and be successful getting your child to look at them, laugh, and share enjoyment.

**Play with Props** is a good next step before activities with small toys and objects. Props include play equipment such as a slide, rocking horse, or swing, and moveable objects, such as a large ball, wagon, blanket, or sofa cushions. Having large props is a way to introduce objects in play without too much competition for attention. By adding motivating actions and movements, you can help to create enjoyment with the object and interaction.





**Meals and Snacks** provide a great context for sharing enjoyment and interests as well as natural everyday practice of requests and protests. By having your child participate in preparing the food, cooking, setting the table, and cleaning up, you can create more opportunities for practice and learning.

**Caregiving Activities** such as washing hands, dressing, changing diapers, bathing, and brushing teeth happen many times a day and can be structured to offer many opportunities for productive roles, social interaction, and communication.



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**Play with Toys** includes constructive play with solid objects like blocks and puzzles; or fluid materials like play dough, sand, or finger paint, and pretend play with vehicles, animals, or dolls. Children with ASD may have limited skills in pretend play or restricted interests to particular toys. They may have relative strengths with constructive play, and therefore, that may be easier to get started to promote social interaction when playing with toys.

**Family Chores** like picking up toys, putting clothes in the laundry, feeding a pet, getting the mail, or taking out the trash or recycling are opportunities to engage your child. Taking advantage of the time that you already spend doing family chores can create learning opportunities during these necessary tasks.





**Books, Letters, and Numbers** can help promote language and literacy. Children with ASD are often interested in shapes, colors, letters, and numbers. These activities can be set up to promote interaction and sharing interests with books, magazines, photo albums, iPad apps, or computer games.

**Transitions** are the moments that occur between activities and are critical to adding predictability to what is coming next as well as expanding opportunities for learning throughout the day. Teaching your child how to "make a plan" as one activity ends can help provide a smooth transition and promote active engagement from one activity to the next.



Practice makes perfect! Learning to embed intervention supports and strategies in a variety of everyday activities across these 8 categories will promote learning and generalization for both you and your child. However, moving from simply having opportunities to promoting active engagement for a toddler with ASD can be challenging. It may require careful planning and support by you and your early intervention provider. Families may need help to expand meaningful activities with new ideas or to add new types of routines and activities that will build your child's inventory of experiences.

Variety is the spice of life! As you gain confidence and your child makes gains, you are encouraged to create "hybrid" categories by mixing elements, such as playing with toys in the bathtub, looking at a photo album during snack, or playing a social game during diaper changing.

All the world's a stage! The home provides a safe context for you to become comfortable and confident using intervention supports and strategies that you are learning. But don't forget that learning opportunities extend beyond the walls of home. These 8 activity categories can be extended to places in the community. Families go to the grocery store, the post office, the doctor, and run all sorts of other errands. Toddlers and their families also spend time at the neighborhood playground, library, church, or temple. Families visit other family members and friends, attend school activities for siblings, or go out to dinner. These natural environments in the community also provide rich and varied opportunities where learning can occur.

Parents are often surprised to find that some of the most fruitful opportunities for a child to learn occur in the context of the activities you are already doing each day. When you take a close look at how your family spends time, you will find moments for learning where you least expect it. Most importantly, by taking advantage of the ordinary events of everyday life, you really do make every moment count for your child's learning. Moments add up to minutes and hours that are critical to achieve the intensity needed to impact learning and development for a child with ASD.



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# **About Active Engagement**

### What is Active Engagement? Children are actively engaged if they are....



Well Regulated. Your child feels generally content and their needs are met. When fussy, they get over it easily.

Productive. Your child is doing something productive in an every day activity or in play, and can include people in those experiences.

Socially connected. Your child notices you by turning or looking toward you, pays attention to what you are doing together and keeps the interaction going.

Looking at your face often. Your child looks toward you both when asking you to do something and sharing enjoyment and interest.

Responding to your voice and words. Your child may not yet understand exactly what is being said, but understands that you have asked for their attention or for them to do something.

Communicating directly to you. Your child uses gestures, sounds or words to send a message without being asked.



Being Flexible. Your child moves easily between actions, activities, or materials rather than getting "stuck" on certain objects or ideas.



Generating new ideas. Your child comes up with creative ideas to advocate for themselves, to describe something they see, to share with you about a new and different plan, or a new way to play.



### Why is active engagement so important?

Active engagement means a child is ready to interact and learn, be productive, communicate with those around them, and "hang in" when faced with challenges or change. Learning how to keep your child actively engaged is important, because research shows that children with autism spectrum disorder who have at least 25 hours of engaged time per week do better in kindergarten than those who do not.

Coming together is a beginning. Keeping together is progress. Working together is success. --- Henry Ford

You are learning strategies to help you keep your child engaged so that you can achieve 25 hours of time each week helping your child interact and learn. Active engagement can occur in every day activities that your family already spends time doing like caregiving, having meals and snacks, playing, sharing books, and doing family chores. It can also happen in community settings such as a grocery store, playground or a restaurant. Your interventionist will help you see what elements of active engagement are going well, and what areas need more support. Your effort to promote active engagement now will have a lasting impact on your child's social and academic success.

**Step 2: Keeping Together** 

Step 1: Coming Together

Step 3: Working Together

# **About Transactional Supports**



### What are Transactional Supports?

The term "Transactional Supports" refers to the supports or strategies used by parents to promote their child's learning and development. The following evidence-based intervention supports and strategies can be used in everyday activities with your child to promote active engagement and social communication development. These supports are organized into three layers; 1) Supports for a Shared Agenda, 2) Supports for Social Reciprocity, and 3) Supports for Better Skills. Like making a layer cake, it's important to develop the first layer before adding the second and third layers. Below is a suggested order for introducing each support within a layer. Because they are cumulative, later supports rely on earlier supports being in place.



### First Layer: Supports for a Shared agenda

(so that you and your child are participating in the activity together)

- 1. A motivating activity is something your child wants to do that includes interesting materials. Activities such as hand washing are necessary but may not be motivating. Knowing that a fun activity is coming after a necessary activity is one way to make a necessary activity motivating. Adding interesting materials or other supports for a shared agenda can also help make necessary activities more interesting or sensible for your child and might even make them more fun.
- 2. A productive role lets your child know exactly what to do and that they are expected to use materials in an appropriate way and actively attend and participate. Roles can be as simple as turning a page, dropping clothes into a hamper from the dryer, or gathering materials for a painting activity.
- 3. **Predictability of the activity** lets your child know what is coming next by making the beginning, middle, and end of each activity clear to your child.
- 4. **Positioning** yourself so that you are close by, at your child's level, and face-to-face to make it easier for your child to notice you, look at you, and interact with you.
- 5. **Follow your child's attentional focus** means noticing and talking about what your child is paying attention to, doing, or experiencing. Asking your child to shift their attention to something else is placing more burden on your child's social attention and can interfere with establishing a shared agenda.

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### Second Layer: Supports for Social Reciprocity

(so that there is a give and take in interaction)

- 6. **Promote child initiation** by setting up a reason for your child to communicate, then waiting. When you ask your child to say a word they practice responding- not initiating communication. Natural pauses encourage your child to practice communicating their own ideas.
- 7. **Balance turns** so that you take no more than 1 ½ turns for each of your child's turns. Keep in mind that your turn can be a comment, gesture or action that supports your child to take a turn next. Your child may also take turns using actions, gestures, or words.
- 8. **Natural reinforcers** such as offering help, comfort, a favorite snack or toy, shared enjoyment, or shared interest naturally reward your child's communication. Saying "good talking!" has no connection with the intention your child is trying to communicate and therefore does not help your child learn that their words have power and meaning.
- 9. **Clear messages to ensure comprehension** make it clear to your child that you expect them to listen to and act on your words. Gestures or other contextual support are offered to ensure that your child understands your message. Language that is optional for your child to listen to may give the impression that the language of others can be "tuned out" or disregarded.

### Third Layer: Supports for Better Skills

(to promote social communication development)

- 10. **Model language, play, and interaction** to help your child know what they could say or do. Model language just above your child's level, and use their perspective when possible, "as they would say it if they could". Providing a model of language or behavior builds better skills by example and by giving the turn back to your child. Giving directions or asking questions can provide a more limited response and may not build better skills.
- 11. **Extend the activity, roles, and transitions** to build on play, interaction, and connectedness. "Stretching" engaged time spent in activities and expanding roles your child can take on during transitions can add up quickly to more engaged time per week.
- 12. Adjust expectations and demands by offering more support when your child is struggling, and increasing expectations when things are going well to keep your child moving forward. Over time, you should be able to do less of the "work" and shift more responsibility to your child to keep interaction and communication going.
- 13. **Balance interaction and independence** by supporting interaction but also building independence with an eye toward what your child needs to learn in a group setting to prepare for the skills needed in preschool and kindergarten classrooms.



You can promote your child's learning and development by putting supports and strategies in place in everyday activities. Soon you will feel confident making every moment an opportunity to practice and learn! This allows you, with the support of your EI provider, the opportunity to achieve the intensity needed to support active engagement for your child with ASD. Supporting your child's ability to be flexible, to use a variety of materials, easily shift attention between materials or topics and people and not show rigidity or resistance to change, may indicate a good balance between the ability to work alone and to include others, setting the stage for self-directed learning and classroom success.



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# Autism NAVIGATOR<sup>®</sup> Continuum of Collaborative Coaching Model

#### Move ahead:

- Child is well regulated and actively engaged
- Parent is confident with balance of supports and demands

### Figure out what works, explain and model.

The provider may directly interact with the child to try out strategies or gather information from the parent about what works. The provider explains how the supports and strategies will lead to the targeted outcomes for the child, and if needed, models the strategy for the parent.

### Caregiver

practice with feedback. The parent is in the lead making decisions about supports and expectations for the child. The provider observes while the parent practices. The provider then encourages parent reflection and offers specific feedback to build the parent's understanding and confidence.

### Established Routine

### New Activity

### **Build Consensus.**

At the beginning of each new targeted activity, building consensus with parents sets the foundation for the interaction. The parent shares their priority concerns and identifies areas needing support. At this point, the parent and provider agree on the activity, goals, and the targeted outcomes for the child.

### Guided practice with feedback.

The parent practices with "play by play" suggestions and feedback from the provider. The provider guides the parent based on their use of supports and helps them make "in the moment" decisions about how things are going based on the child's active engagement.

### Back out for caregiver independence.

The parent is leading activities with the child and successfully balancing supports and demands in a way that promotes active engagement. The parent is taking a leadership role in problem solving and selecting intervention strategies that will support child's success.

#### Back up:

- Child is dysregulated or not actively engaged
- Parent is uncomfortable or unsure of role

### Changing Developmental Trajectories of Young Children with ASD for Success in PreK to 2nd Grade Classrooms **Continuum of Collaborative Coaching Model**



#### **Coaching to Build Caregiver Capacity**

Coaching in early intervention uses a collaborative process - not an expert model. At the foundation of the coaching relationship is the Early Intervention (EI) provider's willingness and ability to share their knowledge of evidence-based practice in order to build the capacity of a parent to make decisions and lead the intervention process with confidence. When coaching, the EI provider must go beyond relationship-based strategies and incorporate real life practice and clear explanations that help promote confident action and decision-making. Parents also gain confidence by problem solving and reflecting with EI providers. Using high order learning strategies with a trusted coach enables parents to brainstorm when and how to apply the interventions in other situations and settings, to get feedback on what might work, and what to do if it doesn't. Equipping parents to support their children when the EI providers are not present is the ultimate goal of coaching.

The progression of coaching strategies demonstrated by the arrow provides a framework for teaching and expanding intervention strategies to new activities and routines. The goal is to meet parents where they are in the current moment by providing support for their learning and a scaffold to increase their independence as quickly as possible. The many everyday activities that families are spending time doing with their toddlers provide the context for embedded intervention in natural environments. The EI provider can support parent's confidence and competence as they make every moment an opportunity to practice and learn with increasing independence. This is a viable way to provide the intensity needed to support active engagement for toddlers with ASD. The impact of early intervention can increase exponentially if parents achieve independence and continue to support active engagement and advocate for their child during preschool, the transition to kindergarten, and beyond. This reflects the intention behind the IDEA legislation for services and supports in the natural environment to build the family's capacity to enhance their child's development.











#### Deciding When to Move Ahead or Back Up along the Arrow

The arrow portrays the continuum of collabo- ly with an eye toward moving ahead to guided rative coaching that is fluid in nature, meaning practice as quickly as possible so that the parent's that the EI provider "moves ahead" by supporting parent independence as things are going well, or "backs up" by offering more direct support when needed. The provider should find the point on the arrow that meets the needs of the family in the moment, but should always keep an eye on the bigger goal of parent independence. The provider's role is to give parents just the right amount of support needed to feel confident getting their child actively engaged no more and no less.

The decision to move ahead or back up is based on many factors and may even change from minute to minute, activity to activity, or day to day. This will depend on the parent's level of competence and confidence to actively engage the child in a specific activity and specific moment within the activity. The EI provider may need to fluctuate along the arrow based on both the parent and child depending on the newness of the activity and how motivating the activity is. In some situations, the provider's role to offer support will be very clear and solicited by the family. Families may express frustration that the child finds hand washing unpleasant and they need new ideas to make it work, or that a favorite toy has become so enticing that it is getting difficult to motivate the child to participate in other activities. The provider will want to build consensus with the family about the issue at hand and the child's priority outcomes. The provider will need to consider how things are going outside of the intervention sessions, and help to brainstorm and problem solve. The parent may need the provider to model a strategy that the parent is not yet familiar with, and then closely guide the parent's practice to ensure success. But modeling should be used judicious-

confidence is not undermined. Once it is clear what works to support the child, the provider should move ahead and back out for caregiver independence as soon as possible, so that the parent gets the needed practice with the support of the provider close by.

When the parent is more comfortable and is practicing a familiar activity, the provider still observes with a keen eye on the child's active engagement and parent's use of transactional supports. Often the provider is able to offer a different perspective and may notice an opportunity for better active engagement that the parent may not yet recognize. The provider may simply offer a quick suggestion of an additional role for the child as they observe. In other situations, the parent may first practice an activity, and then have the opportunity to reflect with the provider on the elements of active engagement that are in place. The parent and provider can then identify next steps as the parent moves toward independence.

Effective coaching allows the parent to experience the payoff of meaningful interaction with their child and build a sense of competence and confidence, because what matters most is what the parent can do outside of the intervention session when the provider is not there. Parents who are coached with an eye toward independence also become good advocates for what their child needs beyond the home environment. They are able to teach other family members, caregivers, and teachers how to best support their child's development and learning in the larger context of community and educational settings.



Early detection and early intervention can have a lifetime impact for children with autism. The early signs of autism can have a cascading effect on brain development and lead to significant social, language, and cognitive deficits, as well as challenging behaviors, if they're not caught early. By catching autism early, you can access intervention earlier and guide your child's success.

Research indicates that children with autism should spend at least 25 hours a week **actively and productively engaged in meaningful learning activities** to improve outcomes. This sounds like a lot, but by using activities you are already doing, a few hours here and there each day can provide the intensity needed for children with autism. What matters is how engaged your child is in learning from moment to moment and activity to activity. It



is important to look at a variety of activities spread across the day to support your child's active engagement and promote generalization of learning across activities.

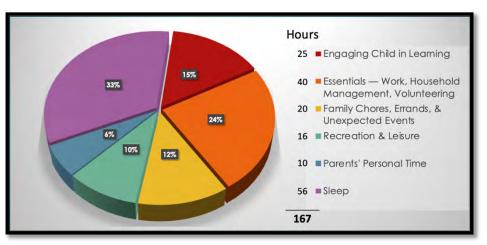
The single marble on the left represents the hour a week you have with your early intervention provider, which is what most families get in early intervention until their child enters preschool. The jar on the right has 167 marbles and represents the 167 hours that go by until your next intervention session.

What matters most, is the time you have between intervention sessions — you can make a bigger difference in your child's success than an interventionist who only has an hour or even a few hours a week.

Trying to engage your child 25 hours a week may seem overwhelming. But consider that 25 marbles out of the 167 marbles is just **15%**. So, there is still time for all of the other things you need to do in your week. This chart

shows an example of how the 25 hours might fit in. As this becomes second nature, you will be able to support your child's learning in most activities you are already doing, making it easier to achieve the intensity needed.

The hour that your early intervention provider has with you each week would be best spent **coaching you** to figure out **with you** how to improve opportunities for learning in activities you are already doing each day.



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### How can my everyday activities help achieve the intensity my child needs?

Think about all the activities you are already doing each day that might have possible learning opportunities for your child — activities that you do together, like meals and snacks, caregiving, and play, as well as activities you need to do but might not yet include your child in, like family chores. *Autism Navigator How-To Guide for Families* offers a **Library of Everyday Activities** with hundreds of videos organized into the following 8 categories of everyday activities to illustrate how parents can promote active engagement in their toddler with autism.

Everything grows out of productive roles - vou will learn how to help your child participate actively in productive roles. By asking yourself, "What are my hands doing that I can teach my child to do?", you will learn how to expand the roles your child can do, activity by activity. To get started, this can be as simple as having your child walk into the kitchen



instead of being carried, pull their pants up with less help, or throw away a napkin. This will add minutes, and then hours to achieve the intensity needed to impact your child's learning.

As your child approaches preschool age, you will be thinking about preschool educational settings. Getting your child ready to participate actively and productively in everyday school activities is important to consider. Collaboration with the educational team can help families embed supports in everyday activities at home that can add to learning opportunities at school and further promote generalization of learning across settings.

Many everyday activities at home can offer opportunities for learning concepts needed at school — both academic lessons and rules and responsibilities. For example, family chores like watering the garden, feeding

pets, filling soap dispensers, and cleaning windows can be lessons in STEM — Science, Technology, Engineering, & Math. Getting ready for a meal or going out in the yard can teach children to follow rules and take on responsibilities like how to put things away, get out needed materials, pass out food, or take turns while playing with a ball.

Science, Other Literacy & Technology, School Rules & Academics & Language Arts Engineering, Responsibilities **Special Areas** & Math **Personal Care** Recreation **Meals & Snacks** Transitions & Hygiene & Leisure

At school, level of active engagement can vary by degree of teacher direction —

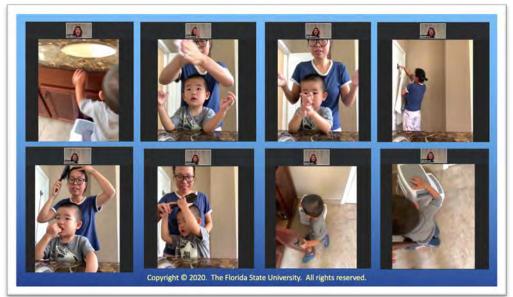
whether the teacher is directing the teaching trial, lesson, assignment, and work agenda or this has been delegated to the student. This can also vary by group size — from individual instruction, to peer partners or small groups, to whole class instruction. To promote inclusive education, it is important to increase child-directed learning. Early intervention can build social communication skills critical for active self-directed learning that sets the stage for school success.

How can early intervention be done virtually?

Virtual or mobile coaching may be necessary during COVID-19 restrictions. As families and providers gain experience, the many advantages may become clear and lead to telehealth continuing as common practice. Here are a few questions you may have, and tips to help you get the most out of mobile coaching sessions with your provider.

#### What will you do in the session?

- You will do what you usually do with your child . . . play, eat, get dressed, wash hands, or feed the pets. Coaching sessions will focus on how to embed intervention strategies to support your child's active engagement and social communication skills in your everyday activities.
- You have all the materials you need in your home ... toys, kitchen pots and pans, hand soap and a sink, • and laundry to be put in the dryer and folded. Siblings or other family members can have a role in these activities, if they are available.
- Your everyday activities can be the best learning opportunities. Aiming to include 5 different activities across categories will help you make the most of your coaching sessions. Each session should help build your capacity so that you can practice and provide lots of opportunities for your child to learn each day. Remember we want to make the most of your marbles — the 1 hour we have for our intervention session should get you ready to embed strategies throughout the day in multiple activities to achieve the 25 hours that your child is actively engaged.



### How will you prepare for the session?

- Your provider will help work out a plan for using technology with you. Your tablet or smart phone are portable and easy to move around the house or yard. A laptop computer is also easy to manage in the session by just moving it to any stable surface as you go. Give input to your provider about priorities for each session and see what technology works best. And don't worry — technology is wonderful when it works and sometimes it doesn't. Experience will make it more comfortable.
- By sharing information about what typically happens during activities and how it is going, you and your provider can figure out what to target and what new strategies may be needed. Give feedback to your provider about what did and didn't work between sessions so you can problem solve together.

### Coaching to build your capacity ....

A collaborative coaching model can build your capacity to engage your child actively and productively in the everyday activities that you are already doing. Coaching sessions should offer opportunities to reflect on what you have been practicing, try out new intervention strategies with feedback, and problem solve things that need help. With the one hour that we have together, we can build your confidence as you practice engaging your child between sessions and impact your child's development and learning.

#### Changing Developmental Trajectories of Young Children with ASD for Success in PreK to 2nd Grade Classrooms

# Autism Navigator<sup>®</sup> How-To Guide for Families *Roadmap for Going Through Content over 6 Months*

### Course Roadmap



Weekly Topics for the Guided Tour	Domain	Guidebook (GB) Homework
		for the Next Week
Week 1: Getting Started	Play	GB 1 Slides 1-13
Week 2: Autism and Development	Lang	GB 2 Slides 1-22
Week 3: Taking Care of the Family	Social	GB 1 Slides 14-17 GB 3 Slides 1-19
Week 4: The Home Field Advantage—Supporting Learning in Everyday Activities	Emotional Regulation	GB 1 Slides 18-20; 31-37 GB 3 Slides 20-23
Week 5: Active Engagement Step 1—Coming Together	Self-Directed Learning	GB 3 Slides 24-26, 29
Week 6: Layer 1 Supports for a Shared Agenda with Your Child	Play	GB 1 Slides 21-28 GB 3 Slides 20-23
Week 7: Active Engagement Step 2—Keeping Together	Lang	GB 3 Slides 24-27, 29
Week 8: Layer 2 Supports for Reciprocity to Keep the Interaction Going	Social	GB 1 Slides 29-30,38-50 GB 3 Slides 20-23
Week 9: Active Engagement Step 3—Working Together	Emotional Regulation	GB 3 Slides 24-31
Week 10: Layer 3 Supports to Teach Your Child Better Skills	Self-Directed Learning	GB 4 Slides 1-7
Week 11: Recognizing Challenging Behaviors in Children with Autism	Play	GB 4 Slides 8-9
Week 12: Role of Emotional Regulation in Challenging Behaviors?	Lang	GB 4 Slides 10-12
Week 13: Interplay of AE, TS, and Challenging Behavior: Hone Your Observation Skills	Social	GB 4 Slides 13-21
Week 14: Figure Out the Functions of Challenging Behaviors—Communication & ER	Emotional Regulation	GB 4 Slides 22-25
Week 15: The Functional Assessment Process is as Simple as A-B-C	Self-Directed Learning	GB 4 Slides 26-33
Week 16: How Can a Positive Behavior Support Plan Help Your Child?	Play	GB 4 Slides 34-39
Week 17: Key Strategies and Supports for ASD: Communication & ER Replacements	Lang	GB 4 Slides 40-42
Week 18: Key Strategies and Supports for Children with ASD: Environmental Supports	Social	Library of Change with Early Intervention (LCEI)
Week 19: Intensity Needed to Achieve Meaningful Outcomes	Emotional Regulation	Library of Everyday Activities (LEA)
Week 20: Supporting Transitions Between Activities	Self-Directed Learning	LEA
Week 21: Going Out to Everyday Places—Parks, Restaurants, Outings, Doctors, and More	Play	LEA
Week 22: Better Skills to Get Ready for Childcare and Preschool	Lang	LEA
Week 23: Meaningful Outcomes—Keeping an Eye on Progress	Social	LEA
Week 24: Using the Tools that you Have: Celebrating Your Success and Looking Ahead		

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It has been recommended that students with ASD spend at least 25 hours a week actively and productively engaged in meaningful learning activities to promote positive educational outcomes. That sounds like a lot, but 5 hours a day is a usual school day and can provide the intensity needed for students with ASD. What matters is how engaged the student is in learning from moment to moment and activity to activity. Given this recommendation, it is important that we look across the school day in a variety of activity categories to support the student's active engagement and promote generalization of learning. Collaborating with families to help them embed supports in everyday activities at home can add to learning opportunities at school and further promote generalization.

### **Everyday School Activity Categories**

The following everyday school activities are organized into eight categories to ensure that active engagement is being supported in a variety of activities throughout the school day.



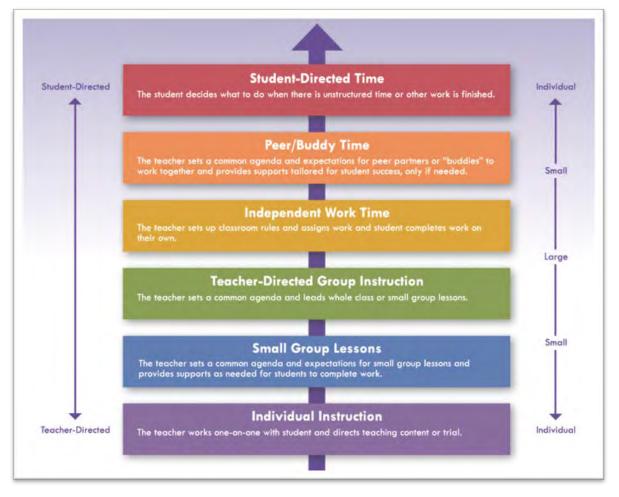


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#### **Classroom Structure for Learning**

The student's active engagement and teaching strategies need to be considered in the context of classroom structure for learning. This can vary by the degree of teacher direction—whether the teacher is directing the teaching trial, lesson, assignment, and work agenda or this is delegated to the student. This can also vary by group size, from individual instruction or work to peer partners or small groups, to whole class instruction.

The following categories of classroom structure illustrate the varying degrees of teacher direction and group size.



Each classroom lesson is structured by both the degree of teacher- or student-directed learning and the group size. We use the word "teacher" broadly because every adult that comes in contact with the student has the potential to teach the child. No matter what role or title you have, you fit somewhere in the realm of "teacher" throughout the day. To promote inclusive education, it is important to provide learning opportunities for students with ASD that increase the degree of student-directed learning in activities and contexts.



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### About Active Engagement: A Lens for Setting Priorities for Students with Autism

### What is Active Engagement?

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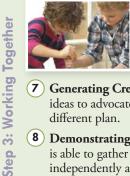
### The first step is becoming involved in the shared classroom agenda.

- 1 Well Regulated The child feels generally content, their needs are met and they are available for learning and interaction. When upset, they get over it easily.
- **2 Productive** The child is actively participating in an activity, using materials in an appropriate way and including people in those experiences.
- **3** Socially Connected The child notices others by turning or looking toward them, pays attention to the group agenda and participates in the interaction.



### The second step is having successful interactions and sharing ideas.

- 4 **Responding to Bids for Interaction** The child may not understand exactly what is being said, but understands that someone has asked for their attention or for them to do something.
- **5 Communicating Directly to You** The child uses gestures, sounds or words to send a message without explicitly being asked. The child uses verbal and nonverbal means to get wants and needs met.
- 6 **Being Flexible** The child moves easily between actions, activities or materials rather than getting "stuck" on certain objects or ideas. The child accepts the ideas and opinions of others.



### The third step is participating cooperatively and working independently.

- Generating Creative Ideas The child comes up with creative ideas to advocate for themselves, solve problems or share a different plan.
- (8) **Demonstrating Academic Independence** The child is able to gather and use materials appropriately to work independently and move through each step of an activity on their own.



### Why is active engagement so important?

Active engagement means a child is ready to interact and learn, be productive, communicate with those around them, and "hang in" when facing challenges or change. Research shows that children with autism who are actively engaged throughout the school environment have better outcomes relative to social interaction, communication and problem solving.

Coming together is a beginning. Keeping together is progress. Working together is success. --- Henry Ford

Active engagement can be supported with the materials and activities already available in the classroom or home including academics, transitions, chores, meals and free time. Holding the bar high for children throughout the day, realizing what adults are doing for students that they can learn to do for themselves, and taking small steps to promote active engagement will have a lasting impact on the student's social and academic success.



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Step 1: Coming Together

# A Framework for Supporting Active Engagement in Students with Autism

### What are Transactional Supports?

The term "Transactional Supports" refers to the supports or strategies used by others to promote a student's learning and development. The following evidence-based supports and strategies can be used in classroom activities with students to promote active engagement and social communication development. These supports are organized into three layers: 1)Supports for a Shared Agenda, 2) Supports for Social Reciprocity, and 3) Supports for Better Skills. Like making a layer cake, it's important to develop the first layer before adding the second and third layers.

### Autism NAVIGATOR<sup>®</sup> for Success in K-2 Classrooms



- Supports for a shared agenda ensure that activities are meaningful and motivating for students with ASD and that activities reflect a sense of classroom community.
- 1. **Relevant activities** are both functional and meaningful to the student. When activities are relevant, the student understands the purpose of the activity and how it relates to their experiences or interests. An interest in trains or superheroes can be easily infused into a math example, spelling list, or reading passage.
- 2. A productive role lets the child know exactly what to do and how to participate by using materials in an appropriate way. Roles can be as simple as putting up a backpack, turning in a folder or getting materials ready for an activity.
- 3. **Predictable, clearly defined activity** lets the child know what is coming next by making the beginning, middle, and end of each activity clear to the child. Teachers can provide verbal, nonverbal and visual supports to help the child anticipate and understand next steps.
  - Supports for social reciprocity promote successful interactions and encourage communication, questioning, and sharing of ideas.
- (4.) **Clear messages support comprehension** by letting the student know what they are expected to listen to and do. Teachers should say something once while conveying a clear expectation for a response. If the child does not respond, the teacher can say it once more while offering help or contextual cues as needed so the child will comprehend and respond to the message.
- 5. **Modeling language** consistent with what the student is paying attention to allows teachers to capitalize on critical language learning moments. Modeling language also includes giving the child words they can use in various situations (e.g., answering in class, getting help when needed, getting a peer's attention).
- 6. **Promoting interactions** creates opportunities for a balance of turns within activities that encourage student initiations by offering choices, using natural pauses during interactions, and holding out for directed communication.



Layer 1: Shared agenda

Layer 2: Social Reciprocity

Layer 3: Better Skills

Support for better skills promote flexibility, problem solving, and independence.

- **Balance of interaction and independence** supports a student's ability to work successfully on their own, to include others when appropriate and be flexible. This means supporting the student to shift between materials, topics, and people, and think through problems on their own.
- Adjust expectations and supports depending on the student's level of emotional regulation. When the student is dysregulated, supports should be increased. When the student is well-regulated expectations and demands can be increased with an emphasis on learning new skills.

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