

# Overview of Autism



## Volunteer Pre Training Questionnaire *Overview of Autism*

*Please complete prior to training & give to the trainer to insure that all of your training needs are addressed!*

1. What do you expect to learn from this training?
  
2. Please answer the following questions to the best of your ability:
  - A. Autism affects boys at two times the rate that it affects girls  
 TRUE       FALSE
  
  - B. Children with Autism Spectrum Disorder (ASD) have difficulty understanding concrete, literal concepts  
 TRUE       FALSE
  
  - C. Children with ASD are strong visual learners  
 TRUE       FALSE
  
  - D. Children with ASD take longer to learn new skills, but then can easily generalize and transfer them to different settings, situations or people  
 TRUE       FALSE
  
  - E. List three learning characteristics of people with ASD
    - 1.
    - 2.
    - 3.
  
3. On a scale of 1 to 10, what is your understanding of the training topic as it relates to children with autism right now? (1 serving as no understanding at all and 10 being extremely well informed)

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Signature

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Date



## Volunteer Post Training Evaluation

### *Overview of Autism*

*Please complete this evaluation after training to make sure that we have prepared you for your volunteer respite assignment!*

1. Did the training session meet your goals and expectations?  
Circle one: Yes No Briefly explain
  
2. Based on the training you received today, please answer the following questions:
  - A. Autism affects boys at two times the rate that it affects girls  
 TRUE       FALSE
  - B. Children with Autism Spectrum Disorder (ASD) have difficulty understanding concrete, literal concepts  
 TRUE       FALSE
  - C. Children with ASD are strong visual learners  
 TRUE       FALSE
  - D. Children with ASD take longer to learn new skills, but then can easily generalize and transfer them to different settings, situations or people  
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  - E. List three learning characteristics of people with ASD
    - 1.
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3. On a scale of 1 to 10, what is your understanding of the training topic as it relates to children with autism right now? (1 serving as no understanding at all and 10 being extremely well informed)
  
4. Do you have any comments or suggestions for improvement in respect to the information covered in this training? Please be specific.

*Thank you very much for completing this training evaluation. It will help us to keep the training informative, relevant and fun for future volunteers!*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# Overview of Autism



## Answer Key: Overview of Autism

### A. Autism affects boys at two times the rate that it affects girls

- TRUE       FALSE

*Autism affects boys at 4 times the rate that it affects girls*

### B. Children with Autism Spectrum Disorder (ASD) have difficulty understanding concrete, literal concepts

- TRUE       FALSE

*Children with ASD are concrete, literal thinkers but have difficulty with figurative language such as idioms*

### C. Children with ASD are strong visual learners

- TRUE       FALSE

*Children with ASD learn best by what they see and have a better chance of understanding if you show them rather than tell them what you want.*

### D. Children with ASD take longer to learn new skills, but then can easily generalize and transfer them to different settings, situations or people

- TRUE       FALSE

*Because they may not be cuing into the relevant information, children with ASD may have difficulty transferring skills to different settings, situations or people, so avoid fake settings to work on new skills*

### E. List three learning characteristics of people with ASD

- 1.
- 2.
- 3.

*Over selectivity, concrete & literal thinking, lack of generalization, distractibility, strong visual learning or ability to see and do, strong need for routine and ritual, different types of motivation than their peers without disabilities*



# Autism Society of America

## Autism Fact Sheet- What is Autism

presented by Easter Seals



Autism is a complex developmental disability that typically appears during the first three years of life and is the result of a neurological disorder that affects the normal functioning of the brain, impacting development in the areas of social interaction and communication skills. Both children and adults with autism typically show difficulties in verbal and non-verbal communication, social interactions, and leisure or play activities. One should keep in mind however, that autism is a spectrum disorder and it affects each individual differently and at varying degrees - this is why early diagnosis is so crucial. By learning the signs, a child can begin benefiting from one of the many specialized intervention programs. Autism is one of five disorders that falls under the umbrella of Pervasive Developmental Disorders (PDD), a category of neurological disorders characterized by "severe and pervasive impairment in several areas of development."

### The five disorders under PDD are:

- Autistic Disorder
- Asperger's Disorder
- Childhood Disintegrative Disorder (CDD)
- Rett's Disorder
- PDD-Not Otherwise Specified (PDD-NOS)

Each of these disorders has specific diagnostic criteria which been outlined in the American Psychiatric Association's Diagnostic & Statistical Manual of Mental Disorders (DSM-IV-TR).

### Prevalence of Autism

Autism is the most common of the Pervasive Developmental Disorders, affecting an estimated 1 in 150 births (Centers for Disease Control Prevention, 2007). Roughly translated, this means as many as 1.5 million Americans today are believed to have some form of autism. And this number is on the rise. Based on statistics from the U.S. Department of Education and other governmental agencies, autism is growing at a startling rate of 10-17 percent per year. At this rate, the ASA estimates that the prevalence of autism could reach 4 million Americans in the next decade.

Autism knows no racial, ethnic, social boundaries, family income, lifestyle, or educational levels and can affect any family, and any child. And although the overall incidence of autism is consistent around the globe, it is four times more prevalent in boys than in girls.





# Autism Society of America

## Defining Autism

presented by Easter Seals



Autism is a spectrum disorder, and although it is defined by a certain set of behaviors, children and adults with autism can exhibit any combination of these behaviors in any degree of severity. Two children, both with the same diagnosis, can act completely different from one another and have varying capabilities.

You may hear different terms used to describe children within this spectrum, such as autistic-like, autistic tendencies, autism spectrum, high-functioning or low-functioning autism, more-abled or less-abled; but more important than the term used to describe autism is understanding that whatever the diagnosis, children with autism can learn and function normally and show improvement with appropriate treatment and education.

Every person with autism is an individual, and like all individuals, has a unique personality and combination of characteristics. Some individuals mildly affected may exhibit only slight delays in language and greater challenges with social interactions. They may have difficulty initiating and/or maintaining a conversation. Their communication is often described as talking at others instead of to them. (For example, monologue on a favorite subject that continues despite attempts by others to interject comments).

People with autism also process and respond to information in unique ways. In some cases, aggressive and/or self-injurious behavior may be present. Persons with autism may also exhibit some of the following traits:

- Insistence on sameness; resistance to change
- Difficulty in expressing needs, using gestures or pointing instead of words
- Repeating words or phrases in place of normal, responsive language
- Laughing (and/or crying) for no apparent reason showing distress for reasons not apparent to others
- Preference to being alone; aloof manner
- Tantrums
- Difficulty in mixing with others
- Not wanting to cuddle or be cuddled
- Little or no eye contact
- Unresponsive to normal teaching methods
- Sustained odd play
- Spinning objects
- Obsessive attachment to objects
- Apparent over-sensitivity or under-sensitivity to pain
- No real fears of danger
- Noticeable physical over-activity or extreme under-activity
- Uneven gross/fine motor skills
- Non responsive to verbal cues; acts as if deaf, although hearing tests in normal range.



# Autism Society of America: Defining Autism

presented by Easter Seals Continued



One of the most devastating myths about autistic children is that they cannot show affection. While sensory stimulation is processed differently in some children, they can and do give affection. However, it may require patience on the parents' part to accept and give love in the child's terms.

For most of us, the integration of our senses helps us to understand what we are experiencing. For example, our sense of touch, smell and taste work together in the experience of eating a ripe peach: the feel of the peach's skin, its sweet smell, and the juices running down your face. For children with autism, sensory integration problems are common, which may throw their senses off they may be over or under active. The fuzz on the peach may actually be experienced as painful and the smell may make the child gag. Some children with autism are particularly sensitive to sound, finding even the most ordinary daily noises painful. Many professionals feel that some of the typical autism behaviors, like the ones listed above, are actually a result of sensory integration difficulties.

There are also many myths and misconceptions about autism. Contrary to popular belief, many autistic children do make eye contact; it just may be less often or different from a non-autistic child. Many children with autism can develop good functional language and others can develop some type of communication skills, such as sign language or use of pictures. Children do not "outgrow" autism but symptoms may lessen as the child develops and receives treatment.



# Learning Characteristic Guide



CHARACTERISTIC	NOTES	INFORMATION ABOUT MY CHILD
CONCRETE LITERAL THINKERS		
OVERSELECTIVITY		
GENERALIZATION		
DISTRACTIBILITY		
VISUAL LEARNERS		
NEED FOR ROUTINE AND RITUAL		
MOTIVATION		
COMMUNICATION		



# Family Guidelines

Parents/Caregiver: \_\_\_\_\_ Date: \_\_\_\_\_

Quick description of \_\_\_\_\_(child), age \_\_\_\_\_.  
(please include any details about your child's interests or personality that will assist your volunteer)

## SOCIALIZATION

Activities that my child enjoys or promotes success

My child adjusts to new people in the following way and here are some steps/activities to help:

My child transitions to new or different activities in the following way(s):

## COMMUNICATION

My child communicates the following way(s):

My child might "test" your or "push your limits" by \_\_\_\_\_. I would suggest your try the following if this happens:

These activities typically frustrate/anger/present a challenge to my child:

I would suggest you try the following if this happens:

MODULE ONE

# Overview of Autism





## MEDICATIONS

Medication	Dosage/Time-Taken	Side Effects
<hr/>		
<hr/>		
<hr/>		

Please refer to your volunteer coordinator for rules for administering medication.

Medications are kept in:

Other Important Information for the volunteer to know:

Adapted with permission from CareBreak at the Watson Institute

MYTH BUSTER CARDS

**You can “catch” autism  
like you can “catch” a  
cold**

**Children with autism  
learn best from being  
told what to do**

**The number of people  
with autism is decreasing  
in the United States**

**All children with autism  
are motivated to do a  
good job if you reward  
them with stuffed  
animals.**

**Children with autism are  
good conversationalists**

**Changes in routine are  
easy for children with  
autism**





MODULE TWO  
Families

## Volunteer Pre Training Questionnaire *Families*

*Please complete prior to training & give to the trainer to insure that all of your training needs are addressed!*

1. What do you expect to learn from this training?
  
2. Please answer the following questions to the best of your ability:
  - A. Research suggests that raising a child with Autism Spectrum Disorder (ASD) is more stressful than any other disability category including childhood cancer**  
 TRUE       FALSE
  - B. Siblings of children with ASD tend to act out, be less mature than their peers and engage in risk taking in an effort to get their parents' attention**  
 TRUE       FALSE
  - C. Volunteers play a vital role for families by being there, listening, and helping to solve intra family problems and conflicts**  
 TRUE       FALSE
  - D. Children with ASD who are included in outings with their family have a significant improvement in their social skills and behaviors compared to children who were not included in family social outings**  
 TRUE       FALSE
  - E. List three sources of stress for families of children with ASD**
    - 1.
    - 2.
    - 3.
  
3. On a scale of 1 to 10, what is your understanding of the training topic as it relates to children with autism right now? (1 serving as no understanding at all and 10 being extremely well informed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



## MODULE TWO

# Families

### Volunteer Post Training Evaluation

#### *Families*

*Please complete this evaluation after training to make sure that we have prepared you for your volunteer respite assignment!*

1. Did the training session meet your goals and expectations?  
Circle one: Yes No Briefly explain
  
2. Based on the training you received today, please answer the following questions:
  - A. Research suggests that raising a child with Autism Spectrum Disorder (ASD) is more stressful than any other disability category including childhood cancer**  
 TRUE  FALSE
  - B. Siblings of children with ASD tend to act out, be less mature than their peers and engage in risk taking in an effort to get their parents' attention**  
 TRUE  FALSE
  - C. Volunteers play a vital role for families by being there, listening, and helping to solve intra family problems and conflicts**  
 TRUE  FALSE
  - D. Children with ASD who are included in outings with their family have a significant improvement in their social skills and behaviors compared to children who were not included in family social outings**  
 TRUE  FALSE
  - E. List three sources of stress for families of children with ASD**
    - 1.
    - 2.
    - 3.
  
3. On a scale of 1 to 10, what is your understanding of the training topic as it relates to children with autism right now? (1 serving as no understanding at all and 10 being extremely well informed)
  
4. Do you have any comments or suggestions for improvement in respect to the information covered in this training? Please be specific.

*Thank you very much for completing this training evaluation. It will help us to keep the training informative, relevant and fun for future volunteers!*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date





MODULE TWO  
Families

**Answer Key: Families**

**A Research suggests that raising a child with ASD is more stressful than any other disability category including childhood cancer**

- TRUE**       **FALSE**

*Raising a child with ASD is more stressful than any other disability category or health impairment*

**B. Siblings of children with ASD tend to act out, be less mature than their peers and engage in risk taking in an effort to get their parents' attention**

- TRUE**       **FALSE**

*Siblings tend to be "overly good" or more mature than their chronological age, often trying to compensate for their brother or sister with ASD*

**C. Volunteers play a vital role for families by being there, listening, and helping to solve intra family problems and conflicts**

- TRUE**       **FALSE**

*Volunteers should NEVER get involved in solving or taking a side in intra family conflicts and in fact it is not particularly helpful for volunteers to offer advice.*

**D. Children with ASD who are included in outings with their family have a significant improvement in their social skills and behaviors compared to children who where not included in family social outings**

- TRUE**       **FALSE**

*Social experiences that involve family members play an important role in the development of social skills and improvements in behavior in children with ASD*

**E. List three sources of stress for families of children with ASD**

- 1.
- 2.
- 3.

*Reactions from society, ongoing reaction to an isolated event in the community, financial struggles, feelings of isolation, fewer friends, grieving the loss of a "typical child", cultural issues, religious differences, distancing from extended family, fear of burdening friends, embarrassment, frustration, safety concerns, marital discord*





## Families - Group Questions

- Question 1:** Tell us about who is in your family
- Question 2:** When did you first notice there was something different about your child's development?
- Question 3:** How has having a child with ASD impacted your family?
- Question 4:** If you could tell the volunteers one thing about working with children with ASD, what would it be?

# Communication



## Volunteer Pre Training Questionnaire *Communication*

*Please complete prior to training & give to the trainer to insure that all of your training needs are addressed*

1. What do you expect to learn from this training?
  
2. Please answer the following questions to the best of your ability:
  - A. Communication is made up of two parts: receptive and expressive**
    - TRUE       FALSE
  - B. A child's communication system (such as pictures or words) should reflect topics & things of interest to people without Autism Spectrum Disorder**
    - TRUE       FALSE
  - C. A child who uses an Augmentative / Alternative Communication device (AAC) should take it with him EVERYWHERE**
    - TRUE       FALSE
  - D. Providing choices will confuse and frustrate a child with ASD and typically results in negative or problem behavior**
    - TRUE       FALSE
  - E. List three types of Augmentative / Alternative Communication Devices or Strategies**
    - 1.
    - 2.
    - 3.
  
3. On a scale of 1 to 10, what is your understanding of the training topic as it relates to children with autism right now? (1 serving as no understanding at all and 10 being extremely well informed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## MODULE THREE

# Communication

### Volunteer Post Training Evaluation *Communication*

*Please complete this evaluation after training to make sure that we have prepared you for your volunteer respite assignment!*

1. Did the training session meet your goals and expectations?

Circle one: Yes No Briefly explain

2. Based on the training you received today, please answer the following questions:

**A. Communication is made up of two parts: receptive and expressive**

TRUE  FALSE

**B. A child's communication system (such as pictures or words) should reflect topics & things of interest to people without Autism Spectrum Disorder**

TRUE  FALSE

**C. A child who uses an Augmentative / Alternative Communication device (AAC) should take it with him EVERYWHERE**

TRUE  FALSE

**D. Providing choices will confuse and frustrate a child with ASD and typically results in negative or problem behavior**

TRUE  FALSE

**E. List three types of Augmentative / Alternative Communication Devices or Strategies**

- 1.
- 2.
- 3.

3. On a scale of 1 to 10, what is your understanding of the training topic as it relates to children with autism right now? (1 serving as no understanding at all and 10 being extremely well informed)
4. Do you have any comments or suggestions for improvement in respect to the information covered in this training? Please be specific.

*Thank you very much for completing this training evaluation. It will help us to keep the training informative, relevant and fun for future volunteers!*

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Signature

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Date



# Communication



## Answer Key: Communication

**A. Communication is made up of two parts: receptive and expressive**

- TRUE       FALSE

*Receptive language is what we understand when others communicate with us.*

*Expressive language is what we do or say to make our message understood to others.*

**B. A child's communication system (such as pictures or words) should reflect topics & things of interest to people without Autism Spectrum Disorder**

- TRUE       FALSE

*A child's communication system or device should reflect things that THEY find interesting*

**C. A child who uses an Augmentative / Alternative Communication device (AAC) should take it with him EVERYWHERE**

- TRUE       FALSE

*A child must have a way to communicate their needs and wants to you*

**D. Providing choices will confuse and frustrate a child with ASD and typically results in negative or problem behavior**

- TRUE       FALSE

*Providing choices is a good way to PREVENT problem behavior and promote the dignity of the person with ASD*

**E. List three types of Augmentative / Alternative Communication Devices or Strategies**

- 1.
- 2.
- 3.

*Body language, facial expressions, tone, gestures, drawing, the action object, communication ring, picture symbols book, written words, high technology devices*



## Volunteer Pre Training Questionnaire *Socialization*

*Please complete prior to training & give to the trainer to insure that all of your training needs are addressed*

1. What do you expect to learn from this training?
  
2. Please answer the following questions to the best of your ability
  - A. **People with Autism Spectrum Disorder (ASD) typically get fired from their jobs because they lack the skills and ability necessary to perform the work tasks**  
 TRUE       FALSE
  - B. **Parents of children with ASD often wish that their child will get invited to a birthday party or play date**  
 TRUE       FALSE
  - C. **Children with ASD have difficulty “reading” and understanding the emotions of others and as a result often respond inappropriately. However, they typically outgrow this challenge in adolescence or early adulthood**  
 TRUE       FALSE
  - D. **Placing a child with ASD into a group of children without disabilities will naturally result in the child with ASD learning appropriate social skill, modeling appropriate behavior and being accepted by the other children**  
 TRUE       FALSE
  - E. **List three strategies to promote social interactions for children with ASD**
    - 1.
    - 2.
    - 3.
  
3. On a scale of 1 to 10, what is your understanding of the training topic as it relates to children with autism right now? (1 serving as no understanding at all and 10 being extremely well informed)



## Volunteer Post Training Questionnaire

### *Socialization*

*Please complete this evaluation after training to make sure that we have prepared you for your volunteer respite assignment!*

1. Did the training session meet your goals and expectations?

Circle one: Yes No Briefly explain

4. Please answer the following questions to the best of your ability

A. People with Autism Spectrum Disorder (ASD) typically get fired from their jobs because they lack the skills and ability necessary to perform the work tasks

TRUE  FALSE

B. Parents of children with ASD often wish that their child will get invited to a birthday party or play date

TRUE  FALSE

F. Children with ASD have difficulty “reading” and understanding the emotions of others and as a result often respond inappropriately. However, they typically outgrow this challenge in adolescence or early adulthood

TRUE  FALSE

G. Placing a child with ASD into a group of children without disabilities will naturally result in the child with ASD learning appropriate social skill, modeling appropriate behavior and being accepted by the other children

TRUE  FALSE

H. List three strategies to promote social interactions for children with ASD

1.

2.

3.

4. On a scale of 1 to 10, what is your understanding of the training topic as it relates to children with autism right now? (1 serving as no understanding at all and 10 being extremely well informed)

4. Do you have any comments or suggestions for improvement in respect to the information covered in this training? Please be specific.



**Answer Key: Social Skills**

**A. People with Autism Spectrum Disorder (ASD) typically get fired from their jobs because they lack the skills and ability necessary to perform the work tasks**

- TRUE       **FALSE**

*People with ASD don't usually get fired from their jobs because they don't know how to do their jobs, RATHER they get fired because they don't know how to appropriately interact with their co workers*

**B. Parents of children with ASD often wish that their child will get invited to a birthday party or play date**

- TRUE       **FALSE**

*Since most of life's lessons are learned in day to day interactions, many families of children with ASD desire those activities for their children*

**C. Children with ASD have difficulty “reading” and understanding the emotions of others and as a result often respond inappropriately. However, they typically outgrow this challenge in adolescence or early adulthood**

- TRUE       **FALSE**

*Children with ASD have difficulty understanding the emotions of others and often respond inappropriately ~ these challenges often continue into adulthood and are not “outgrown”. Addressing these issues and building social skills helps diminish the impact as the individual grows older.*

**D. Placing a child with ASD into a group of children without disabilities will naturally result in the child with ASD learning appropriate social skill, modeling appropriate behavior and being accepted by the other children**

- TRUE       **FALSE**

*Just putting a child with ASD in a situation with a group of children without disabilities doesn't mean acceptance, learning, and modeling will automatically happen without facilitation of social skill development for EVERYBODY*

**E. List three strategies to promote social interactions for children with ASD**

- 1.
- 2.
- 3.

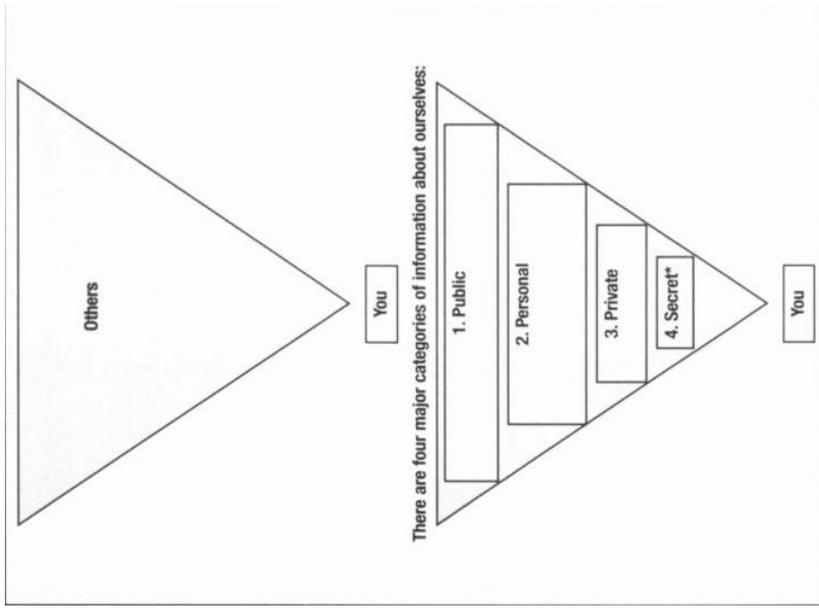
*Working on skills, using names, making eye contact, reminding / prompting child to “play”, reminding children to try again, planning for social activities during your visit, rewarding children for playing appropriately together, setting up social opportunities, arranging the materials or children so they can interact*







# Circle of Support / Degrees of Disclosure



# Community Inclusion



## Volunteer Pre Training Questionnaire *Community Inclusion*

*Please complete prior to training & give to the trainer to insure that all of your training needs are addressed!*

1. What do you expect to learn from this training?
  
2. Please answer the following questions to the best of your ability:
  - A. Programs, not children with Autism Spectrum Disorder (ASD), have to be ready for inclusion**
    - TRUE       FALSE
  - B. To ensure success in the community for children with ASD, use a center based curriculum which focuses on classroom learning, moves to a simulated environment and then transitions into an actual community setting**
    - TRUE       FALSE
  - C. Preparing a child with ASD for a community experience ahead of time often results in the child experiencing anxiety about what's going to happen next**
    - TRUE       FALSE
  - D. Children with ASD should always have access to their communication devices when they go out into the community**
    - TRUE       FALSE
  - E. List three places a child with ASD can be included in the community:**
    - 1.
    - 2.
    - 3.
  
3. On a scale of 1 to 10, what is your understanding of the training topic as it relates to children with autism right now? (1 serving as no understanding at all and 10 being extremely well informed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# Community Inclusion



## Volunteer Post Training Evaluation *Community Inclusion*

*Please complete this evaluation after training to make sure that we have prepared you for your volunteer respite assignment!*

1. Did the training session meet your goals and expectations?  
Circle one: Yes No Briefly explain
  
2. Based on the training you received today, please answer the following questions:
  - A. Programs, not children with Autism Spectrum Disorder (ASD), have to be ready for inclusion**
    - TRUE       FALSE
  - B. To ensure success in the community for children with ASD, use a center based curriculum which focuses on classroom learning, moves to a simulated environment and then transitions into an actual community setting**
    - TRUE       FALSE
  - C. Preparing a child with ASD for a community experience ahead of time often results in the child experiencing anxiety about what's going to happen next**
    - TRUE       FALSE
  - D. Children with ASD should always have access to their communication devices when they go out into the community**
    - TRUE       FALSE
  - E. List three places a child with ASD can be included in the community:**
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    - 2.
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3. On a scale of 1 to 10, what is your understanding of the training topic as it relates to children with autism right now? (1 serving as no understanding at all and 10 being extremely well informed)
  
4. Do you have any comments or suggestions for improvement in respect to the information covered in this training? Please be specific.

*Thank you very much for completing this training evaluation. It will help us to keep the training informative, relevant and fun for future volunteers!*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



# Community Inclusion



## Answer Key: Community Inclusion

**A. Programs, not children with Autism Spectrum Disorder (ASD), have to be ready for inclusion**

- TRUE       FALSE

*Children with ASD do not have to “wait” to be in the community ~ they have the right to membership as citizens and community members*

**B. To ensure success in the community for children with ASD, use a center based curriculum which focuses on classroom learning, moves to a simulated environment and then transitions into an actual community setting**

- TRUE       FALSE

*Successful programs use a curriculum that is community based and provides training directly in the community*

**C. Preparing a child with ASD for a community experience ahead of time often results in the child experiencing anxiety about what’s going to happen next**

- TRUE       FALSE

*Many times people with ASD experience anxiety because they DON'T know what's going to happen which can be avoided if the person is prepared ahead of time (i.e. expectations, rules, communication devices)*

**D. Children with ASD should always have access to their communication devices when they go out into the community**

- TRUE       FALSE

*Children ALWAYS need a way to communicate ~ if you forget their ACC, even a pen and paper will do the trick*

**E. List three places a child with ASD can be included in the community:**

- 1.
- 2.
- 3.

*Anywhere and everywhere including the parks, playgrounds, neighborhood settings, the library, museums, stores, youth clubs / organizations*

# Community Inclusion



## Sample My Child has Autism Card

<p><b>In Case of Emergency</b> (see reverse)</p> <p><b>I Have an Autism Spectrum Disorder</b> a neurological condition</p> <p><b>People with autism may:</b></p> <ul style="list-style-type: none"><li>- not understand what you say</li><li>- appear as deaf or to ignore you</li><li>- dart away unexpectedly</li><li>- engage in repetitive behaviors</li><li>- appear insensitive to pain</li><li>- be unable to speak or have difficulty speaking</li><li>- engage in hand flapping or rocking</li><li>- be overly sensitive to sounds, smell or touch</li><li>- may not understand the law, know right from wrong, or know the consequences of their actions</li></ul> <p><b>Do not shout, I am not deaf</b></p> <p>PO Box 55733, OKC 73155 <a href="http://www.okparentnetwork.org">http://www.okparentnetwork.org</a></p>	<p><b>EMERGENCY CONTACT INFORMATION</b></p> <p>Name: _____</p> <p>Address: _____</p> <p>Contact: _____</p> <p>Phone: _____</p> <p>Phys: _____</p> <p>Phone: _____</p> <p>Ins: _____</p> <p>Condition: _____</p> <p>Meds: _____</p> <p>Allergies: _____</p> <p>Other: _____</p> <p>Blood Type: _____</p>
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# Sample Community Resource Guide

## Goals:

- To provide volunteers with a framework to take fieldtrips with their CareBreak child
- To give volunteers a list of the many resources in every community and throughout the Pittsburgh area
- To give volunteers the tools to explore additional resources

Every community is rich in resources. However, making the right match (the right activity, fieldtrip) for the child requires some planning on your part. The following are a list of questions you might ask yourself (or the child's parent) while planning your trip. Keep in mind that many of the following suggestions will require a call to your destination to make sure they can accommodate your needs.

- consider whether the activity is appropriate for your CareBreak child
- be thoughtful about child's response to new situations – transitions, people and places
- is there parking near by (or might you take public transportation – as part of the adventure itself)
- do you want a place that potentially is crowded and very stimulating or are you looking for a quiet place to be one on one
- does the child I am working with get tired easily
- how long can the child be out without medicine
- how comfortable am I helping this child through transitions
- do I know how to sooth this child yet – should he/she get upset
- consider child's response to environmental factors – such as crowds, noise, chaos (Safari Sam's)

## ***Questions you might want to ask of the place you are considering visiting***

- is one time of the day better than any other (this is especially important if you are going to require some assistance)
- specific accessibility needs – be specific when you ask – not everyone is familiar with the term accessible
- are there restrooms (accessible)
- are there changing facilities
- is there a place to eat
- is it alright to bring own food
- is there a place to get water
- ask specific questions about the level of noise, crowds, length of wait for food/turn on rides etc.

Every community has its own specific set of resources – too many for us to list individually. Each volunteer has to be her/his own detective to find the myriad of potential activities, field trips within your community. Below is a list of publications and other resources, which will be helpful in your search.

- \*Chamber of Commerce – ask them about family facilities in your area (ice skating rinks, climbing type gyms, putt-putt golf)
- \*Public Library (usually has a community bulletin board of up-coming and on-going events)
- \* Regional Parent Publication – monthly newspaper publication. FREE at most libraries, major market chains; great resource for special events as well as on going programs, classes, family places to visit
- \* Neighborhood weekly newspaper
- \* Daily paper – local or regional / Wednesday or Thursday editions usually give weekend ideas
- \* Yellow pages (recreation centers, bookstores, carpet stores, mower stores) – any specific place you want to find
- \* On line Community Schedules – A quick way to see a summary of free / low cost events such as Movies in the Park, Nature Walks and other activities that would allow the child to move freely, at their own pace or step back from participating if necessary.

Some trips may require little to no planning ahead (trip to the Public Library) while others might require quite a lot of pre-planning (taking your CareBreak child to a local dentist's office for a look around). Any trip is made richer by developing some 'theme' activities before and after the trip. Keeping a journal of trips is another way of helping children 'create' deeper meaning to an activity. Journals can be kept in a variety of ways. Child can dictate words to you and then draw pictures in the journal book; you can write the words and read them as you go along; make a journal with pictures cut out from magazines – anything that helps the child begin to create a narrative – both a narrative of self as well as a narrative of your adventures together. Also, if you are visiting one place over again over a prolonged period of time, it will help you keep track of how things have changed as you have developed a relationship with a place or people in a place.

In preparing to go on a trip you can discuss what you think you might see, look up or draw pictures of what it might look, sound, smell and feel like.

Fieldtrips or activities should be based on what both you and child might find enjoyable. Very often, you will find that the joy of a fieldtrip is in the journey itself. Be curious together.

## **1. The grocery market – the possibilities are endless**

- A. To buy ingredients for specific recipe – make a shopping list, count the money, and find a wallet...
- B. To find items that all begin with a certain letter, have a particular color on the label – take paper and draw or make a list of what you find – no purchase necessary
- C. Look for items that grow on trees or in the ground, are sold in bits, etc.
- D. Fill up a cart and go around and put everything back!

## **2. The Library**

- A. Call the library and ask for organized story times you could join
- B. Visit the children's room or section and read together
- C. Take out books, audio, video tapes

### **3. Fire Station**

- A. Call and make a plan to visit
- B. Begin a theme of fire station/engine at home with crafts/stories/dramatic play/costumes/story writing

### **4. Lumber yard**

- A. Collect small bits of wood to take home and build with (most yards have a throw-away pile you can rummage through)
- B. Ask if you can visit the areas where they cut the wood (you might need to call ahead of time to make this plan)

### **5. Dentist**

- A. Call the family's dentist or a local office and see if you can set up an appointment to look around, look/touch some of the equipment
- B. Look through magazines and find all the pictures of animals with teeth – draw all the different kinds of teeth.

### **6. Floral shop**

- A. Take a pad and draw all the different flowers you see
- B. Watch them make floral arrangements

### **7. Hardware store**

- A. Buy supplies needed to complete lumber yard project
- B. Sit on the riding mowers
- C. Collect some paint strips and use them for crafts at home
- D. Sit and sort through the bins of nuts, bolts, screws

- E. In some of the smaller, privately owned hardware stores, you might talk to the owner who will be able to suggest some ways his/her store would be safe and fun for the child you are working with

## **8. Public Transportation**

- A. Call PAT (get the general information number in the phone book) and find a route that will take you on a route that is the right length.
- B. Ask about an accessible buses if necessary
- C. Take a bus to a donut shop, ice cream, or downtown for a soda. Many buses loop through the city.
- D. Take the subway out to the South Hills Mall for a long or short visit and then head back into the city

## **9. Call McDonald's**

- A. Make a plan to taste test french fries from all the nearest fast food restaurants – make a chart and give french fry ratings
- B. Call McDonald's Customer service in Western Pennsylvania, (412) 269-4136, ask for Laura. She can provide you with the McDonald's closest to you with play / indoor or outdoor gym / climbing structures.

## **11. City of Pittsburgh Parks and Recreation**

- A. Look in the phone book in the Government section in the phone book (blue pages)– you can call about the park nearest to you, community recreation events, special city events, farmers markets, skating rinks etc. – main number 412-255-2539
- B. Internet address - [city.pittsburgh.pa.us/park](http://city.pittsburgh.pa.us/park)

## **12. YMCA/ YWCA or Jewish Community Center**

- A. Some YMCA/ JCCs have weekly play gyms for non-members to use.
- B. Always worth a phone call. If the family you work with has memberships at any community facility call about events, open swimming, open gym time. Just running around a gym after a ball can be good fun on a winter's day.

### **13. Thrift shop – Good Will Industries**

- A. See what treasure you can find and buy for a dollar
- B. Stock up on some good dress-up clothes – in fact a great indoor activity is to create a costume box -replete with hats, shoes, shirts, ties, scarves, and bundles of thrift shop necklaces.

### **14. Locks and Dams – Corps of Engineers – 412-395-7176**

There are many locks and dams through out the Pittsburgh River system. Many of these facilities give planned tours. Many of them have terrific viewing areas, which are open to the public to watch the barges, party boats, private boats go through the locks.

- A. This is a trip with a lot of potential for activities around the field trip – building barges, floating boats in the tub or sink, making a dam in a creek or back yard – general water play with currents, water flow etc.

### **15. Beauty Shop**

- A. Call ahead and see if you can sweet talk your way into getting a free manicure for your CareBreak child
- B. Set up you own beauty shop

### **16. Book Stores**

- A. Throughout the Pittsburgh area there are large bookstores (Borders, Barnes and Noble) that have story hours for children
- B. They also have a large children’s section where kids can look at books, listen to music and get a snack.

## **Some general rules of thumb to remember:**

1. Don’t get bogged down in gender specific activities – most field trips are an adventure if you make it feel that way .
2. Consider your Adventure Journal as a way to use word or pictures to document your travels!
3. Remember that the child may participate in unique ways, only briefly or may want to observe. Be open to supporting the child to interact in a way comfortable to him.

4. Read you child's cues. It is okay to see only a piece of an exhibit, have a craft that isn't perfectly completed or take a break from the story time before the conclusion if your child is no longer interested or able to participate.
5. Many people will be more than willing to go the extra mile to help you out if you call ahead of time and explain your situation. Explain why it is so meaningful for a CareBreak child to meet people in the community and have an opportunity to interact with the community at large.
6. Frequent stops make for a pleasant journey. Don't bite off more than you can chew. Get comfortable traveling together (using restrooms, eating in public, transitions) before planning a long outing. Start off with short, successful small.
7. Always consider the attention span of child

There are a number of really special programs around the city. You would have to call to get specific information about fees and directions. If one of the programs listed below is too far for you to travel, don't hesitate to call them and ask if they know of anything similar in your neck of the woods.

1. **RAINY DAY PLAY CENTER** – 724 -934-7529 (PLAY) 155 Lake Drive, Wexford PA 15090 Indoor interactive play space for children with a variety of attractions. Fee for children over 2.
2. **TOY LENDING LIBRARY** – 412-682-4430 (East End area) – there is a membership fee to borrow toys, however, you are welcome to use the facility as a place to go and play for a fee of \$4. Good for ages six and under.
3. **CENTER for CREATIVE PLAY** – 412-371-1668 (Regent Square) – this is an excellent universally designed playspace for children of ALL abilities. Excellent resource for adaptive play toys; great space to play, do crafts, let off steam; children 12 and under.
4. **CHILDREN'S MUSEUM** – 412-322-5058 – (North Side) – Fee (children under 2y. free); call for specific information about hours, parking and special discount days.
5. **HEINZ HISTORY MUSEUM** – 412 – 454-6000 (Downtown) – (Fee); call for specific information about children's room, parking, hours and exhibits.

6. **CARNEGIE NATURAL HISTORY MUSEUM**– (Oakland) – 412-622-3131 – (Fee); great dinosaur exhibit and lots of stuffed (real) animals (lions, tigers and bears); birds; gems and more; small hands on children’s room.
7. **CARNEGIE SCIENCE CENTER** – 412-454-6000 (next to the Stadium) – (Fee); lots of good exhibits for older kids; good sized children’s room with hands on exhibits; good space to walking around
8. **PITTSBURGH PARKS AND RECREATION** – 412-255-2539 – terrific resource for park activities; summer in the park music, movies; walks; and indoor recreation events

***Good Luck & Have Fun!!!***



## Volunteer Pre Training Questionnaire *Behavior*

*Please complete prior to training & give to the trainer to insure that all of your training needs are addressed*

1. What do you expect to learn from this training?
  
2. Please answer the following questions to the best of your ability:
  - A. **Children with Autism Spectrum Disorder (ASD) typically exhibit negative behaviors because they won't listen and / or are used to getting their own way**  
 TRUE       FALSE
  
  - B. **When a problem behavior occurs for children with ASD, the focus should be on figuring out what to do to make the behavior stop**  
 TRUE       FALSE
  
  - C. **Many of the negative behaviors that we see in children with ASD also commonly occur in young children without disabilities**  
 TRUE       FALSE
  
  - D. **When a problem behavior occurs with a child with ASD, taking control is the least invasive and safest strategy for a volunteer to use**  
 TRUE       FALSE
  
  - E. **List three functions of behavior**
    - 1.
    - 2.
    - 3.
  
3. On a scale of 1 to 10, what is your understanding of the training topic as it relates to children with autism right now? (1 serving as no understanding at all and 10 being extremely well informed)



## Volunteer Post Training Evaluation *Behavior*

*Please complete this evaluation after training to make sure that we have prepared you for your volunteer respite assignment!*

1. Did the training session meet your goals and expectations?

Circle one: Yes No Briefly explain

2. Based on the training you received today, please answer the following questions:
- A. Children with Autism Spectrum Disorder (ASD) typically exhibit negative behaviors because they won't listen and / or are used to getting their own way
    - TRUE       FALSE
  - B. When a problem behavior occurs for a child with ASD, the focus should be on figuring out what to do to make the behavior stop
    - TRUE       FALSE
  - C. Many of the negative behaviors that we see in children with ASD also commonly occur in young children without disabilities
    - TRUE       FALSE
  - D. When a problem behavior occurs with a child with ASD, taking control is the least invasive and safest strategy for a volunteer to use
    - TRUE       FALSE
  - E. List three functions of behavior
    - 1.
    - 2.
    - 3.
3. On a scale of 1 to 10, what is your understanding of the training topic as it relates to children with autism right now? (1 serving as no understanding at all and 10 being extremely well informed)
4. Do you have any comments or suggestions for improvement in respect to the information covered in this training? Please be specific.

*Thank you very much for completing this training evaluation. It will help us to keep the training informative, relevant and fun for future volunteers!*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date





**Answer Key: Behavior**

**A. Children with Autism Spectrum Disorder (ASD) typically exhibit negative behaviors because they won't listen and / or are used to getting their own way**

- TRUE       FALSE

*Children with ASD do not have a reliable way to communicate. Sometimes, behavior is their way of telling us what they want and need.*

**B. When a problem behavior occurs for a child with ASD, the focus should be on figuring out what to do to make the behavior stop**

- TRUE       FALSE

*We must first consider WHY or what function the behavior serves the child then think of a solution that is as easy and effective as the problem behavior*

**C. Many of the negative behaviors that we see in children with ASD also commonly occur in young children without disabilities**

- TRUE       FALSE

*Behaviors such as rocking and tantrums all occur in children without disabilities but tend to be less intense and decrease with age*

**D. When a problem behavior occurs with a child with ASD, taking control is the least invasive and safest strategy for a volunteer to use**

- TRUE       FALSE

*Control is dangerous, invasive and doesn't teach the child anything*

**E. List three functions of behavior**

- 1.
- 2.
- 3.

*Access to something, communication, get away from something, avoid a situation, dealing with over stimulation, dealing with under stimulation*

