

## Visits to a Doctor or Dentist Office

- Ask other families who have children with autism spectrum disorder (ASD) about the dentists and doctors they
  prefer. Every child is different, but it is helpful to find reputable healthcare providers who have experience
  treating children with ASD.
- Ask the healthcare provider if you can schedule a practice visit in order to meet and get to know the office staff and healthcare provider. Discuss the child's method of communication, interests, challenges, and things that calm and motivate him or her. Because many people with autism have various levels of sensitivity to sound, touch, light, and other sensations, it may be helpful for the child to become familiar with equipment that may be used, before the appointment occurs.
- Patience and time are especially important to successful medical appointments for people with ASD. Request an
  appointment time at the end of the day so that it will not feel rushed and healthcare staff can focus on the needs
  of the child.
- When going to the appointment, let the child bring his or her favorite toy or video game. This will help him or her feel more comfortable and occupied during the wait and office procedures. Ask the provider to interact with the child before the examination and to permit the child to sit on the floor or on a parent's lap to play with their toy or game rather than sit on an exam table.
- Visual aids can help to familiarize various medical and dental procedures. Social stories and activity schedules can be used to describe and illustrate methods and equipment. It may also be helpful to role play with the child to practice various medical and dental examinations such as using a stethoscope, getting an X-ray, and opening the mouth while sitting in a chair. A template to create social stories, as well as other helpful resources, can be found at www.childrens-specialized.org/KohlsAutismAwareness.
- Ask the healthcare provider to explain a procedure before it happens and to specify each step as it happens. This may help the person with ASD make sense of what is being done.
- When emergency care is needed, it is important to tell the emergency healthcare providers about the child's overall health status, challenges, changes in behavior, and any related diagnoses or "co-morbidities." These may include anxiety, seizure disorders, gastrointestinal disorders, Attention Deficit/Hyperactivity Disorder, and sleep or feeding issues. This information can help prevent misinterpretation of symptoms or suggest additional testing. In addition, let them know if there are any specific triggers that may cause challenging behaviors to occur.
- It may be helpful for school staff to target lessons that prepare the child for healthcare appointments. For example, a procedure can be broken down into small steps by school-based therapists and staff and practiced with family members at home.
- When injections or blood draws are needed, it is common to request additional staff for the procedure. Locate a phlebotomist who is familiar with working with people with ASD and discuss preferred reinforcers and challenges related to the child to help make the procedure successful.
- It may be helpful to work with a behavior therapist to assist in pre-teaching skills related to doctor and dentist visits and procedures. Sometimes arrangements can be made for a therapist to accompany the family to assist in these appointments.









Children with autism spectrum disorder (ASD) often have difficulty with feeding as it relates to rigid behaviors, particularly the inability to change routines and foods. They may exhibit sensory challenges or have gastrointestinal issues, as well.

- In order to help the child ASD be able to sit at a table and participate in mealtime activities, parents and caregivers should develop a consistent mealtime schedule. When children eat little bits "on the go" throughout the day, they are often not hungry at mealtime. Parents should provide structured meals/snacks every one-and-a-half to two hours, offering only water between meals and snacks. This helps to establish a hunger cycle, and increases the likelihood that the child will be more interested in exploring and trying new foods.
- Many times children with ASD want to eat the same foods, in the same way, all the time. To make sure children eat a varied diet, families are encouraged to present foods not in the original containers in bowls or plates so that the child doesn't get used to seeing specific packaging. Use different cups, plates, and utensils so that the child becomes less rigid and more likely to use a variety.
- Present foods even if the child is unlikely to eat it. It may take up to twenty presentations of a new food before a child will accept it. It is encouraged for children with ASD who have difficulties trying new foods to play with various foods. This type of engagement helps to explore the sensory properties of foods the look, taste, touch, and smell. Touching food is often less challenging that eating it. Place foods on fingers and hands in fun ways, then gradually progress toward the face and mouth. Include other families in these play experiences to reassure the child that eating is pleasurable.
- Sometimes children can have sensory responses to food, such as gagging or vomiting. Try not to over-react to those vomiting behaviors as sometimes it is purposeful as a method to avoid eating. If the food is withdrawn when the child vomits, the child will learn that he or she can get out of the feeding activity and demands by exhibiting that behavior. Gagging is typical for all children as it is a protective way to make sure what is swallowed is safe. Positively reinforce anything that the child does to try a new food. Try to ignore negative behaviors that may be exhibited.
- Parents can seek out comprehensive evaluations for their child who has feeding difficulties. Many hospitals and other healthcare providers have feeding teams who can assess various issues related to feeding problems. These evaluations may include a physician, occupational therapist, speech therapist, nutritionist, and/or mental health professional, in order to assess the whole child and determine if there are medical, sensory, behavioral, nutritional issues affecting the child.
- If the child exhibits frequent episodes of constipation or diarrhea, or you suspect reflux or food allergies, discuss with the child's pediatrician or a pediatric gastrointestinal specialist who is familiar with children with special needs.











## **Toileting Skills**

- Toileting independently is an important skill that affects quality of life and social acceptance. Not being toilet trained can create social barriers and prevent participation in recreation programs and impact employment opportunities. Work with teachers and therapists to develop toileting skills.
- Teaching this skill can be easier if a person shows readiness signs for toileting. Readiness signs include staying dry for an hour at a time, following one step commands, and understanding cause and effect. Looking uncomfortable when wet or soiled may not be a readiness sign for people with ASD due to reduced body cue sensations.
- Commit to toilet training. It can be challenging, but it is worth it.
- When committing to toilet training, it is important that the person wear underwear instead of diapers or pull-ups. The person needs to begin to recognize the sensation of feeling wet or soiled. Disposable garments prevent a person from that sensation.
- One method is to have the person practice sitting on the toilet for two minutes at a time, with five minute intervals between practice sessions. Choose a time when the person is most likely to need to have to "pee" or "poo." During these times, provide cues for actions required for toileting.
- Find a reward that is highly motivating for the person and only associated with toilet training. Let this reinforcer be visible in the bathroom, but not accessible indicating that it will be given as a reward for successful toileting.
- If the person wets or soils himself or herself, have him or her participate in the changing and cleaning processes as much as possible. Be calm and remind the person that the "pee" and "poo" go in the toilet. Have the person assist in undressing, cleaning, and washing hands.
- Once signs of success have been observed, work on ways to encourage the person to self-initiate the toileting skills.
- Visual schedules and charts can be helpful for many people with ASD. A sample schedule is available at www.childrens-specialized.org/KohlsAutismAwareness. Having this type of schedule laminated in the bathroom can serve as a guide during the toilet training process.
- A helpful teaching tool is to model appropriate toileting skills. A trusted family member could bring the person into the bathroom to demonstrate the steps of toileting. If this is not comfortable, there are toilet training videos available to use as visual models.
- It is important to be consistent when teaching toilet training skills. Communicate among all the people involved in the life of the person with ASD, including teachers, therapists, relatives, friends, and other caregivers. It is helpful to have a written plan about how the person currently performs the skills, how often he or she goes to the bathroom, what terminology is used, what rewards are given, and how to handle toilet training accidents.









- Personal hygiene is essential for everyone as it affects health, socialization, and employment. When teaching
  personal hygiene skills to a person with autism spectrum disorder (ASD), it is helpful to know what age-appropriate
  skills are expected.
- For individuals with ASD, learning hygiene skills can take time to learn and practice. There may be sensory difficulties and anxiety related to completing hygiene tasks. It may be difficult for the person to remember the steps to complete the task. In the beginning, the parent or caregiver, may need to help with some hygiene tasks such as brushing teeth with hand-over-hand assistance. As a skill develops, prompts and support can be faded to promote independence.
- As the person first learns these new skills, it can be helpful to provide meaningful reinforcers to encourage good hygiene practices and motivate continued learning. It can also be helpful to play familiar music in the background that is enjoyable to the person during hygiene activities.
- Visual aids can help the learning process by illustrating and describing methods. These tools can include social stories, activity schedules, charts, and videos. A template to create social stories, as well as other helpful tools, can be found at www.childrens-specialized.org/KohlsAutismAwareness.
- To help make personal hygiene comfortable and to motivate, allow the person to choose personal care items of his or her preference. For instance, he or she can select soaps, toothbrushes, toothpastes, and towels, deodorant which are most tolerable and pleasant and relieve potential sensory issues.
- For individuals who may not be able to practice independent personal care, it is important to provide the choice as to who helps with hygiene and where that occurs. Everyone has a right to privacy, including people who may not be able to care for themselves. Make sure personal hygiene takes place behind bathroom or bedroom doors, maintaining the respect and privacy of the person involved.
- Sometimes it's helpful to pair a song or rhyme with a personal hygiene activity. This can make it easier to recall the steps, keep pace, complete the task, and make it more enjoyable. Timers can also be used to ensure that sufficient time is spent on a hygiene activity. Another helpful tip is to use two baskets or bins. One bin can contain items such as the soap, toothbrush, toothpaste, deodorant, and brush. As each task has been completed, the person can place the item into the "finished" basket on the other side. This method can cue which activities need to be done and which have been completed.
- It is important to help a person with ASD understand puberty as best they can, before it happens, so that he or she knows what to expect as his or her body changes. Puberty changes can be frightening for the child as well as the family. If parents are uncomfortable discussing such topics as penis growth, breast changes, menstruation, and masturbation, they should find someone they can trust to have this conversation. Having important knowledge about their bodies can help decrease fears and anxiety. There are also excellent books and videos available on these topics. Choose those that would be appropriate for the cognitive and maturity level of the child.
- Many personal hygiene skills can be built into a child's IEP. These lessons could be conducted in the classroom or in occupational or speech therapy sessions. Partner with the school to learn their methods of teaching and reinforce these skills at home and in other places the child practices personal care.









## Recreation, Leisure, and Play Activities

- Children with autism spectrum disorder (ASD) tend to have fewer recreation and leisure interests than others. In order to help identify preferred play activities, parents, teachers, and therapists can help children explore a variety of activities. Offer choices rather than forcing a child to engage in one activity. Recreation and leisure is about finding an activity that a person enjoys.
- When teaching a recreation skill, it is helpful to break down larger skills into smaller parts so that the child can master them. As smaller skills are mastered, self confidence will grow and the child may be more likely to participate with their peers.
- Music and art activities are great forms of self expression. These activities can be done alone or with peers.
- The park is a great place for a family to recreate, enjoying nature. Visit a local nature center outdoor recreational area to have a supervised scavenger hunt. Partner with the child to search for items with different textures as well as different nature sounds.
- Visit www.childrens-specialized.org/KohlsAutismAwareness to get helpful tips for successful inclusion, ideas for recreation accommodations, tips for adapting recreation programs, as well as other educational resources for recreation and leisure for children with ASD.
- Many families hesitate to let recreation providers know that their child has ASD and his or her specific recreation needs because they don't want to be turned away. It is beneficial to communicate openly with the provider during registration in order to prepare, support, and include the child. The information provided is confidential and can only be shared with those directly involved in supporting the child's recreation programming.
- Parents can arrange for their children to participate in specialized recreation programs. These are excellent ways for children to learn play and social skills and become comfortable in different recreation environments. As a child masters these skills, families and recreation providers can work together to broaden the child's exposure to general recreation and leisure activities.
- The Americans with Disabilities Act (ADA) supports the rights of all individuals, including those with ASD, to participate in recreation programs. The ADA protects the right to receive a needs assessment, participate in integrated recreation programs, receive reasonable accommodations, and use adaptive equipment. When registering a child for a recreation program, in most instances, the recreation provider cannot charge additional fees for reasonable accommodations or for participating in the most integrated setting.









- There are so many toys and games available for play. For children with autism spectrum disorder (ASD), it is always important to consider safety first. Many children with ASD may put toys in their mouths, throw, bang, or break them. Consider all physical aspects of the toys before letting a child play with them.
- Look for toys that appeal to the child's senses. Sensory fun can include play with water, beans, rice, clay, sand, or bubbles. There are also books and puzzles with various textures. Initially, touching these items can be uncomfortable for children with ASD. But soon, children can become accustomed to touch and feel of these items and begin to have fun.
- When buying or using commercial toys and games, consider the developmental age of the child, not the actual age range indicated on the package. Less complicated toys may be appropriate for lower functioning children, while toys that provide opportunities for building, discovery, creativity, and social interaction may be enjoyed by higher functioning boys and girls.
- When engaging in play with a children with ASD, it can be helpful to have only a few toys in sight. Too many toys can be overwhelming and distracting for a positive play experience.
- Toys can be a great way to build social skills. Boards games, interactive video games, card games, and sports activities are great ways to engage social interaction. Game rules may need to be simplified in order for the children to enjoy interacting with each other instead of thinking about complex instructions. It may take several times to practice before a child with ASD enjoys a game or activity.
- Some children with ASD prefer physical play while others are more comfortable with less active leisure activities. It is beneficial for the child to be exposed to both types of activities so that he or she has opportunities to experience a full range of play activities.
- Toys can be played with in different ways than initially intended. A child with ASD may enjoy playing with a toy in a different way or play a game with rules of his or her own. Toys, games, and activities can be fun for all, without following official instructions, provided the play is safe.
- Teachers, therapists, and other parents can provide suggestions based on their play experiences with children with ASD. Ask for recommendations based on a child's individual interests and challenges.









- Play dates are opportunities for children with autism spectrum disorder (ASD) to practice social, play, and communication skills in a natural environment. During these experiences, parents can observe their child's strengths and challenges in such skills as sharing and taking turns.
- It can be difficult for children with ASD to understand how to behave in these types of social gatherings. They may not have social skills that are common among their peers. It may be helpful to have a play date with one other child, in order to help prompt and reinforce appropriate interactions.
- When selecting a friend or friends for the play date, it is important for parents to choose children who exhibit behaviors that they would like to have imitated. It is also helpful to select children who have some similar interests with their child, such as video games, puzzles, or dancing to music.
- Initially, play dates should be short. Perhaps a child can only tolerate five or ten minutes. Each time a play date occurs, the child will become more familiar and comfortable with the environment and the friend. Parents may have a sense of how long the child can tolerate a situation. If he or she gets upset after fifteen minutes of play, use that as the measure when coordinating the play date so that a meltdown can be prevented before it starts.
- Initially, supervised and structured activities such as baking cookies or a prearranged art project may work best. Setting up a few organized play stations around the room can help the child recognize the activities before play begins and transition better from one activity to another.
- For the play date, try not to pick toys that the child fixates on, in order to prevent the child from getting upset when a playmate has his or her turn with the toy. Keep these highly preferred toys hidden and out of reach. Include toys, games, and activities that the child is familiar with and is somewhat comfortable sharing.
- Social stories are excellent ways to familiarize children with ASD with the environment and expectations. Photographs of the play area, toys, games, and people can be reviewed before the play date. Include alternative toys and activities within social stories so that the child can be prepared for changes due to such things as bad weather, broken toys, and other unforeseen changes or occurrences. These social stories can describe methods of play, rules, and what behaviors are appropriate during the play date. A blank template for creating social stories is available at www.childrens-specialized.org/KohlsAutismAwareness in order to create them as needed.
- Parents and teachers can role play different types of play interactions. Practicing appropriate behaviors prior to the play date will help the child be more comfortable when he or she is among friends.
- At the beginning, play dates may need to be at home or in an environment that is familiar and comfortable for the child. As he or she becomes more comfortable, play dates can take place in locations of interest such as the park or a zoo. This may take more preparation and support to handle the responsibilities and potential challenges of unexpected meltdowns or wandering.
- Before the play date, parents and teachers can work with the child to establish a body gesture or words as a signal when a situation may be overwhelming or if a break is needed. Over time, the child can learn self-help and self-calming skills to use as needed. The parent or caregiver can also have a signal which can be used when the child is behaving inappropriately to help remind the child of the skills they practiced.
- It is important to reinforce appropriate behavior as it happens during the play date. Reinforcers could be treats, words, or small tokens of acknowledgment for good behavior.

- Sometimes game rules or play activities need to be changed so that they are more understandable and achievable by the child with autism. Let the playmates know that it is alright to find new ways to play so that everyone has fun.
- When the play date is over, talk with the child about what happened. Let him or her express what went well and any challenges. Emphasize his or her appropriate behaviors and the positive things that happened. Develop tools such as social stories, activity schedules, or rule sheets to help in the areas where support is needed.









- Traveling to places which are unfamiliar or out of the ordinary routine can be difficult for children with autism spectrum disorder (ASD). Try to select trips and vacation destinations that would be most tolerable for the child. Keep in mind the length of the trip, seasonal weather, crowds, and available activities. Arrange vacation plans during times that there may be less traffic and less crowds. This may help to reduce many challenges and provide for more availability of staff to help at the location.
- Many websites provide background information about the destination. If not, call to speak to a supervisor about accommodations, the location of customer service at the location, bathrooms, and exits. Other questions can include the least crowded times; the intensity of volume, sound, and lights; and a schedule of activities or events. It can be helpful to use travel agencies that are familiar with travelers having special needs.
- Before the trip, review pictures, videos, and maps together. This can help familiarize the child with the destination, see different options, and build excitement.
- Role play different situations to practice things like waiting in lines, going through security at an airport, remaining in the vehicle, and wearing safety belts. Videos, social stories, and other visual aids help to prepare for the trip, understand appropriate behavior, and can help to reduce anxiety.
- When going on a trip, bring along favorite snacks, toys, and other items that can help make him or her feel more comfortable. Video games and other electronic devices with headphones can help distract from increased sensory challenges and help ease lengthy trips. Save a couple of highly preferred items in case something unexpected happens along the way.
- It is important to have the child carry identification when traveling. The identification should also include the child's method of communication and any challenges that are important to know in case he or she gets separated from parents or caregivers.
- Bad weather, broken rides, closed areas, detours, and other obstacles may change or cancel intended plans. When talking about schedules, routes and activities, use expressions such as "we might visit," "if it's available," and "we'll try to." Let the child know there many be an alternative in case something may not go as planned.
- During the vacation, transitioning from one activity or location to another may be difficult for someone with ASD.
   Use toys, snacks, or other enjoyable items to help with these changes. Visual aids, activity schedules, or timers may also help ease the transitions.
- It is helpful to reveal the child's challenges to people who can be helpful to the child and those with him or her. Airport representatives, flight attendants, hotel staff, customer service representatives, and others in the travel and hospitality industry rely on parents and caregivers for ways to help make the experience enjoyable and comfortable for everyone involved. Honest communication may result in such things as alternate access, private waiting areas, or extra time allowances.
- Other travelers may have their own perceptions of the child's behaviors. If someone shows or expresses difficulty
  with the child's behaviors, honestly communicating what's going on. Most times people are sensitive and will be
  more accommodating once they understand the situation.
- Many hotel rooms have suites where families can prepare meals in the room or call for room service. This might be a helpful option if a difficulty occurs at a public eating area.

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- When traveling by airplane, call the Transportation Security Commission (TSA Cares) toll free at 1-855-787-2227 72 hours prior to traveling with questions about screening policies, procedures and what to expect at the security checkpoint. TSA Cares serves as an additional, dedicated resource specifically for passengers with disabilities, medical conditions or other circumstances or their loved ones who want to prepare for the screening process prior to flying. Public transportation providers cannot refuse to transport an person solely because involuntary behavior offends, annoys, or inconveniences employees or other passengers unless the behaviors are unsafe or injurious. The e-mail address for TSA Cares is TSA-ContactCenter@dhs.gov





