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Autism Agenda



Linn Benton Lincoln ESD-Cascade Regional Autism Program

5 Ways to Encourage Communication with a Non Verbal Child Diagnosed with Autism

BY Becca Eisenberg

As a speech language pathologist, one of my greatest joys have been communicating and connecting with both children and adults with autism, specifically those who are nonverbal or minimally verbal. I have met countless individuals who are living in a silent world and have been waiting to be opened up so they could communicate and connect with others.

I have met struggling families who felt like they couldn't connect with their child due to a variety of reasons. I think no one can understand the position of these families or individuals with autism unless you really live it. As a speech language pathologist, I feel lucky to have the skills to help these individuals begin to communicate their basic needs and wants via augmentative and alternative communication.

Today, I would like to share five helpful strategies that I use to help communicate and connect with those diagnosed on the Autism Spectrum that struggle with communication. These strategies can be used with both verbal, minimally verbal and nonverbal children and can be used anytime, whether you are at the dinner table or out in the community.



I. ENTER INTO THEIR WORLD BY USING MOTIVATING PEOPLE, ITEMS, ETC. TO ENCOURAGE COMMUNICATION

For many children, food is motivating. For others, it could be specific toy, movie, friend, family member or neighbor.

For example, if your child loves interaction with a specific family member, use this motivating person to encourage communication. If you are using this person to encourage communication, use a variety of visual and auditory strategies (e.g. use a picture of the family member and/or model the name of this individual). Encourage your child to point to the picture of this person or exchange the picture with you to request it. When they are able to point or exchange the picture, the motivating person could come over to the child and give him or her a hug to fulfill the request. (To learn more information about using a picture exchange communication system, check out [PECS USA.](#))

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ENCOURAGE COMMUNICATION CONTINUED...

2. LABEL FEELINGS AS THEY OCCUR

For example, if your child is reaching for food in the fridge, label the feeling. For example, say “You are hungry”. The more your child hears the particular feeling with a specific behavior, the better they will be able to understand that feeling.

This strategy needs to be consistent and occur naturally. Modeling a feeling can happen when your child is excited, sad, hurt, happy, etc. For example, as your child expresses their excitement, say “I see you are excited”. If you have a picture of “excited” it can even reinforce the concept more. [Learn more about using visuals here.](#)

I have been working for months with a particular individual with this concept and he is now expressing that he is hungry, thirsty, sad, mad, etc via the communication app, [Go Talk Now](#) on the iPad. Expressing a feeling can be liberating and be an excellent way to connect.

3. ASSUME COMPETENCE

Assuming competence is probably one of the most important things we can do as a parent, caregiver, therapist, teacher, etc. [Assuming competence for any child whether they have a disability or not is a form of empowerment.](#)



Assuming that your child CAN do it and WILL do it is powerful. The other concept is speaking to a child with [Autism](#) like any other child. Children with or without disabilities pick up very quickly when an adult or another child is speaking to them in a different way. This can be a strategy that can very helpful when telling others how to speak to your child.

4. MODEL LANGUAGE AND USE AIDED LANGUAGE STIMULATION

Modeling language is an excellent strategy. Many times a child may not know the specific word or structure of a sentence. For example, if your child wants water at the dinner table and indicates that to you in a way that you will understand, say “I want water.” Giving the model will help improve your child’s receptive and expressive language.

Adding a word such as “please” or in a question form can also provide clues to appropriate ways to ask for a particular item that can improve pragmatic language skills. [Aided Language Stimulation](#) (term coined by Carol Goossens) is a technique that can be extremely helpful during a variety of activities to help build language and communication.

5. USE A TOTAL COMMUNICATION APPROACH USING BOTH UNAIDED AND AIDED COMMUNICATION

What is aided and unaided communication? **Aided communication** is anything other than your body that you use to communicate. This can be pictures, photographs, words, etc. Many children with autism who are not able to use speech for functional communication often use pictures, photographs, words and/or communication systems to express themselves.

Unaided communication is using your body to communicate (e.g. gestures, facial expressions, sign language, etc.). I often get asked if using pictures for communication is going to take away any gestures or speech that the person is using, and the answer is always no. The best way to communicate is with a total communication approach, which includes all modes of communication. None of use communicate with just speech. Sometimes a friend or spouse can understand our message with a simple gesture or facial expression. Encourage all modes of communication whether unaided or aided.

<http://www.friendshipcircle.org/blog/2015/04/21/5-ways-to-encourage-communication-with-a-non-verbal-child-diagnosed-with-autism/>

AAC AWARENESS MONTH

October is AAC Awareness month!



Augmentative and alternative communication (AAC) refers to methods of communication that are used in place of or in support of natural speech that is not functional. AAC is multimodal; individuals may use one or more forms of AAC along with their existing modes of communication such as, vocalizations, gestures, manual signs and facial expressions to communicate.

Types of AAC include:*

Unaided communication	Low-tech communication <i>Aided Communication</i>	High-tech communication <i>Aided Communication</i>
Body language, gestures, pointing, eye pointing, facial expressions, vocalizations and signing.	Pen and paper to write or draw a message, alphabet and word boards, communication picture books, objects that represent what the individual wants to talk about.	Requires a power source and allows for the storage of messages and voice output. High-tech systems can be on a platform that is dedicated as a communication device only or run on a computer with other capabilities. The high tech devices vary in how the language is arranged and accessed with the user's abilities determining which symbols sets and access methods are used.
	Mid-tech communication	
	Mid-tech systems typically run on batteries and are programmed with simple, recorded messages.	

*Communicationmatters.org.uk "[What is AAC? Introduction to augmentative and alternative communication](#)"

Individuals who have complex communication needs have a wide range of AAC options available to support their communication. Speech-language pathologists, who specialize in AAC, can assist in finding the solutions to meet the individual's total communication needs. No matter which type of AAC system is used, the AAC learner needs to see how communication works using their system. When they see others use their system, it helps create a culture of acceptance that supports and encourages their use. They must see their system as an accepted tool to begin to meet their communication needs.

Please join us in celebrating those that use AAC and spread the word that AAC is a tool for communication. We look forward to empowering you in your role as a super communication partner with individuals with complex communication needs!

AAC AWARENESS MONTH CONTINUED...

Let's meet some students who also happen to use AAC...

Meet Selena:

Selena is a high school junior who loves to read books, listen to music and dance. Her high tech voice output system based in written language allows her to interact with her teachers to ask and answer questions, participate in classroom discussions, talk with her peers and tell her best friend her plans for the weekend. She also uses facial expressions and gestures for total communication.

Because her speech generating device includes a full and robust vocabulary which includes different classes of words-she has access to whatever language she needs to develop relationships and learn along with her peers. She takes her speech generating device with her everywhere she goes including cooking and ceramic class. Selena successfully communicates using her AAC because her teachers and support staff diligently modeled on her AAC device through the years which supported and encouraged her learning.



Meet David:

David is eight years old and is enrolled in a structured support classroom that supports students with a variety of learning challenges. One of his favorite things to do is share about his favorite topic-super heroes! He uses his speech to communicate and talk about all the cool things that Spiderman does. If a communication partner doesn't understand his speech he uses his high tech voice output system with picture symbols to clarify his message and make conversation repairs. He often uses some modified signs in addition to his speech and high tech device to communicate during class and on the playground. David is energetic and eager to learn and make friends. Fortunately, his teachers help him to keep track of his device and see that it is charged and ready to go-where ever he goes- he has a lot to say! Teachers and support staff have made it a habit to point to symbols on his device as they speak which helps him to learn the location of words on the device. Since David's teachers use conversation repair strategies; "I understood _____, what was that other word?" "Can you tell me another way?" While also giving extra time so that he can locate the symbol on his device before they repeat the word for clarification, classmates are now using the same conversation repair strategy. David is communicating all day long about the things that matter the most to him!

Meet Jayden:

Jayden is in the fourth grade and enjoys watching sports with his siblings and swimming every week at the YMCA. He uses a high tech speech generating device that is attached to his wheelchair that he accesses using eye-gaze technology. During times when he is swimming or cannot use his high tech device he uses a low tech word board with partner assisted scanning to communicate. Jayden uses his device during class to participate in classroom discussions and at lunch time to talk to friends. Jayden's family members, friends and school staff have learned how to use his device and use it consistently. Even Jayden's big brother and his friends use his device to interact when they're hanging out together on weekends. Because so many of the people that Jayden spends time with are modeling on his device it has validated his way of communicating and Jayden seems less stressed on Sunday nights before school.

Sources:

www.communicationmatters.org.uk

<http://praacticalaac.org>

TREATMENTS AVAILABLE

What Treatments are Available for Speech, Language and Motor Issues?

The following therapies—also called “allied health services”—address symptoms commonly associated with autism, but not specific to the disorder.

Speech-Language Therapy

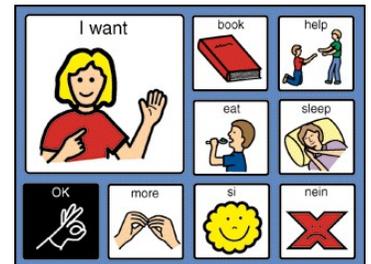
Most autism behavioral intensive therapy programs include speech-language therapy. With a variety of techniques, speech-language therapy addresses a range of challenges often faced by persons with autism. For instance, some individuals on the autism spectrum do not speak, while others love to talk but have difficulty using conversational speech and/or understanding the nuances of language and nonverbal cues when talking with others.

Speech-language therapy is designed to coordinate the mechanics of speech with the meaning and social use of language. Such a program begins with an individual evaluation by a speech-language pathologist to assess an individual’s verbal aptitudes and challenges. From this evaluation, the pathologist sets goals that may include mastering spoken language and/or learning nonverbal communication skills such as signs or gestures. In each case, the goal is to help the person communicate in more useful and functional ways.

The speech language pathologist can provide therapy one-on-one, in a small group or in a classroom setting. Therapists who work with children have additional specialized training.

Augmentative and Alternative Communication

Nonverbal persons with autism can benefit from a variety of augmentative and alternative communicative (AAC) devices and methods. The Picture Exchange Communication System (PECS) is among the most commonly used with children and adults who have little or no verbal ability. Therapists, teachers and parents help the child or adult build a vocabulary and consistently articulate desires, observations and feelings through pictures. This system can be taught and used at home, in the classroom and a variety of other settings.



At the start of a PECS program, the instructor teaches the child or adult to exchange a picture for an object—for instance, a picture of an apple for an actual apple. With instruction, the person learns to distinguish pictures and symbols and use both to form sentences. Although PECS is based on visual tools, the program emphasizes and reinforces verbal communication. Caregivers can purchase standard PECS images as a part of a manual or simply gather photos from everyday sources such as newspapers, magazines and books. (Also see the Autism Treatment Networks free guide: [Visual Supports and Autism Spectrum Disorder](#).)

Other augmentative and alternative communicative devices include specially programmed computers, iPads, and iPhones. For more information, visit the America Speech-Language Hearing Association’s [AAC webpage](#).

Occupational Therapy

Occupational therapy (OT) addresses a combination of cognitive, physical and motor skills. Its goals including helping a child or adult gain age-appropriate independence and participate more fully in life. For a person with autism, occupational therapy often focuses on skills for appropriate play or leisure skills, learning and self-care skills.

Therapy begins with a certified occupational therapist evaluating the person's developmental level as well as related learning styles, social abilities, and environmental needs. Based on this evaluation, the therapist determines goals and selects strategies and tactics for enhancing key skills. For instance, goals may include independent dressing, feeding, grooming and use of the toilet, along with improved social, fine motor and visual perceptual skills. Typically, occupational therapy involves half-hour to one-hour sessions with a frequency determined by the individual’s needs. In addition, the person with autism practices strategies and skills—with guidance—at home and in other settings including school.

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TREATMENTS AVAILABLE CONTINUED...

Sensory Integration Therapy

Many children and adults with autism have challenges in processing sensory information such as movement, touch, smell, sight and sound. Sensory integration (SI) therapy identifies such disruptions and uses a variety of techniques that improve how the brain interprets and integrates this information. Occupational therapy often includes sensory integration. Other times it is delivered as a stand-alone therapy.

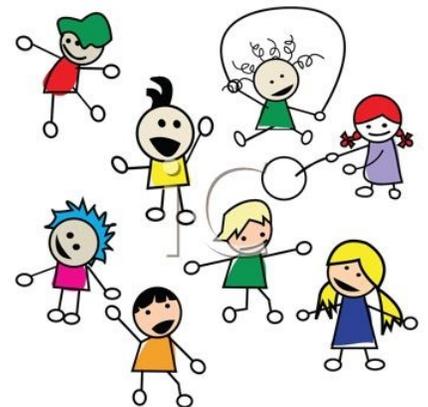
Certified occupational and physical therapists provide sensory integration therapy. They begin with an individual evaluation to determine a person's sensitivities. From this information, the therapist plans an individualized program that matches sensory stimulation with physical movement to improve how the brain processes and organizes incoming information. As such, the therapy often includes equipment such as swings, trampolines and slides.

Sensory integration therapy can allow a child or adult with sensory integration difficulties to become more "available" for learning and social interactions. Family members and teachers often find that its techniques can help calm an affected child or adult, reinforce positive behavior and help with transitions between activities.

Physical Therapy

Many children and adults with autism have challenges with motor skills such as sitting, walking, running and jumping. Physical therapy (PT) focuses on problems with movement that cause real-life limitations. In particular, physical therapy can improve poor muscle tone, balance and coordination.

Certified physical therapists deliver physical therapy beginning with an evaluation of a person's physical abilities and developmental level. They then design programs of activities that target areas of challenge. Typically therapy sessions run a half hour to an hour and include assisted movement, various forms of exercise and the use of orthopedic equipment. The needs of the child or adult receiving services should determine the frequency of these sessions.



<https://www.autismspeaks.org/what-autism/treatment/what-treatments-are-available-speech-language-and-motor-impairments>

LBL ESD CASCADE REGIONAL AUTISM RESOURCES

We would like to invite you to check out the amazing resources we have available to support individuals with autism at

<https://www.lblesd.k12.or.us/cascade-regional-program/autism-program/>.

This section of our web site is a collection of links to other websites for parents and teachers for informational purposes only. LBL is not responsible for the content of any other websites or pages linked to or from the third party web sites.

- [Teacher & Parent Resources](#)
- [Professional Development](#)
- [Local Resources & Services](#)
- [Autism Agenda Newsletter](#)

BASIC STRATEGIES FOR BETTER COMMUNICATION

Although the effects of [autism](#) and [Asperger's syndrome](#) on a child's communication vary greatly, there are basic communication strategies parents can use to help their child.

Keep language simple, specific and concrete

We are usually unaware of the complexity of the language we use. While children can normally make enough sense out of complex sentences, a child with autism may have little understanding of "Come on, Tom. We don't live in a tent! You have to always close doors behind you, okay?" Tom would have a much better chance of understanding "Tom, shut the door".

While this style of communication appears to lack politeness, your child will have a greater chance of understanding and your respect can be indicated by your body language and tone of voice.

Language also needs to be specific. "Tom, you shouldn't be so rude to people" will be harder to understand than "Tom, don't tell people they are fat". Another common problem is giving instructions in the form of questions. "When are you going to tidy up your room?" can be very ambiguous compared to "Clean up your room" although the former may sound more polite.

Concrete language refers to making the meaning of a sentence very plain - the words simply mean what they say. Much of our language involves sub-meanings such as sarcasm, irony or reading between the lines and children with autism or Asperger's consistently have trouble with anything other than a literal meaning of the words spoken. Examples of difficult phrases to understand would be:

- Great work, I'm sure that girl really enjoyed you pushing her into the mud!"
- "I wonder if people might think it's unusual if you wear just your underpants in public".

Allow time for your child to respond

It may appear as though a child has not understood a question or statement, but often it just takes time to process the incoming information, up to 45 seconds in some cases. It can be frustrating and feel very abnormal, but giving your child time to respond will help them learn communication skills faster.

Repeating the question every few seconds to force a response, or constant talking, can lead to [challenging behaviors](#) as the child becomes frustrated by being overwhelmed with verbal information.

Establish eye contact

A common feature of autism and Asperger's is a lack of [eye contact](#). It is important to encourage proper eye contact. Other people are more likely to interact with your child, and it is the first step to your child learning to read the facial expressions of others or follow your line of sight if you are indicating an object by looking at it.

This may involve a simple statement: "Tom, look at me", or it may also involve stepping into the child's line of vision or a gesture with the hands to indicate the child should be looking at you during conversation. An important point here is to be at your child's level. While it is often tempting to stand when talking to your child, getting down to their level increases the chance of eye contact and bonding.



Think, think, think.



Continued on page 8.

COMMUNICATION STRATEGIES CONTINUED...

Use your child s interests to build motivation

Autism and Asperger s syndrome often result in a restricted range of interests, whether it be telephones, leaves or running water. Although a parent will not want to encourage an obsessive interest, these do provide a basis for building communication skills. Ask questions and encourage your child to talk about the things they like. As communication skills develop, you can encourage your child to talk about other things and widen their range of interests.

Avoid negative words that act as triggers

Words such as not now , no and stop can act as triggers for challenging behavior in autistic children. When this happens, it is necessary to find positive statements that redirect the child s behavior. An example is a child who is playing with her toys instead of getting ready for school. Instead of saying No, Sarah. Stop playing with your toys , a redirection focuses on Let s put your clothes on for school .

While redirection sounds very easy, it can be very difficult to focus on a positive statement when getting frustrated with your child s lack of attention or inappropriate behavior.

Break instructions or long sentences into steps

A key to helping a child learn complex skills is to break them into understandable pieces. The same principle works with communication. Take the following sentence:

"Today we ll have a swim at the beach after seeing grandad for morning tea and getting some fruit at the supermarket".

A children with Asperger s syndrome or autism will have trouble understanding this mass of information, and in what order it will happen. This would be better explained in order, one-by-one, and giving the child time to digest the information in each case . Techniques such as social stories or visual cues (photos or story boards) can also be a great help.

IPAD APPS

CoughDrop AAC has everything users, parents and therapists could ask for with several pricing options and free trial. (LBLESD suggested, not required or endorsed)

My son has autism and for his first five or six years he had limited speech language so we worked with several AAC apps trying to find the one that he wanted to work with. After finding a good match, we did a summer of intense AAC training and by the time school started again, thanks to AAC, he had gained enough speech language to only need the support occasionally. Today, at age nine, he can express himself in full sentences. AAC use should be available to all families who feel the need for it and when I come across an AAC program that is customizable, with many features and has not only affordable choices for payment but a wonderful two-month free trial, I'm in the fan club.



As I mentioned above, CoughDrop AAC has a lot of customizable features. Users can create boards from scratch or use publicly available boards and edit the content. Several boards can be used and made available at the side of the screen and choices on each board can be edited to hide some choices until the user is ready for them. Not only are there so many choices for boards, including a QWERTY keyboard with word prediction, but there are many voice options, including a premium list available to subscribers, and language options available when creating boards. Voice output can be tweaked for personal preference as well as long as the voice is editable in the way.

In addition to all of the custom features, CoughDrop is available across multiple devices with the use of a username and password. After a two-month free trial, users can subscribe for \$6 a month or a \$200 one-time purchase. I love the options of trying, then subscribing and the free trial plus \$6 a month would have been perfect for my son and I as we shopped around spending a good chunk of money searching for the right fit. A Therapist/Parent/Supporter option is available for free to folks supporting a communicator and a license can be gifted to there support people for \$50.

The app and website are cleanly designed and easy to navigate. I encountered no issues with syncing boards between devices or tweaking layouts. The software can be set to always open directly to speak mode, which is the chosen home board or users can visit the main page where reports on word usage, messages and even quick assessments can be logged. To put it plainly, this app has what you're looking for at a good price-point for this technology. Highly recommended.

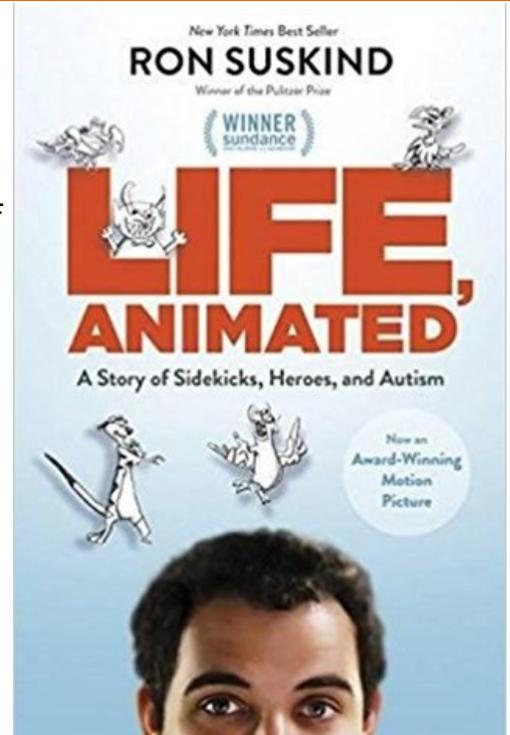
Review by <http://www.smartappsforspecialneeds.com/2016/11/review-coughdrop-aac-has-everything.html>

BOOK REVIEWS

Life Animated: A Story of Sidekicks, Heroes and Autism

by Ron Suskind

Imagine being trapped inside a Disney movie and having to learn about life mostly from animated characters dancing across a screen of color. A fantasy? A nightmare? This is the real-life story of Owen Suskind, the son of the Pulitzer Prize-winning journalist Ron Suskind and his wife, Cornelia. An autistic boy who couldn't speak for years, Owen memorized dozens of Disney movies, turned them into a language to express love, loss, kinship, and brotherhood. The family was forced to become animated characters, communicating with him in Disney dialogue and song, revealing how we all literally need stories to survive. This story was also made into an award-winning documentary available on DVD and Amazon streaming video.

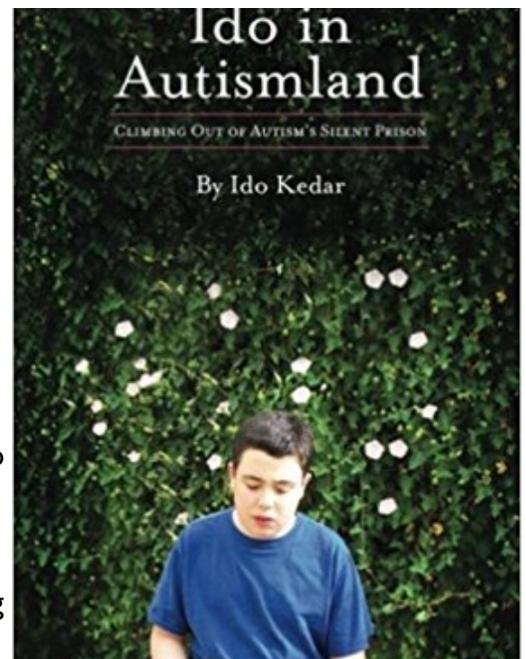


Ido in Autismland

by Ido Kedar

Ido in Autismland opens a window into non-verbal autism through dozens of short, autobiographical essays each offering new insights into autism symptoms, effective and ineffective treatments and the inner emotional life of a severely autistic boy. In his pithy essays, author Ido Kedar, a brilliant sixteen year old with autism, challenges what he believes are misconceptions in many theories that dominate autism treatment today while he simultaneously chronicles his personal growth in his struggles to overcome his limitations. Ido spent the first half of his life locked internally, in silence, trapped in a remedial educational system that presumed he lacked the most basic comprehension, and unable to show the world that he understood everything. But at the age of seven, Ido was finally able to show that he had an intact mind and could understand. This led to the quest to find a system of communication that he could use despite his impaired motor control. Through the use of a letter board, and now an iPad, Ido has triumphed communicatively, enabling him to flourish in a regular high school in all general education classes.

But Ido has a larger goal. He does not want to be seen as an isolated autistic exception with miraculously advanced cognitive and communication abilities. He wants people to see that thousands of other severely autistic individuals have the same capacity, but remain trapped and locked-in, as he was, unable to show their true capacities. These individuals desperately need new theories and new methods to help them break free too. Of importance to neuro-researchers, educators, psychologists, doctors, parents, friends, family and people with autism, *Ido in Autismland* will change our collective understanding of severe autism.





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VISUALS

<p>Let's play</p>	<p>Pick a game</p>	<p>Can I play?</p>	<p>Let's play again</p>	
<p>What color piece?</p>	<p>roll dice</p>	<p>draw card</p>	<p>spin</p>	<p>Move your piece</p>
<p>My turn!</p>	<p>Your turn!</p>	<p>clean up</p>	<p>more</p>	<p>all done</p>