

2020 MICHIGAN SHINES FOR AUTISM VIRTUAL GALA

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Participate In Our Virtual Gala

This year, the **Michigan Shines for Autism Gala** has gone virtual!

What does that mean?

First, it means anyone can participate this year with tickets starting as low as \$25. The virtual gala will feature Your Generation In Concert performing live in studio along with dignitaries, community leaders and more coming together to announce an incredible, moonshot goal for AAOm over the next 10 years.

Other features of the virtual gala include delivered gourmet meals and wine for tickets \$150+ anywhere in the Lower Peninsula and a live & silent auction filled with unique, one-of-a-kind experiences and items.

Don't miss out! Register today at www.aaomgala.org



Medical Considerations: Back to School During the COVID 19 Pandemic

Jill Matson, MSN, RN, CPNP, Clinical Specialist & Navigator Manager, AAoM

With the end of summer approaching, there have been a lot of questions and concerns raised from parents, educators and school administrators about the upcoming school year. One of the most frequently asked questions has been, “Is it safe for students and staff to go back to school?”. The answer to that question will most likely depend on the current status of the spread of COVID 19 in each community and whether or not schools are able to implement measures to minimize the risk of infection and make in-person learning safe.

Coronavirus is primarily spread from person to person by droplet transmission from coughing or sneezing and although no single action or set of actions will completely eliminate the risk of transmission, physical distancing, frequent hand washing, face coverings and disinfecting frequently touched surfaces can all greatly reduce the risk of transmission of coronavirus and should be implemented in the school setting whenever possible.

Keep in mind that for young children or children with special needs, social distancing and face coverings may not be feasible or developmentally appropriate and although some kids may be comfortable wearing a face covering, it may end up causing more harm than good if they are frequently touching their face or the mask.

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For kids who have difficulty wearing a face covering and it's not medically contraindicated, behavioral strategies and social stories can be helpful in getting them to eventually tolerate wearing one.

It's also important to be aware of American Academy of Pediatric guidelines which state that face coverings should not be worn by children under two years of age or by anyone who has trouble breathing, is unconscious, incapacitated or is unable to remove their face covering without assistance.

Does a child with autism have a higher risk of catching Covid 19?

Autism doesn't in and of itself place kids at higher risk for becoming infected with or having severe illness from coronavirus. Rather, it's the cognitive or behavior difficulties frequently seen in children with autism that may impact their ability to understand and participate in protective measures, putting them at greater risk for infection. Some kids with autism may also have a serious underlying medical condition that doesn't necessarily put them at greater risk of getting Covid 19, but may increase their risk of serious illness if they do contract the virus.

How do you manage the health risks of medically fragile students and the staff who work hands-on with these students?

Many of the recommendations from the CDC related to reducing the spread of Covid 19 also apply to medically fragile students, teachers and school staff. These students may need closer supervision and frequent reminders about social distancing and hand washing. Face shields combined with a mask are recommended for teachers and staff if a medically fragile student is unable to wear a face mask. Face shields are also recommended when staff cannot maintain physical distancing. Additional personal protection like gowns and gloves may also be needed by staff when providing personal care for medically fragile students.

For students who have asthma, inhalers are preferred over nebulizer treatments whenever possible because aerosols generated by nebulizer treatments could potentially be infectious, increasing the risk of transmission of the virus.

Through collaborative planning between primary care providers, families and school staff, many students with autism who have medical comorbidities can attend school safely if additional safety precautions and accommodations are implemented. Keep in mind though, that even with safety steps in place, there will still be some students with high-risk medical conditions who will need to continue distance learning.



Tips for Successful Mask Wearing

Kyle Rhein, M.A., BCBA, LBA Owner/Director, Stepping Stones Autism Center

It's August and most of us have lots of questions when thinking about what September will hold. Whether we have children with autism, school aged children or children in daycare, our idea of normal has drastically changed in the last six months and anxiety levels are high. Most public places including schools have made statements that masks are required to enter. Families may be struggling with the thought of how their children will tolerate wearing masks for long periods of time. With the summer months upon us, many families may have been able to avoid mask wearing by avoiding public places or remaining outside for large gatherings. This may all change as September and the beginning of school approach.

Before practicing, make sure to find a mask that fits your child properly. Avoid masks that are too large and slip down from the nose or off the ears. Many companies make masks that are fitted specifically for children.

Start practicing early. When navigating wearing a mask and increasing the amount of time your child tolerates wearing a mask it is important to start practicing prior to the date wearing masks are required. The sooner the better! Practice multiple times a day to allow for lots of learning opportunities.

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Be realistic when choosing a targeted time. Many adults find wearing masks uncomfortable and it takes some getting used to. Don't hold your child to a higher standard than you would hold yourself. When shaping behavior, it is easier to start small and work your way up. This may mean only wearing a mask for 5 seconds before allowing your child to remove it. Once this small amount of time is able to be completed successfully, you can increase the desired time by small increments such as 10-30 seconds. The amount of time tolerated wearing a mask will vary depending on your child. Try placing a mask on your child and time how long he/she tolerates it before taking it off or engaging in problem behavior. Then choose a time slightly shorter than this to begin with.

Choose a reinforcer. When wanting to increase a desired behavior such as mask wearing, it is important to have a predetermined reinforcer to motivate your child to wear the mask in the appropriate way for the desired duration of time. The reinforcer can change in the moment based on the child's preferences, but should be chosen prior to asking the child to put the mask on. Waiting to choose a reinforcer until after problem behavior or refusal occurs should be avoided. An example could be it's time to wear your mask. After you wear your mask for 2 minutes and keep your hands down, you can watch Bubble Guppies, have a cookie, play with Moon Sand, etc. Make sure to withhold the reinforcer until your child wears the mask for the desired time without engaging in problem behavior before making the reinforcer available. This may take a few tries and may be quite a struggle at the beginning.

Use a phrase or directive that allows your child to know that it is time to put a mask on such as "Time to wear your mask." Use the same phrase each time so your child knows what is expected when he/she hears the directive and knows that reinforcement will follow once he/she wears the mask for the desired time.

When practicing mask wearing, choose times/activities that will mirror the natural environment when your child will have to wear the mask, such as walking in from the car, walking in hallways, waiting in a chair in a Doctor's office, etc.

It may be helpful to use pictures, social stories and a timer for children with fewer receptive skills. Check out our example of practicing how to wear a mask appropriately [here](#).

Remember everything gets easier with practice and reinforcement! So start now!



Back to School in the Era of COVID-19: Back to Basics in Education Advocacy

Heather Eckner, M.A.Ed. – Education Consultant, AAoM

The challenges of abrupt school closures in March left many students with disabilities and their families scrambling. With so much uncertainty about the school year ahead, families of kids in special education continue to have many concerns.

Among the many worries parent have, addressing learning loss and meeting kids' special education needs is a top priority. Whether students are fully remote for their learning, going back to face-to-face, or some hybrid option of the two, parents have been sharing that they are stressed about the return to school.

Students with autism often depend on structure and routines in their daily schedules. For families managing adult work responsibilities along with overseeing the education for potentially multiple children, being able to provide the specialized supports and services that would typically be delivered by a team of several school professionals (special education teacher, general education teacher, occupational therapist, physical therapist, speech language pathologist, school social worker) is just not possible.

And yet, the vast majority of students in special education have not received the services as outlined in their Individualized Education Programs (IEPs) since Spring.

Now, six months later and another school year beginning, what are parents supposed to do? When it comes to Education Advocacy, let's focus on getting back to basics.

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Determine the concerns and priorities you have for your child.

TIP #1: depending on your child's unique needs, make a list of concerns and priorities that need to be addressed by the school team.

This may include –

- working on skills like wearing a mask.
- addressing areas of learning loss or where there is regression.
- adding new accommodations that are needed to access remote learning.
- requesting parent counseling or training (add to the Supplementary Aids & Services section).
- scheduling periodic meetings to monitor the progress of your child's program.

Involve your child in the process as much as is possible and appropriate.

Parents must be proactive.

TIP #2: If you haven't already, contact your child's school team.

Request a meeting to discuss your concerns and priorities. Ask the school team to explain how services documented in the IEP are going to be delivered.

Parents, you should participate in the education decisions about your child. Provide input from your documentation and observations for what went well and what didn't work with remote learning in the Spring.

Ask lots of questions – especially WHY?

TIP #3: If you ask your child's school team to consider a parent request and they respond that it is not possible, ask – WHY?

Example: Student's IEP lists 30 minutes of speech service per week.

Parent request: Can the speech service be delivered 1:1 virtually?

Share your reasoning for the requests you make and ask the school team to provide their rationale for their recommendations and responses.

Help the IEP Team think outside the box – you don't have to accept 'No'!

TIP #4: You know your child best. Offer suggestions to the IEP Team (of which you are an equal member) based on your child's strengths, interests, and their unique, individualized needs.

Flexibility, creativity, and collaboration will be necessary for both schools and families during this time.

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Have everything in writing.

TIP #5: If the school team tells you a request you've made (e.g., speech therapy provided 1:1 virtually) is not possible, ask WHY? and make sure the school's response is documented in writing.

For parents to have meaningful participation, you must be adequately informed and involved.

Remember:

- Nothing under the Individuals with Disabilities Act (IDEA) has been waived.
- Your child continues to have a right to a free appropriate public education (FAPE).
- A Contingency Learning Plan does not replace an IEP.

Be aware of anything from a school district asking you to sign agreement, acknowledgement, consent, or receipt.

- A great tip is to never sign anything on the spot.
- Read everything very carefully.
- Compare documents to prior versions, like an IEP.
- Do not sign anything that waives your child's rights to a FAPE under IDEA or Section 504.
- Be specific in agreeing to any kind of time-related extension, like for evaluations.

If you do not understand what has been put forth as the learning plan for your child and/or you have not been involved, note this in writing to your child's school team.

If you are not sure, ask (in writing) for your school team to explain and confirm information in writing (email counts). Make sure you understand everything that is being discussed and decided moving forward for your child's education. View the Council of Parent Attorneys and Advocates (COPAA) [Statement on Protecting the Rights of Students with Disabilities as States and Districts Reopen Schools](#). Additional information to inform your advocacy efforts is available in the AAoM [Back to School Parent Resource Guide](#).

Back to School Resources

Book: The World Has a Virus, by Michelle D. Busby Ed.S.

https://www.amazon.com/dp/B08CJWM2WK/ref=cm_sw_r_sms_api_i_1xHkFb6N2QPH3

Webinar: Individuals with ASD: Coping with Family and Virtual Interactions During COVID-19:

<https://www.autism.org/support-for-individuals-with-asd-coping-with-family-and-virtual-interactions-during-covid-19/>

Webinar: Preparing for Back-to-School During COVID-19: <https://www.autism.org/back-to-school-covid19/>

AAoM Town Hall: Back to School in the Time of COVID 19 (Recording)

<https://autismallianceofmichigan.org/back-to-school-town-hall/>

Check out the [AAoM Neighborhood Directory](#) for a complete list of Statewide Agencies and Providers that serve the Autism community!

