

Good morning, everyone and thank you all so much for joining us for today's training.

I am we we're definitely excited about this topic about being able to bring this topic to all of us who work and operate in child welfare, whatever capacity.

I think it's a very important topic that we discussed and really go through the ins and outs of so, I'm really excited about today's training.

I want to go ahead and introduce our presenter.

We have Geo Hill she is the director of family engagement at the partnership for child health and I'm going to go ahead and turn it over to you Jill.

Good morning.

Welcome everyone.

I love doing this presentation because it's dear to my heart.

My son is on the autism spectrum and He's one of 54 1 out

of 50 for that.

It will be diagnosed.

There have been diagnosed with autism when he was first diagnosed

about 22 years ago.

It was one in five thousand.

So you can see there's a huge growth in the diagnosis of

autism and there's many reasons we can talk about for that.

So let's get started.

Okay.

So autism spectrum disorder in the DSM-5 which you are aware

of is the criteria.

This is the criteria.

You have to meet in order to be able to be diagnosed on the

autism spectrum and I say spectrum because it now includes

Asperger's and includes Tourette's includes a lot of different

other other things as well.

So there has to be a deficit in social emotional.

Eels there needs to be a deficit and nonverbal communication

and also verbal communication when I say nonverbal and meaning

I contact a lot of times kids on the Spectrum.

Do not look at you.

They'll look if they do.

Look at you the through you around you over you but not directly

eye-to-eye contact.

It's very difficult.

Sometimes they use odd gestures and hand movements and those

kinds of things our facial expressions.

Don't match what they're actually feeling deficits can include

and development and maintaining and understand your relationships.

So they have a difficult time having friendships, you know,

you may see kids playing but they're playing next to each

other not with each other and so that can become difficult.

As a child grows and has not learned how to interact appropriately

with another child.

So social communication impairments are really one of the

key factors as well with communicate, you know a verbal and

nonverbal communication and then of course, there's the repetitive

patterns of behavior that they may have to go along with

that. So other criteria is Restrictive repetitive behaviors.

We see kids on the Spectrum and we automatically think of

a stereotypic repetitive Behavior such as rocking or flapping

hands, but it can be more than that.

It can be my son scratches his head here continuously.

And so that is his part of stemming and part of stimming

for kids on the spectrum is to help them to self calm.

So when you tell them not to do it, it's very difficult.

Unless you give them a replacement behavior that makes them

feel as calm.

So other stereotypic behavior is lining up toys, you know,

they like to see they'll lay on the ground and like to see

those Wheels on the car move is That they're playing with

the cars on a track is that they are more interested in the

fine motor of how things work.

And so they're inch more interested in how the wheels are

rolling. There can be some Echo leg speech which means they

repeat what you say or they repeat things.

They've heard I know my son always would say things at a

movie quotes such as you know to infinity and beyond that

meant that he was happy and everything was going good.

So it was like a had to interpret what he was saying by those

movie quotes.

There's also an assistant on sameness.

They're very inflexible.

You know, I told my son one day after school.

We're going to run a couple errands and then we're going

to go home.

Well after two errands I needed to run a third and he said

no you said a couple errands a couple is too and that's it.

We have to go home.

So I have to be very careful how I word things.

So I will now say a few errands.

Of course, they all he's older.

He understands much better about you know, how things have to change sometimes but because of change they can become in distressed even in the smallest changes.

They have difficulties transitioning from one subject or one activity to another They have very rigid thinking patterns.

Sometimes it's hard for them to greet people.

A lot of social skills training is in how to greet someone appropriately, you know, like high, you know, you put out your hand shake their hand.

Hi.

My name is my son is Maxwell some hi.

My name is Maxwell.

What's your name?

And he's taught that as a ritual to meet new people, but

you know what he can't take it back.

That point and it becomes more difficult because then you have to ask the person questions about themselves and they they focus more on themselves than what other people are feeling or thinking.

You know, they same routine is so important and the same food the same time every day same way.

And I can tell tell you from my home what really helped with all this was to have a written schedule and our home.

He had one in school for beginning of the day when he was at home, you know, you get up brush your teeth get your clothes on all those kind of breakfast and we go to school and then at the end of the day come home play for a few minutes to homework, you know, watch a little TV together bath time

bedtime and I would read Stories to him he knew that routine

and he got so used to it that now he's 24 and he lives on

his own.

He still does the same routine.

So routines are really important and they help with the arguments

of getting dressed and getting up and getting going because

they know what is expected of them.

So another criteria is highly restricted fixated interest.

They can talk for hours.

Towers about dinosaurs or Thomas the Tank Engine or are those

kinds of things but they really don't want to hear what you

have to say about your interest.

They have a hyper or hypo at reactive to sensory.

You know, they can be very indifferent.

My son will wear shorts and a t-shirt if it was snowing outside

today, or he would wear shorts and a t-shirt if it was a

hundred five degrees so temperature is a very Good thing

for him to judge I get phone calls saying is it winter time

yet. Do I need to turn my heater on?

Well, no, it's not yet.

So those are things he has difficulty with but a lot of times

it sounds noises lights kids on the Spectrum when you look

at fluorescent light to we cannot see the flickering of fluorescent

lights. However, they can and that can be a huge distraction

for kids and it can be overwhelming, you know, and it's very

difficult for them smells.

Sometimes they need to touch objects.

A lot of times what I work with police officers, excuse me,

children on the Spectrum will want to touch their badge.

It's not that they're grabbing for it in a mean or vicious way is that their interest they see you such a shiny object and they want to touch and feel Alert, so you have to make sure that this is something more sensory and not something else, you know, and there's visual Fascinations with movements lights all kinds of things.

Next slide so other things are symptoms must be present early in development.

So Jill, yes.

Sorry.

I just wanted to because I know you mentioned just kind of keeping things on track someone mentioned about trains saying and I think that's in reference to when they're fixated on particular objects and things like that.

And so they mentioned that that's something that they've

also you know.

Ya know about 18 years ago when my son was after my son was diagnosed. I started to meet more and more people that had children on the Spectrum.

The first question I asked anybody if they thought their child was on the spectrum is do they play with Thomas the Tank Engine because I swear to you every kid that period was playing with Thomas the Tank Engine was on the Spectrum.

I don't know what it was about it, but they just love it.

My son still loves trains to this day we go by the train yard. Third eye from the north side where Amtrak is and he just watches the trains come and go so there is a fascination with it.

And that was his area that he had the fascination and a lot

of kids do they also have Fascination for the areas, but

trains is definitely part of that for a lot of the kids.

So also so we're going back to the symptoms.

They have to be present in early childhood.

So like my son he developed very typically hitting all Milestones

until approximately the age of two two-and-a-half.

Then he regressed he lost use of he had great language skills

stopped talking he would eat any everything in the world

that I gave him.

He stopped eating become very picky.

He became very A sensory overload.

So at that point we had him and because of early steps we

had them and occupational therapy Physical Therapy speech

and language my student every day going to a therapy appointment

with him because he needed those supports and so that is

there early on in life.

Especially speaking late it is one of the things to look

out for or they regressed as well, so They are impaired socially

occupy, you know occupational other important areas of current

functioning are impaired.

They can't be these disturbances are not explained by other

things such as an intellectual disability a global global

developmental delay or from Corbin.

Kermit can't say the word today diagnosis of autism spectrum

disorder and intelli intellectual disability.

So there can be a combination of things.

However, autism spectrum disorder and Compasses many things

it encompasses OD D which is Oppositional Defiant Disorder

and encompasses.

I mean this is with with the autism spectrum.

It encompasses a th see the lot of times the kids are not

able. Focus or their hyperactive or a TD those kinds of things

are lots of things that can be included with the autism diagnosis,

but autism would be the primary diagnosis.

So if you break it down, there's four areas that you're looking

at language social repetitive actions and sensory.

So if there is a delayed a language loss of words echoing

I have speak at Clegg speech which means they repeat things

can label pictures but struggle asking what they want or

need. So if I show you a picture of a dog and you can say

dog and I say, what do you want?

What do you want to drink?

They can't answer that question.

A lot of times there is difficulty asking and answering the

what the called wh-questions the what Irwin why you know

how those kinds of questions are very difficult and to for

them to ask and for them to answer so it's best to break

it down and to simplest form a lot of times.

I know families will learn sign language teach the kids sign

language so that they can Do that, you know communicate in

some way.

I for my child that was not going to work for him.

So instead of him standing there and me not understanding

what he wanted.

I would always give him my hand and say take me to what you

want. And then he would have to physically take me then I

would say say it was a cookie.

I would say cookie and he would have to nod his head.

Yes, and then I'd say cookie again.

And I would try to get him to repeat the word cookie and

if he tried one time and it didn't work, that's fine.

As long as you tried and then I'll give him the cookie.

No, I did that every single time for every single thing.

It is overwhelming for families.

It is unbelievable, you know, you have to do it consistently.

However, it does work eventually and I do that as well with

like when I do.

All calendars.

I also write the word under so if it says bathtub if it's

a picture of a bath I say bath time and we read the word

when we look at the picture so they can Court, you know,

get a that I see a bathtub.

That means bathtime the word says bath time.

So I'm I'm understanding that a little bit better.

So there's sensory issues high tolerance to pain picky eaters.

I have not met anyone that is on the spectrum.

That is not a picky eater.

I know there are a few out there but most of them are my

son's diet consists of chicken nuggets french fries and pizza

now, he does vary it a little bit with cereals and and and

waffles and he'll now eat peanut butter and jelly sandwiches,

but you know that that is his main Staples in life and the

only fruit I can get him to eat as an apple and he will not

eat any vegetables and before he was when he was developing

as a baby.

He would eat anything.

So that was a huge change in the family Dynamics for eating

times. Um repetitive actions May resist May insist on doing

the same thing the same way over and over again, they struggle

with change.

So when you're trying to teach them a new coping skill or

a new skill and they've learned in one way.

It's going to be more difficult for them to make those changes

because they wanted the way they've always want done it social

differences, you know, I contact prefer to play alone trouble

with come.

Conversations so I'll tell ism is known as a spectrum disorder

with a wide variety if you meet someone on the autism spectrum,

you've only met one person because everyone is different

every single person on the autism.

There's now two people like so that's why it's very difficult

because what works for one may not work for the for the other

so I can cause a lot of things autism occurs across all life

domains and occurs across all ethnic groups.

All economic groups.

There is it is it's there for everybody and so it is a lifelong

disorder. I have to say I have an ex-husband who thought

when my son turned 18, he beat all of a sudden he wouldn't

be autistic anymore.

So I know that that's funny and that's unbelievable.

But yes, he did think that but he also was one of the best

supporters in the very beginning of this for me.

So yeah, so this is autism in a nutshell.

So autism spectrum disorder, it can include all of these

things when you have someone on the autism spectrum.

They can also be a TD.

They can also have a specific learning disability.

They can also be gifted they can also be OCD or they could

be just on the Spectrum or they could have an anxiety disorder

along with an auditory processing disorder.

So it's not just you know.

One is the same because you may have different things that

go along with it.

You may have depression or an anxiety that goes along with

your autism spectrum disorder.

You may be gifted but also have a specific learning disability.

So you may be gifted in one area, but you're not in another

area and in fact another area you have a struggle So like

my son he struggled with math, but he enjoyed science and

reading and those kinds of things so you can see that, you

know with a combination of different things are so much going

on that that everyone is different that is on the Spectrum.

So severity levels.

There are also levels within the spectrum that require all

of them require support and assistance.

It just depends on Jean how much they need so a level 3 would

be of sustained shal support they need the most support their

considered on the severe side of the spectrum.

They are limited verbally or they are non-verbal very limited

and initiating social interaction and flexible of behavior

difficulty coping with change.

They have a lot of stressors very difficult changing Focus

or action minimal response to social overtures from others,

you know, they're not going to want to play with other people

that kind of thing.

They're more into themselves.

Then you have a level 2, which is autism spectrum kind of

like great there in the middle and it's marked Again by deficiencies

in verbal and nonverbal social skills.

Social impairments even with supports in place.

It can be difficult.

Let me see it initiation of social interaction and flexibility

of behavior reduced or abnormal responses to social overtures

from others, you know difficulty playing difficulty, you

know, interacting those kinds of things then we have level

one which we consider high functioning and Uses needs the

least support however does need support without support in

place. You know, those things can become those communication

social Communications are going to be more noticeable without

those supports so difficulty initiating social interaction

again may appear to have decreased interest in social interaction.

The person is able to speak in full sentences engage in communication.

They may have a to and fro kind of conversation but limited.

See in flexible of behavior.

Again, they are it's difficult to switch from one task to

an X.

So there's lots of things you can put in place to help them

support them and changing, you know, if they're in school

changing from math to English or from changing at your home

at when they're home from eating dinner.

They're taking a bath there's lots of coping and and Minnie

And lots of skills that you can put in place for them and

lots of supports visual verbal all kinds of things which

we're going to get into.

So if you break it down, we have level 1 which is the least amount of support and it's considered high functioning autism.

Sometimes it just requires support and how to communicate

there is some inflexibility Behavior difficulty switching

activities and problem with - my son is considered to be

on a level one.

However, he still does need supports and the first word that's

going to come out of his mouth when you ask you to do something

is no however, if you just get past the no and you ignore

it, then you get a whole great conversation with him.

So if sometimes that's the I have to explain that to everyone

and as soon as they learn that then they're going to have

more of a interaction with him.

It's going to Better for both sides.

If you can't get through that path set know and it's going

to be more difficult.

Like if you say no you're not gonna say no to me you're going

to you know, speak to me correctly.

It's going to be a power struggle at that point.

So if you just let go of the know and move past it then you

can have a great interaction with him level two of us is

basic mild to moderate autism.

It requires the stanshall support.

Difficult social interaction and flexibility and behaviors

difficulty or distress coping with change.

They have a they have more repetitive behaviors more of their

stimming behaviors.

They're going to need more supports and helping them with

daily activities as well.

Then we have the level 3, which is considered severe autism

requiring very substantial supports lots of social deficits.

And interaction communication difficulties, they may be nonverbal

and flexible and flexibility Behavior extreme difficulty

and distress and coping with change repetitive behaviors

interfere with their functioning.

So they have to do those behaviors before they can carry

on and move on with anything else.

And this is where you can see most of a lot of stimming going

on for this group of Youth and adults.

So signs and symptoms of mild autism difficulty with communication

conversation body language eye contact and facial expressions

preference of repeating the same action activities movements

are words pipe.

Or hypo activity sensory input, you know intense restrict

interest difficulty developing maintaining relationships.

Some other things are they have odd behaviors rituals gestures

that are apparent to others more likely to self-injure.

So if one kid has you know the habit of banging their Head

on the wall.

It's going to injure them.

And so that is something that you would want to change that

behavior few expectations we have for kids that are considered

low functioning on the Spectrum.

When actually they can do more than what we give them credit

for sometimes kids on the mild to moderate to low functioning.

May have epilepsy that goes along with it or seizures.

So you have to monitor those as well.

You know, there's lots of repetitive there's lots of memory

issues. There's lots of cognitive issues the lower functioning

you get however, they can still do things.

So we have the many faces of autism.

These are wonderful group of kids and young adults.

Every one of them is on the Spectrum and the young man in

the middle on the left side in the blue shirt there smiling

and painting is My son, so he so I have to include him horse

and everything.

But um, yes, so we see smiling faces, you know, we look at

them. We cannot tell if they are on the Spectrum just by

looking at them.

So the spectrum is kind of very difficult because we talked

to him and that's when we figure out something's a little

off or something's Going on and so but just by looking at

them, you would think they were any other neuro typical teenager

or child or young adult, but just by looking at them you

cannot tell and you can't tell where they are on the Spectrum

either. So so what is autism exactly all we know that there

is not one person that has autism.

I mean not everyone has autism the same way.

You know, why not just one person with autism, you know one

person with autism because it is so different, you know,

there could be a combination of genetic or environmental

influences that can have those changes their autism and autism

spectrum disorder refers to the range of conditions characterized

by challenges with social skills repetitive behaviors.

Each and nonverbal communication as well as unique strengths

and differences.

So you have the umbrella of autism spectrum disorder which

includes autism disorder Asperger's childhood disintegrative

disorder Tourette's Syndrome at Cinderella and pervasive

developmental disorder not otherwise specified wise specified.

So a lot of times kids very early on will get the diagnosis

of PD and Os which is pervasive developmental disorder not

Otherwise specified and from that they will either get a

you know, they could move into an Autism Spectrum Disorder

or they could move into an EBD emotional behavioral disorder

or something else.

But a lot of times it just started off as PDD and Os the

term spectrum of course means a wide range a wide range.

So you have people that are living on their own working supporting

themselves there.

On the Spectrum.

Those are our people that are higher we call Hot the highest

level is Asperger's you know, we have professors.

We have teachers we have CEO's that are all on the Spectrum

all on the Spectrum.

And so then you come down and the again the lower the level

the more support and the person is going to need in their

life. So Autism Spectrum Disorder, so if you look at it autism

is the 53% severe autism is 4% mild.

I'm sorry moderate autism is 1% mild is 3% high functioning.

Autism is 5% Asperger's is 14% PDD.

NOS is 18% ain't learning disability is 1% and Mild developmental

delay as 1% and that all encompasses into the autism spectrum

diagnosis. So autism is is a lot of things combined.

And I love this little thing.

It says what the hell is that?

Oh, that's just my mind.

You see how it's all scrambled and all kinds of ways.

Well, that's how a person with autism.

Grain Works kind of thing.

It's a constant overload.

It's trying to pick things out or where they need it.

It's disorganized kind of thinking and so I think that that

pretty well says it So in order to get a diagnosis of autism

spectrum disorder, you have to have testing it is not a medical

testing. There's no blood work that you're going to do.

There's nothing like that is going to give you that diagnosis.

You're going to have to see a specialist, you know, a neuropsychologist

school systems can now do testing as well when you request

an evaluation from your local school system you would ask

them to include Glued an Autism Spectrum testing, there are

several different ones.

They're listed here adolf's is the one is mostly used and

it is the autism diagnosis observation schedule evaluates

all ages and is considered the golden standard of assessment.

So a lot of times that one I know that that one is used more

often than than the others.

So is it based on?

It is observed based on development of history based on what

teachers are seeing and parents or saying and then there

is a tie there is like a okay.

So you have see a picture put the block on top of the car.

Well, if they don't know what on top means then they're going

to have difficulty with that and they should be able to do

it at the age that they're testing them at.

So if there's difficulties about on Top of under around.

I mean these that's just one part of the test then then there

could be some of that, you know developmental history.

Did they develop have my meet their milestones and all of

a sudden regress or did they never meet their Milestones

as they were growing?

An educational determination is made by a multiplier dissonant

multidisciplinary team and that would include the parents.

There is a law called individuals disability Education Act

idea. You can go on the Florida Department of Education or

the department of education's website and search for idea

and at that is the actual law that protects children.

And who have disabilities or mental health disorders in the

school systems but supplying them if they meet the criteria

with an IEP.

However, if they don't meet that criteria, they would probably

made it for a 504 plan.

So that is how you can get supports in the school.

And so these are the testing this that will Dunn also they

must meet the criteria.

That's to the DSM-5 as well.

So developmental screening.

For the well-baby check that everyone gets when they have

a baby that's born.

It is now recommended that all children be screen for autism

at the well check.

So what it does is it goes over how they're developing?

They might they provide as if Elmo screener asking a specific

questions about the progress of the child.

Do they Babble or coo to the milestones?

You to be doing that at 12 months.

Do they gesture Point wave grass by 12 months does not say

a single word by 16 months.

Okay does not say two words phrases on his or her own by

24 months or 2 years has any loss of language or social skills

at any age?

So it is now recommended by the Pediatric Association.

Ian that all children be screened on their well checks for

autism because it is so pervasive at this point when we're

looking at one in fifty four kids being diagnosed.

It is the fastest growing developmental disability in the

world. I'm not saying in this country.

I'm saying worldwide because it is worldwide any of these

flags that you see you may want to get further testing.

To see if the child is on the Spectrum now I can tell you

many many years ago twenty five or Twenty to twenty-five

years ago.

They did not want to diagnose children as early as two on

the spectrum.

They wanted to wait to see how they matured and if they caught

up with Milestones, or maybe there was just something going

on those kinds of things and so now we We know intervention

early intervention is so key in all this that the younger

a person get a child gets diagnosed and we put in early intervention

the better the outcome for that child will be I was very

lucky in the fact that my mother was a development specialist

early steps.

I got him evaluated very early on as soon as we started noticing

some things aren't I should say my mother did I wasn't Mom

and you know what I was doing and so naughty men got him

evaluated got him services and you know services are never

going to harm a child.

They're only going to help even if you have a child with

no issues going on at all.

There's still going to help that child.

So early intervention is so key and we have programs here

in Florida, like early intervention that can help birth

to three year olds and I highly recommend it.

So, you know, you can get those supports early on.

So autism spectrum disorder early warning signs.

No smiling at people by six months.

No babbling pointing or meaningful gestures by 12 months

poor eye contact use using or focusing in on parts of toys

or objects.

Not the whole thing.

Just the parts not a not showing items are sharing interest

not responding to sounds voices or their name.

So a lot of times you'll see that a kid will be sitting with

her back turned Hugh and you will call their name.

They don't respond.

They don't turn around that it could be a sign of a child

on the Spectrum and ice it could be because there's other

things you have to look at as well.

It's not just one thing.

It's a combination thinks there is no one word communication

by 16 months loss of any skill at any time.

No.

Two word phrases by 24 months not responding to their name

not pointing.

It objects having trouble understanding other people's feelings

are talking about their own feelings.

You know, they don't I Can't Describe to you how they feel

their emotions kind of thing.

They repeat phrases or words get upset over very minor changes.

I mean, I know some kids that have to have My son has to

have my son cooks for himself thankfully now and so but I

know some kids that you have to have the pizza cook it exactly

the same way, you know cut exactly the same way put on the

plate the exactly the same way and if it's not then they

they become overwhelmed and they get upset because that's

not what they're expecting.

And so they're very rigid in that thinking.

And that can cause a lot of issues with families so causes

there are no known causes for autism spectrum disorder at

this point, there are speculations, but there is no known

cause for autism.

Okay.

So if you look at the brain scans on the left there you can

see I was considered a neurotypical or normal brain versus

an Asperger's brain.

You can see where it's more powerful abilities and you know

processing. The control brain versus a person on with autism's

brain. You can see that the yellow the middle one the middle

picture there were there was a lot less growth there.

And then again on the bottom a typical when I say typical

I always put it in quotes because nobody is normal or typical

anymore child versus a child with autism.

You can see that the brain is is more active whereas the

To child with autism is very straightforward linear.

So brain scans show the different shapes and structures of

the brain of children on the Spectrum versus the neurotypical

children. Theories on autism include links between heredity

genetics. However, no Gene has been identified.

They're just looking at that.

I know they've been doing studies for years genetic causes,

but they have not come up with anything.

It could be a medical problem.

So research researchers have not yet identified a single

trigger that causes it research are still investigating the

possibilities. Under certain conditions, excuse me, certain

conditions a cluster of unstable genes May interfere with

brain development resulting in autism.

These are just theories that they have nothing has been proven
at this point.

It could be a viral infection metabolic imbalance exposure
to chemicals.

You know, what do they all have in common?

Well, that's very hard to find out with so many being diagnosed.

So parts of the brain is affected by autism.

Are you going to have basically the entire brain the hippocampus

makes it possible to remember new information and recent

events, you know, the The cerebellum is located in the back

of the brain.

It's fine.

Tune motor activity.

A lot of times.

They have very difficulty with fine motor skills such as

buttoning a shirt tying your shoelaces I gave up on that

many years ago.

He wears Crocs every day and he loves it.

So, you know blending and zipping up pants could be difficult.

These are life skills that we all learn but kids on the Spectrum.

They find it more difficult but ending up shirts buttoning

pants a zipping up stuff, you know, they're going to be constant

support and showing them over and over and over again how

to do things.

You know, the brainstem is passing messages between various

parts of the bodies that can have issues.

You know, it's you know, those kinds I mean it affects every

area of the brain from memory to speech patterns to fine

motor skills to gross motor skills to you know, a speech

and Language, so there are many effects on the brain due

to the Autism Spectrum Disorder.

So some facts about autism is that According to the CDC and

this says one of 59 it is now when I checked it yesterday

one in fifty four children in the United States will be diagnosed

with autism again when my son was diagnosed 20 some 20 CC's

24. So it was about 22 23 years ago.

It was one in five thousand so you can see how we had a has

really grown.

Four out of five are going to be boys.

There are mainly boys this also started as in the very beginning

of autism some 50 60 70 years ago.

This was considered the refrigerator.

Mom syndrome meaning that they believe that Mom's did not give enough love and care to their boys and so their boys became distant.

And and so that's how they used to call it.

Then, you know as time has progressed.

Of course, we learn more every year but four out of five are going to be boys that are diagnosed.

It's an estimated 250 thousand teens with autism will become adults each year.

They lose their school based Autism Services, and there's not much for for adults on the Spectrum at this point either is vocational rehab.

However, if you don't qualify to work, then there is no work for you unless you go to a skill center of some kind.

One third of the people with Autism will remain nonverbal

around one.

Third of the people with Autism will have an intellectual

disability which means they have an IQ below 70 and certain

medical and mental health issues frequently accompanied autism.

They include gastrointestinal issues seizures sleep disturbances

attention-deficit hyperactivity anxiety and phobias I can

tell you my son has gastrointestinal issues.

He cannot digest milk.

However, he craves milk.

So he he can't have it.

He also has sleep disturbances.

I remember when he was very young right after he got diagnosed.

He stopped sleeping at night.

So I would drive all night long just to get him to sleep

for a few hours and you know, I tried everything I could

put him in.

Swing I put him on the dryer washer and dryer.

Let me feel the vibration.

I put it in the car with a car on but he knew the difference.

It had to be a car moving.

So, you know kids are very sensitive to those things and

they can develop anxiety and depression that goes along with

it as well.

There are more than 3.5 million Americans that live with

autism spectrum disorder.

The prevalence in the US has increased by a hundred and nineteen

point four percent over the last 20 years fastest growing

development of the fastest-growing disability at this point

Autism Services in the US for u.s.

Citizens cost between 236 and 262 billion dollars annually.

The cost of lifelong care can be reduced by two-thirds with early diagnosis and intervention.

That's why early diagnosis is so key and early intervention is so key.

Thirty-five percent of young adults ages 19 through 23 with autism may not have had a job or receive postgraduate education after leaving high school.

That is probably going to change. Well, I think postgraduate education will probably increase because there are now colleges that are wanting kids on the spectrum that are extremely high functioning. Of course, there's Asperger's kids.

They're going to want them. There now colleges are wanting them but a large majority of kids are young adults on the

Spectrum are not Going to work are not going to go to you

know, post, you know secondary school.

So they're going to be living at home with Mom and Dad with

nothing to do because there's nothing out in our communities

or I should say there is very little out in our communities

for those kids between the ages of leaving school because

if they have an IEP they can stay in school till their 22nd

birthday. So from the ages of 22 till their lifespan, There

is not much activities or things that they can get involved

in families as families.

We try to figure things out of what our kids love to do and

then try to make it happen in some sort of way.

It's very impactful to families and you can see where families

a struggle with this a lot.

So signs and symptoms of ASD is making little or no on contact

tending not to look or listen to a person rarely sharing

and enjoyment of objects or activities failing to be being

slow to respond to someone is calling their name.

So a lot of times my son stuff stutters very badly and he

has had speech therapy.

For his whole life, he still stutters.

But if he thinks about what he's about to say, he won't stutter.

So it takes him a little time to think of his words and then

say it so that's a skill.

I've taught him and school has taught him over the years.

But it may take some time for the person to respond back.

They're trying to understand what you've said or asked and

then they're trying to form the thought and then say it verbally

is more difficult for them than it is for us.

We do it instantaneously, but for them, it's a big process

having difficulties back and forth conversation often talking

at Great length about their favorite subject facial expressions.

You've been suggesters I could tell you.

The best thing I ever did for my son was when he was young

about second third grade, maybe even younger I put him in

a theater camp and he took a class in improv.

And so he had to create facial gestures and expressions to

go along with what was being said and that really taught.

Him about emotions about how you're supposed to respond to

something. So those kinds of things I find and then I try

to hook him in with them, you know, even from choirs me being

there, you know.

Hey my kids on the Spectrum.

He's very interested in this.

Can we try it out for a couple days?

I will be there with him, you know, and we'll see how it goes. So I talk people into letting my son try different activities and we find out what he likes and doesn't like and what he loves.

Is he loves doing those kinds of things having an unusual tone of voice?

I can also be that the other like a sing-songy voice or they can have a flat robotic type of voice again.

It goes like Echo like speech having trouble understanding another Point person's point of view restrictive repetitive behaviors, you know, having lasting intense interest in certain ex having overly focused interest such as moving objects are parts of objects getting upset with slight changes those

kinds of things.

Although a people with ASD experience many challenges.

They may also have many strengths including being able to

learn things in detail and remember information for long

periods of time being strong Visual and auditory Learners

excelling in Math Science music at on the Arts.

So my son may not be academically all that great, but I could

tell you he can tell you every voiceover actor there has

ever been on any animated movie, you know, so that's his

strings. He wants to be a voice actor.

So he has learned to change the inflection of his voice.

He is also an art a cartoon artist.

So he draws that as well.

So there's really good strengths that he has but the weaknesses

are He will probably never worked for someone because the

first word out of his mouth is going to be no, so and it's

hard for Boss to get past that know and he is you know, he

knows what he wants and what he doesn't want.

So when I when interacting with someone on the Spectrum be

patient and give the person space use Simple concrete sentences,

they do not.

Understand, you know, it's raining cats and dogs.

My son would look out the window go.

I don't see any cats and dogs.

What do you mean?

It's raining cats and dogs.

They're very concrete.

You can't use those kinds of things with them.

Give plenty of time.

Okay for spawned be alert of signs to that increase frustration

tried to eliminate the source of possible or behavior behavior

that may escalate due to that.

So if you know that if there's a certain word or certain

phrase or there's a toy or a person that is going to elevate

them then it's not that great to have them in the room while

you're trying to do any kind of work or testing kind of stuff

because they're not going to be focused on you.

They're going to be focused on those things avoid quick movements

and Loud Noises.

Don't touch the person unless absolutely necessary a lot

of kids do not Like to be touched and some love to be hugged

really tight and really, you know, squeeze them tight and

there are sensory vest that they can wear that helps to mimic

that feeling that a lot of kids love to wear use information

from the caregiver of available on how to best respond to

someone on the Spectrum.

You know, they're very creative Creative Kids and they're

very smart kids.

They just are smart in a way that we're not picking up on

that makes any sense.

So if a person with autism is missing the first place you

want to look for is water.

Doesn't matter where it is what type it is.

That's where they gravitate towards drowning is the leading

cause of death amongst individuals on the autism spectrum.

That's why it's so important to teach our kids how to swim

how to if they fall into some water how to get out how to

keep their head above water.

You know when a child becomes missing their family and caregivers

must consider prior to this must be considered a priority

in the investigation regardless of the age of the child or

you know, it could be adult or a toddler.

It's still very important and it's still extremely time-sensitive

meaning individuals are prime targets for abuse and wandering

without Now using dangerous situations you know kids don't

recognize if I'm not looking both ways you know a lot of

kids are not looking both ways before crossing the street

so they just walk out in the street that's very dangerous

especially if you live on a busy street or any street so

there's safety issues involved with kids on the spectrum

that you really have to teach them now I keep saying have

to teach them things but the thing of it is is you have to

teach them a thousand times Because on the thousand a month

time, they will get it but they won't get it till you've

taught it to them to the point where you're sick of teaching

it. A lot of times.

My son would not understand our pickup on it or understand

the nuances of certain things and I would have to teach it

to him over and over and over and over again.

I'm still teaching him.

He's 24, you know, I would say I'll say something he'll goes

that's not what I meant.

And I'm like it actually it is but I'm saying in a way you

don't understand so I have to read then rephrase it in a

way that I know he will understand individuals with autism

can't be identified by parents.

So, you know, someone looks at them.

They're not going to think anything, you know, that's up

individuals with autism tend to have an underdeveloped upper

body trunk and so positional proxy ation can Cause to them

not being able to read this this more for police officers

if they need to restrain someone it would not be a good thing

to do a positional proxy Nation just because they it's difficult

to breathe.

If a child with autism is missing.

Speak in short clear phrases, you know, once you find them

say get in sit down wait here, you know instead of saying

get in the car.

I'm going to take you to the police station.

They're not going to get all of that.

So just say one thing at a time an individual may take longer

to respond to the directions that you are giving them.

So make them simple and short and clear and that really goes

for everything individuals with autism.

They're taken to jail need to be kept away from the general

population. They will.

Say just about anything to go home because they like if the

officer says well if you just tell me the truth, you'll get

to go home.

They totally believed that and we'll say whatever the officer

wants them to say just so they can go home.

These individuals may have a weak understanding of cause

and effect 50% of individuals with autism are non-verbal

throughout their lifespan another 20% may present as nonverbal

and a highly stressful situation.

So if a person does go, you know is is say a police Who picks

him up and takes them to the jail, then they may become nonverbal

just because it is extremely stressful 40 percent of individuals

with autism will develop epilepsy or some other seizures.

And then people with ASD may feel threatened by the approach

of or touch from adults.

So again touch make sure you ask is it?

Okay if I touch you is it okay if I hug you that kind of

thing so some do's and don'ts aim to keep the situation common

all times over here.

I have some examples of Behavior Support booklets.

You can make there is a program called boardmaker that you

can get a lot of these pictures off of I started with my

son first make your bed.

Then you get a cookie kind of thing.

And that was very visual for him or now.

You know, I give him two choices but two choices of things

I want him to do.

You can either make your bed now or we can go at your haircut

now? Which one do you want to do?

He makes the choice, but we're going to get both done.

So does it really matter?

What order did it go in? Be aware that you're being?

Behavioral language may be confusing to them.

So say things clear, concise, simple to point, you know, very

concrete sentences use their name to start the sentence like

hey Jack, please get in the car use questions that are directive

clear and focused on one thing at a time to avoid confusion

a person with autism may respond to your questions without

understanding the implications.

What they are saying use visual supports and AIDS such as

drawing pictures or photos to explain what is happening a

lot of times.

I know officers or ours security may not have they're not

going to have pictures on them to help explain things, but

they can draw out things or just to help explain, you know,

I'll so when I do this for police officers a little bit different

of a training I will tell them if they can to turn off alarms

and sirens and the lights as you approach someone with aspect

on the spectrum because that will become overwhelming sensory

wise that's you know, if you know that person is on the spectrum

that you're going to that location.

So that's very helpful.

So some things you want to do is clearly explained the Relation

and what you'll be asking the person directions information

and more.

Allow time for the person to respond don't expect immediate response. They may respond in a movie quote.

So be careful of that as well because then you're gonna have to interpret what they're trying to say don't assume that if they pair it, you know, repeat what you say that they're being rude.

It's how they speak that's their language.

So if you're talking to a person somewhere else explain Clearly where you were taking them and why if they can read it may be useful to put the information in writing a person with autism often understands visual information better than spoken words, and there's a ton of apps.

The best app for me right now is texting my son.

Text me and he texts me like a 24 year old man.

When he talks to me, he talks to me like a five-year-old.

So because his his language is not clear.

He combines words.

He still stutters a little bit and I'm not understanding

what he's trying to say.

So I will always say can you text that to me and it's very

clear very precise as to what he's wanting to say and that

really helps me but there are a lot of apps out there that

have you can get on your phone that have visuals that can

help. and they work great.

I guess I'll have I have several of them from the through

the years that I've used turn off loud.

Noises are flashing lights of possible check.

The person for injuries being not non-invasive and it's possible.

They may have an injury and not be aware that they have one.

So things you don't want to do is attempt to stop the person

from from doing their stemming if they're stemming that's

keeping them calm and unless you know, unless you have taught

them a different strategy if flapping their hands or rocking

keeps them calm in a crisis moment.

Let them continue to do that.

This is not a time to say stop doing that.

I'm going to teach you a new skill right in the middle of

a crisis do not be offended if they seem to close to you.

Some kids will get right sit almost on top of you a person

with autism may not understand the notion of personal space

don't misconstrue approach misconstrue a person avoiding

eye contact as rudeness a person with autism may carry an

object for see security such as a paper clip a piece of string

something that very harmless but in the midst of things confusions

of stuff, they may take it other pocket.

You may not know what it is.

You make be concerned for your safety when it's just a piece

of string but they need that because that's their security

if anybody ever saw the movie made in Manhattan was refined.

Carries a paper clip when he does speech when he does speeches.

Well, it's just like a kid on the Spectrum.

He may carry a paperclip to make him feel secure.

So be aware of those things as well.

Don't touch the person or use handcuffs.

This is for police officers.

Again, if the situation is not dangerous or life-threatening

also putting cuffs behind someone's back may be very difficult

because they may not have the range of motion.

So if they do need to put handcuffs on handcuffing in the

front would be easier try not to raise your voice as that

may scare them and do not use sarcasm.

Figures of speech or irony.

They don't get it.

If you say oh you're pulling my leg and they're like, no.

I haven't touched your leg, you know, so be there very concrete

thinkers to some sister sensory issues with everything closed

when my son was young.

I had to cut up every single tag and every single piece of

clothing he ever had.

Thankfully they now may print them on t-shirts now, I'm painting

shorts and pants and stuff.

So, you know, they can have sensory issues.

My son cannot get near wool.

He will break out.

He like an allergic reaction.

So it has to be something soft.

It has to be cotton.

He can't tie his shoes.

So he wears Crocs.

Someone may not be able to use zippers or buttons or laces.

So you find other ways and other clothing that can help.

There's actually companies.

There now that sell clothes that are all velcroed so they

don't have to worry about anything.

If you can put them together.

They velcro right together feared their diet is very limited

the textures again.

It's a sensory issue.

My son can identify the pizza you put in front of him.

So he likes Tombstone pepperoni pizza if I put You know DiGiorno

pepperoni pizza in front of him.

He'll tell me that is not the right pizza.

If I've laid out several different pizzas.

He could tell me from what pizza place are from if it's Domino's

Pizza Hut, you know, Whatever other places he could identify

just simply by looking smelling and tasting it exactly what

pizza place is from.

So even though they're very limited.

They know what they want and what they like.

No, social skills my son if I interrupt him and anyway while

he's trying to talk to me, he'll say let me finish what I

was saying.

Now.

I have to start it all over again.

So I try not to interrupt him because you know, I can't listen

to 15 minutes again of what he was trying to say, but he's

that's how kids are if you interrupt them.

They can't continue.

They feel like I have to go back and start all over again.

They may have issues introducing themselves only talks on

their topic that they enjoy child like a child likes.

They're adults.

Excuse me.

So longer longer time to potty train.

Yes.

I have lots of potty training stories.

We had pictures everywhere.

We had stickers everywhere in the bathroom as to the directions

step by step on how to go to the bathroom stuck on the back

of the toilet.

See, you know, you left the toilet seat up in there so the

directions and it would be pull your pants down, you know

stand next.

The toilet, you know for boys stand up for girls sit down,

you know, unfortunately mom my ex traveled a lot.

So he learned how to sit down to go potty but you know, those

kinds of things you have to teach them step by step wiping

is another issue washing hands is another issue so I can

tell you I was having a dinner party.

My son was 6 years old and he come Zion he says mom I went

potty. Can you wipe my bottom now and I'm like, oh please

so but yes, it takes a lot longer for them to become potty-trained

it is, you know for Summit takes many many more years past

six or seven.

So there are autism treatments out there that can help with

the behaviors.

There are sensory integration.

There is applied behavioral analysis ABA education at each

which is educational Autism and Related.

This kind of came out weird for children, their specialized

therapies such as speech occupational Physical Therapy language

therapy, there's community support for parents and training

for sport and A parent trainings there's medications for

the anxiety for some of the symptoms that go along with are

some of the disorders that go along with autism like for

anxiety. There is medications for that hyperactivity depression

obsessive compulsive behaviors.

There are medications that can help that part of the autism.

There is no medication for autism itself.

So there is medication that can help with some of the symptoms

of that are this Old house that goes along with their autism

see how overwhelming this can be this this drawing.

This is a kid on the spectrum.

They have all of these things going through their head kind

at one time.

But also these are things that you can do you can praise

good behavior.

You can develop strategies you can help think of things.

The coping skills are distractions away from behaviors.

You're not wanting them to do.

Put in a reward system social skills, make sure rules or

understand stood, you know, kind of thing make things simple

and structured you social stories build awareness visual

supports use interest in motive use their interest to motivate

them. Okay, so you love trains write me a history on trains.

Okay, you can't write a paper.

I want to oral report that's 10 minutes long on trains.

Give me the history of trains, you know, you can use the

things that they like and you can make some adjustments to

the way they present it in a way that they're more comfortable

with you schedules a good visual supports and strategies

are really important communication.

You know avoid sarcasm use Simple language sensory issues,

you know plan on teaching them coping strategies and what

they are and then have have them where they can see them

so that all you have to do is point and say remember that

strategy so levels of prompting.

So a lot of kids are a lot of families say I my child need

the 1018.

Well, 1018 is great.

And I did have a child a one-on-one a for my child when he

was starting school and the second grade because I wanted

him in an inclusion classroom.

I did not want him in self contained.

So he had a one-on-one Aid however one-on-one Aid should

be there for a short period of time not for the rest of their

life. So they may need it a year or two, but after that you

really need to start thinking our is that one?

On wait on in a doing everything for them have they learned

to do for themselves?

So If you have a step-by-step narration given to the student

in order to do the task, and then you have somebody coming

in and helping them do it hand over hand.

That is the most dependent you can get on someone.

So, you know, we have verbal physical parsley physical model

model what you want them to do and then they can do it gesture

which means just point and tell them what they need to do

and they do visual point.

Point to an object and they do it all independently.

So we want our children to do it independently because we

want to be independently as possible and all starts with

early intervention and it starts with teaching our kids early

on because remember it takes a thousand times to teach them

one new skill my son knows how to use a dishwasher and washing

machine and dryer, but guess what every time he goes to a

new place.

I have to teach them how to use it because he cannot generalize

that information.

From my home to his home.

So I have to go when he goes to his home.

I had to show him how to use those things again.

Now, it only took me one or two times.

He got it, but he did not could not figure it out for himself.

So we want our kids to be as independent as possible with

the least invasive promptings and supports so that they can

have, you know, go into the community.

You know meat hot meat and have friends and and those kinds
of things.

So visual supports.

We have a first then which is works really well with kids
on the Spectrum.

We have visual art visual schedules all kinds of things going
to the potty, you know step by step.

I've done that now I'm going to you know, move it tear I've
completed it and now I'm gonna do the next step kind of thing.

So early causes of death amongst kids on the Spectrum again
drowning is the leading cause of death.

Struck by a vehicle struck by a train hypothermia trauma
seizures and Falls.

So again drowning is the leading cause of death amongst.

Kids on the Spectrum as you can see 71 percent of deaths

have been caused by drowning.

Struck by truck because they didn't understand how to cross

a road safely is 18 percent.

Struck by train because they're so interesting trains four

percent. I do this with police officers and I'm going to

kind of lightly do with you real quick.

This is I don't know if you remember or any are not this

young man who was 26 years old his last name's Rios.

He he was in Miami.

He is a young man on the autism spectrum.

He was living at a facility.

He kind of got out his caretaker was with him.

The police did not understand what was going on and they

saw a shiny object in the young man with autism is hand.

Okay now he is on the Spectrum.

I don't know if you remember but his caretaker got shot and

the young man was brought down into to be interrogated.

Well, this is a heart a partial script or a little sample

of the script of what happened during that interrogation.

All right, and that interview process, I guess I should say.

So if you start to read this it says what did you have in

your hand?

Do you know ask the interrogator?

Okay.

Now remember wh questions are difficult for kids or adults

on the Spectrum to answer.

So what do you do you have in your hand?

Is it difficult to questions go take you more time to process.

Do you know is another question.

So he's going to automatically respond.

Yeah, just so that he makes the interrogator happy because

we there they are people Pleasers to was and then the interrogator

says was it shiny and he's now repeating the words that he

hears shiny.

Was it black black?

Was it red?

Red was it blue blue?

Okay, so The Interpreter interrogator?

Okay said Rios.

Okay.

Did you want to hurt anybody today as yeah.

Now remember he this question that he didn't understand he

answered. Yeah, he does not understanding this question either.

So he says yeah.

Excuse me.

Who did you want to hurt?

Yes, because he's not understanding the question and so he's

saying yes, like my son went on a medical exam know this

person may have learned to say yes on everything.

So he is repeating things that he hears.

He is not actually answering the questions.

So when you go to ask someone on the Spectrum Shins it is

easier to ask not what who where when high how question it

is easier to ask.

Are you?

Okay, you know, they could say yes, sir.

Our ask them, you know, if you've a see them rubbing their

eyes, are you tired kind of thing?

So you're not going to wh questions are something that really

has to be worked on a lot with schools with the parents everything

speech and language therapy helps as well with that.

So we have these wonderful fantastic unbelievable people

in our community and through history.

And every one of them is on the autism spectrum Albert Einstein

the creator of Pokemon Tim Burton Jerry Seinfeld Jim Parsons,

Bobby Fischer Temple, Grandin Steve Jobs James Durbin who

was on where was it the show American Idol Bill Gates Daryl

Hannah surd, Anthony Hopkins all of the and Dan Aykroyd,

all of these people are on the autism spectrum and have said

that they are not only these people but these as well they've

gone back in history looked at their behaviors and their

socialization skills and things that they've done in their

life and have come to realize that they were probably on

the Spectrum such as Michelangelo Mozart, you know, Susan

Boyle who won Britain's Got Talent, you know, those kinds

of things and so we have many people in the world with us

that are on the Spectrum when we may not know we have many

people in the world that are on the spectrum that can do

amazing things there.

So hyper focused on one thing or there they have a great

interest in something else.

They may not be able to tie their shoe, but they may be able

to solve a huge mathematic equation like Sir Isaac Newton

Newton, so they have these skills.

And we need to hone into those skills and use those skills.

So finding out their skills sometimes can be difficult.

But if you take and I could tell you I went to a trading

I've gone to several that Temple Grandin has spoken at and

she is like the I guess you would say like the poster

child for autism spectrum disorder because she has it.

She's written about it.

She's written books about it.

They've done a movie on her life.

She told me fine what the child is interested in and build

a career around that so A lot of times, you know, we put

what we think our child should do onto them.

When really we find what they're good at what their interest

is and then we worked Find employment in that direction.

And so what if you can't find employment in that direction,

my son is a cartoon artist.

There's not cartoon artist that he's not going to go work

for Disney.

Okay, so but he can work at home he can draw them and then

we can go to like the Comic-Con fairs and where he's can

sell his his drawings.

So those are things you can absolutely do.

Do so are there any questions comments concerns there was

a statement in regards to because of course in our field

we work with kids who have experienced some type of abuse.

And so one of the comments that was made was some of the

symptoms can also look like children who are in who have

been impacted by trauma.

We can make evaluating them, you know, very important right

and I know Even for myself as you were talking I was thinking

about the struggle with when a child is, you know, struggling

in one area yet gifted and another you know, and then how

do you I mean even as a caregiver or a parent, you know,

it can be very difficult because you know, you're thinking

that they have the capacity in all areas because they're

gifted and a particular area.

So I think that definitely could be the struggle for some

parents and caregivers.

Rivers and then also even for professionals when you're seeing

what looks like trauma and you're thinking that's what it

is, but it's actually something else or vice versa.

Absolutely and kids on the Spectrum can have trauma too,

right? So and there is also to let them know families who

have a child that have that are on the Spectrum or have a

disability or mental health disorder because or substance

use disorder.

Because of all the struggles you go through and because of
all the things you have to do for them.

The divorce rate is 85% see a lot of times you have a single
mom taking care of this child with very minimal supports
from the family.

I know when I was - I was very young.

I had a family member Say You're Just spoiling him and you're
not giving him any discipline and I was like, you just not
understanding what he's coming from.

So and then that caused conflict between my ex-husband and
I course now, he's my ex-husband.

Of course.

My anxiety level went down when I became an axis.

So it was good for everybody.

I'm teasing I'm teasing.

I'm so you know, it is important to Understand trauma can

look like autism it sometimes because we know that when kids

are going through all those things they can shut down and

they can you know, develop different mental health disorders

different learning disabilities all kinds of things can go

on when they're having those those traumas.

So that is very difficult.

Yes.

Yeah.

Thank you.

And I know I heard you say stimming a couple of times is

that St.

Eim Mi or what is that?

Like just because it's a behavior like flapping their hands.

Right?

Right.

It does is it helps them to stay calm Ray stay focused that

kind of thing.

No, there are kids that do it more often than others some

they may do something very simple, but you know, They're

doing right may not do anything at all and some maybe stimming

like crazy.

So but it's the way of the help them think and process if

we don't have any more questions.

Okay, we do have one it says our tell me about so I guess

if you're saying tell me about says are those questions better.

I know you mentioned you mentioned the wh so is that better

to ask?

ask that question better for older kids, you know who are

able to express thoughts younger kids who are not it's really

like you're going to ask you're going to talk about you're

just going to start talking about what they did at school

or what they doing at home and like if they're working on

a puzzle, you know, do you like Puzzles, you know kind of

thing just real simple kind of things and You know, I learned

somebody said to me one day you have to ask direct questions

because I used to say how was your day at school?

Okay, but if I said how was or was math?

Okay with math class good brain, no math class not good,

you know kind of thing math class, you know science class

good. Yeah, like science class.

So I mean, you know it what I did put that what or how was

it? I was just like science class.

Okay or size.

You know and then he would respond good or bad.

So and I always try to use positives as much as I can.

You know, so I always say it was like math class good and

so he would then be able to respond.

No bad, you know something and communication with school

and parents or is so vital it was for me and my family because

we followed through with everything the school is doing and

everything that we were doing at home schools.

Doing also so we all had the same behavior plan.

We worked on the same reward system everything and keep smelling

that was really key for us.

So yeah, perfect.

Perfect.

All right.

Well, thank you so much.

I think that's it.

Thank you all so much for joining us that concludes today's

training.