

APRIL IS AUTISM ACCEPTANCE MONTH

Autism, Emergencies, and First Responders

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WEBINAR OBJECTIVES

Autism Spectrum Disorder in First Responder Situations

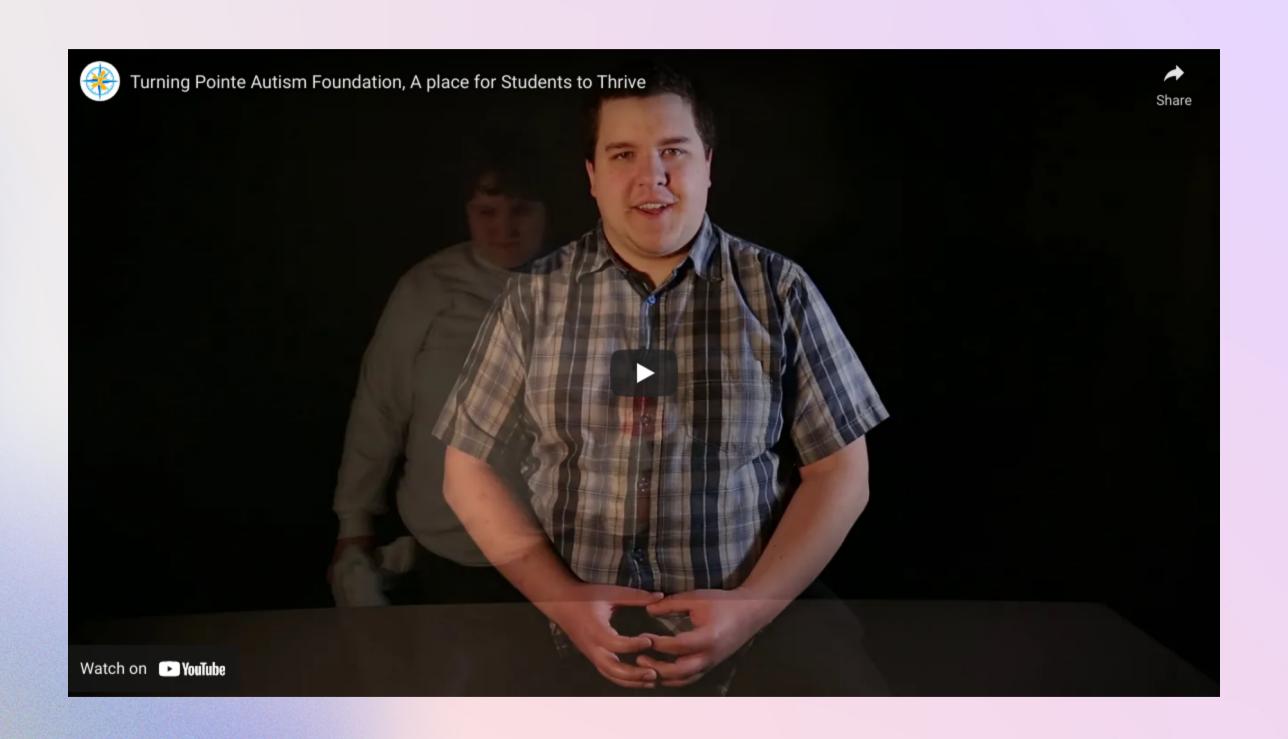
Teach first responder attendees about ASD

Help recognize someone that might be on the autism spectrum

Discuss how to interact and best manage risk in highstress situations with someone on the autsim spectrum





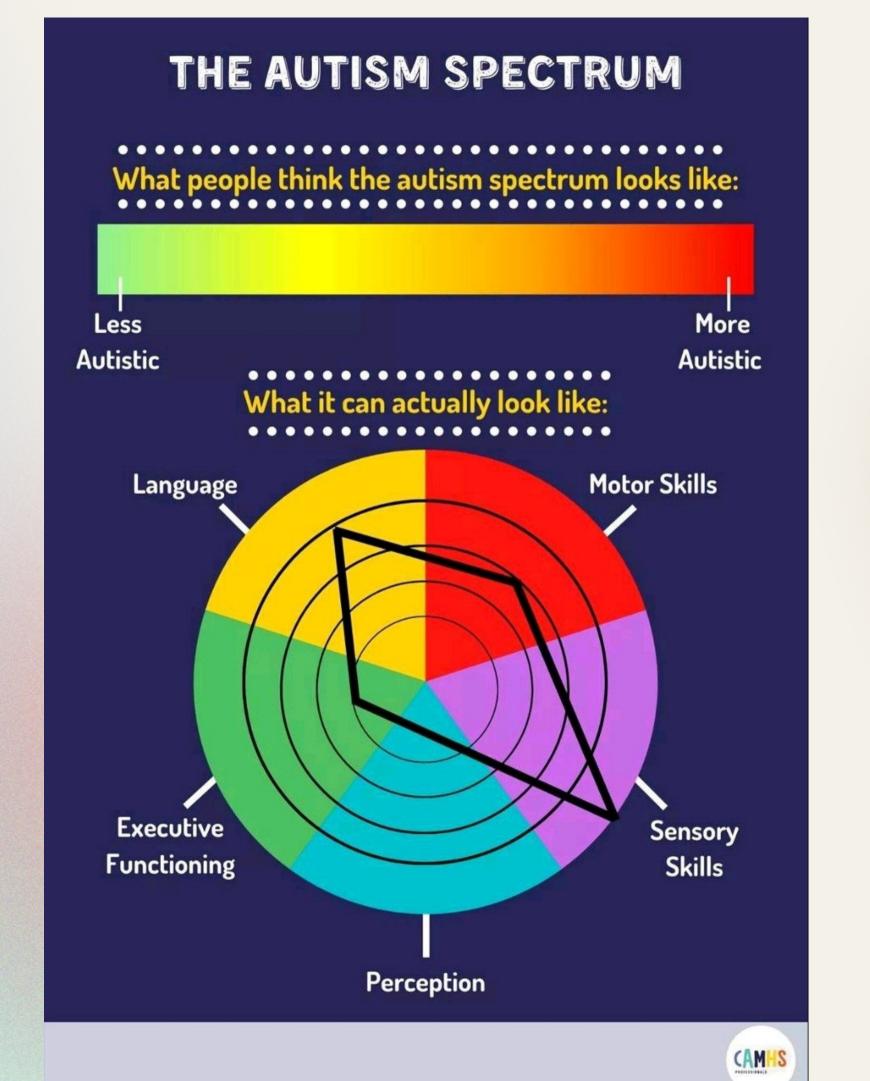


WHAT IS AUTISM?

The American Speech Language and Hearing Association provides the following definition: "Autism Spectrum Disorder (ASD) is a neurodevelopmental disorder characterized by deficits in social communication, social interaction and the presence of restricted, repetitive behaviors."

These characteristics are varied for every individual!

"Once you've met one individual with autism, you've met one individual with autism."



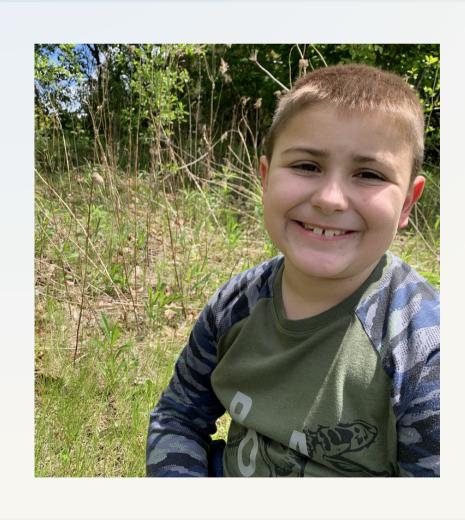
AUTISMFACTS

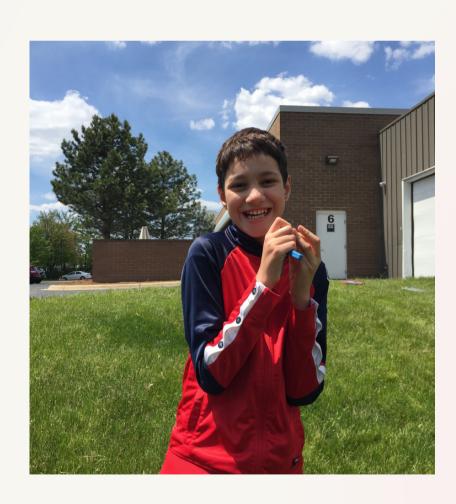


- It is now estimated the 1 in every 44 children in the United States has ASD
- A diagnosis of ASD now includes several conditions that were previously diagnosed separately:
 - Autistic Disorder
 - Pervasive Developmental Disorder not otherwise specified (PDD-NOS),
 - Aspergers Syndrome
- ASD is reported to occur in all racial, ethnic, and socioeconomic groups
- Comorbidities often exist with ASD intellectual disabilities, epilepsy, GI disorders, OCD, anxiety, etc
 - About 3 in 10 individuals with ASD develop epilepsy

HOW TO RECOGNIZE ASD

Autism is an invisible disability, which means that you may not be able to recognize it right away just by looking at someone. Sometimes it takes observing and interacting with the individual to see characteristics of ASD







COMMUNICATION



- ASD affects communication in many ways
 - Expressive Skills: how someone communicates
 - Receptive Skills: how someone understands
 - Pragmatics: how someone uses communication in a social setting
 - Social cues and idioms can be a challenge for those with ASD
- Individuals with ASD may be verbal, non-verbal, or have limited verbal skills

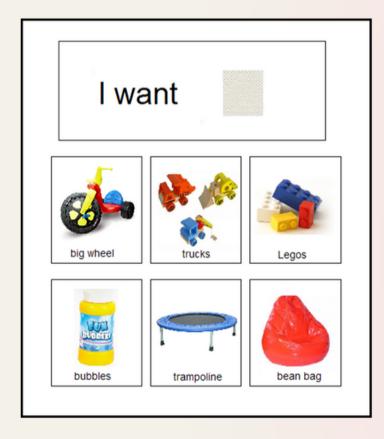
Just because someone is non-verbal **does not** mean they cannot communicate!

COMMUNICATION



- Echolalia: repeating words or phrases directly after hearing them
- Scripting: repeating words or phrases previously heard from people, TV show, video, etc
 - Can be functional or appear to have no functional purpose
- Individuals with ASD may have a communication device to help them communicate









THINGS TO CONSIDER:



- If safe, always allow an individual access to their communication device
- Allow for increased processing time –
 wait 10 seconds after asking a question
 or making a request before repeating it
 again
- Emergency situations are scary for everyone and can be even more so for someone on the spectrum. Even if an individual is verbal, they may be too overstimulated to respond

BEHAVIOR

- Repetitive Behavior: Individuals with ASD can engage in ritualistic behavior and want to do things over and over again or do something the same way every time
- Stimming: A form of repetitive behavior that is providing the individual with sensory input through self-stimulation
 - Hand flapping, rocking, spinning, vocalizations
- Restricted Interests: Strong or intense interests in specific topics or things



BEHAVIOR



- Maladaptive Behavior: Behavior seen when someone does not appropriately adjust to the environment or situation
 - Aggression
 - Self-injury
 - Dropping to the ground
- **Eloping:** Many individuals with autism have a tendency to run or wander away from safe environments
 - Substantially higher risk of drowning

BEHAVIOR SUPPORTS

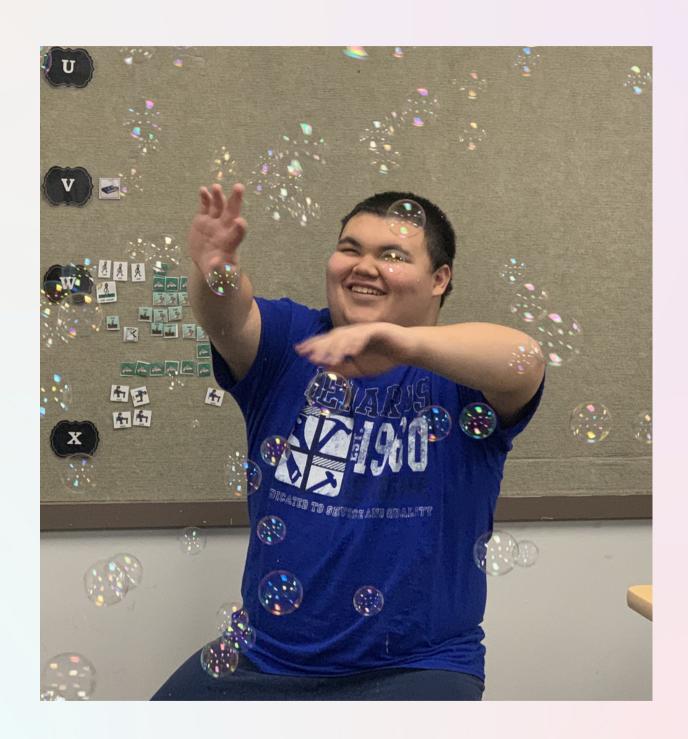
- Timers
- Schedules
- Increase Time
- Choice Boards
- Sensory Breaks
- Reinforcers
 - First, Then











THINGS TO CONSIDER:



- A person with ASD exhibiting aggressive behavior is not the same as an aggressive neurotypical person
- Changes in routine (like an emergency)
 can be very difficult for someone with
 ASD which can result in an increase in
 maladaptive behavior
- Someone with ASD may not easily accept help from a first responder and may even elope

SENSORY NEEDS

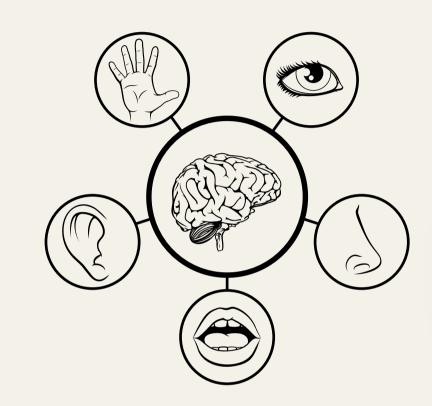


• Hypersensitive:

- Easily over stimulated
- Needs less stimuli
- Sensory avoidant

Hyposensitive

- Under stimulated
- Needs more stimuli
- Sensory seeking





It's important to know that this looks different for each person!

SENSE	SENSORY AVOIDANT	SENSORY SEEKING
Auditory	Sounds like sirens, alarms, medical equipment, and yelling may be difficult to tolerate	Likes loud noises, may even yell or make loud vocalizations as a form of stimming
Olfactory	Smells like smoke, medicine, cleaning supplies, etc can be very overwhelming	Likes bold and powerful smells and may seek them out
Tactile	Sensitive to touch and texture - may not want to be touched or have things like blankets on them	Likes to touch and feel different things, likes pressure, may have high pain tolerance
Visual	Sensitive to bright lights - emergency vehicle lights can be very overhwhelming	Likes bright, spinning, flashing lights - may be drawn to emergency vehicle lights









THINGS TO CONSIDER:

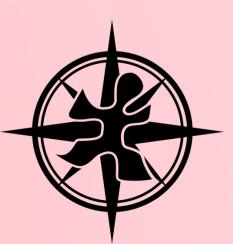


- Someone with ASD may be wearing headphones to help minimize auditory sensory input
- First responder situations may have a lot of sensory stimuli, which can cause extra stress for someone with ASD
- A person with ASD exhibiting challenging behaviors may be experiencing a sensory overload

IMPORTANT INFORMATION FOR BEST OUTCOMES:

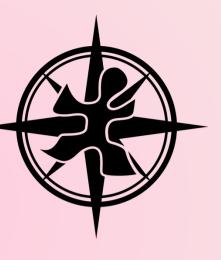
Calm The Senses

- 1. Communication how do they communicate?
- 2. Triggers what are common triggers?
- 3. Soothing what calming techniques help soothe?





PERSON OR IDENTITY FIRST?



- As professionals, we are often trained to always address people with person first language
- There are individuals in the ASD community who prefer identity first
- Always go with their preference!



QUESTIONS?



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