

ASD—Effective Education Programs and Public Programs

Many different strategies and techniques help children with autism spectrum disorder (ASD) learn to interact with others and acquire new skills that may help them talk, play, participate in school, and care for their needs. Here is information from the American Academy of Pediatrics about educational and public supports and services for children with ASD.

Supports and Services: What to Look For

According to an expert panel writing for the National Academy of Sciences, effective supports and services designed for infants and children with ASD from birth to 8 years of age should

- **Offer choices.** Supports and services should offer a variety of behavioral, language, social, play, and cognitive strategies that are unique to the child. If possible, the child should also receive direct speech, occupational, and physical therapies according to their individual needs.
- **Have clear goals.** Each child's individualized plan should include specific, observable, and measurable goals and objectives in each developmental and behavioral area of supports and services.
- **Be intensive but flexible.** Supports and services should be given year round with a goal of 20 to 25 hours of planned instruction per week. In the beginning, most children benefit from a staff to child ratio of 1:1 or 1:2, with a caregiver present as well. Families should be encouraged to find the level of intensity that works best for their child and family.
- **Encourage parents to be fully involved.** Siblings and peers should also be included in the plan. Children often learn best by being with other children in inclusive settings. The family should have support from the therapy team so they can promote social skills, functional communication, and appropriate behaviors at home. Home-based services can allow for more family involvement and achieve the recommended intensity of services and supports.
- **Take place in everyday settings.** To promote acquiring skills, supports and services should take place in everyday settings. Playing and learning with children without ASD may help children with ASD learn social and language skills.
- **Address behavior that interferes with the child's quality of life.** A functional analysis of behavior should be done to assess issues that may contribute to interfering behavior. The information gained from this analysis should be used to design a behavioral support plan. The family should be involved so they can learn about and support their child's behavioral needs. Plans should include strategies for supporting the other person's response to interfering behaviors as well as the behavior itself.
- **Monitor progress often.** If goals and objectives are not being met in a reasonable amount of time, the program should be evaluated and revised as needed.

The types and quality of services may vary depending on where a family lives. Efforts are being made nationally to increase funding and training so professionals can meet the needs of children with ASD in medical and educational settings. While resources vary among communities, a combination of parent and professional supports and services can improve the development of children with ASD.

Children should be referred for an appropriate community-based program as soon as a delay is suspected. Parents should not wait for a definitive diagnosis of ASD because this may take some time. For example, speech therapy evaluation and supports and services should be started as soon as a communication delay is identified. Once ASD or another developmental disability is diagnosed, the specific program or goals of the program can be changed to best meet the needs of the child and family. Keep in mind that a diagnosis can be an ongoing process as additional signs and symptoms become noticeable or others improve.

Although most children with ASD will need some type of supports and services, and many may need intense supports and services, only certain children will need medicine. Medicine may be used to help decrease a behavior, such as aggression or hyperactivity, that is interfering with the child's progress in other areas of learning or their interactions with others.

Parents are encouraged to learn as much as they can about all the different supports and services available.

Public Programs

Services are available for children once concerns become evident. Pediatricians can help identify where the family should take their child who is suspected of having ASD for diagnostic evaluation and supports and services. Check with your child's doctor because many are gaining expertise in evaluating young children for suspected autism in their practices.

Early Intervention Program

The Early Intervention Program for Infants and Toddlers with Disabilities, also known as Part C of the Individuals with Disabilities Education Act (IDEA), requires that each state offer EI services for infants and toddlers with disabilities, from birth to 3 years of age, and their families. The referral may be for a local EI program. Families may also contact the EI program directly. This is a federally and state funded program that helps infants and toddlers with delays or behavioral challenges. If a child is eligible for services, a team of specialists will, with family input and involvement, develop an Individualized Family Service Plan (IFSP). This plan becomes a guide for the services that will be provided until the child turns 3 years of age. It may include parent training and support, direct therapy, and special equipment. Other services may be offered if they benefit the child or family. Also, services can be provided in different places such as the home, a child care center, or a preschool. Typically, if continued support is needed after 3 years of age, the child's program is transferred to the local school district for administration.

Individualized Education Program

If a child is 3 years or older at the time of concern, the referral may be made to the local public school district. Families may also contact the local public school directly. If the child is eligible for services because of the diagnosis of ASD and supporting educational, IQ, and language test results, the school district staff will, with parent input, develop an Individualized Education Program (IEP). This program provides many of the same services as the IFSP, but the focus shifts from child and family to mainly school services provided for the child. The level of services may also differ. If the child continues to need special education and services, the IEP will be reviewed and revised periodically. The IEP should be revised with parent input to meet the child's changing needs as they grow older and develop new skills.

Additional Programs

While federal law mandates a Free and Appropriate Public Education (FAPE) for all children, some communities have private schools and other supplemental services specifically designed to help children with ASD. Families may seek additional services to supplement the public school program. Families should review their child's program with their child's doctor to make sure they are accessing all the services that may benefit their child.

Visit [HealthyChildren.org](https://www.healthychildren.org) for more information.

Adapted from the American Academy of Pediatrics patient education booklet, *Understanding Autism Spectrum Disorder (ASD)*.

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