



ECHO Session Date: 11/22/24

Thank you for presenting your student at ECHO Idaho – K12 Supporting Students with Autism session. Please keep in mind that your School District policies and Health Services procedures, medication administration protocols, process guidelines, remain the guiding principles to your practice.

After review of the case presentation and discussion of this student's case among the ECHO Community of Practice, the following suggestions have been made:

Student Grade Level: 6-8th grade

Summary:

Student without current diagnosis struggles with change and transitions, often overreacting to small challenges like poor performance on an assignment, disagreements with peers, or redirection from teachers (e.g., being told not to fidget or wander in vocal class). This has led to incidents such as lying on the hallway floor crying or fixating on minor injuries like a paper cut, refusing help or instructions. Recently, his frustration has escalated to hitting his head on a locker and becoming argumentative with teachers, showing difficulty recognizing his own behaviors. He also struggles to respect others' rights, such as tolerating louder music, even if he disagrees with it.

Question:

Open to feedback, ideas and suggestions, especially for how to work with parents who are not concerned.

Recommendations:

- **Connecting and working with the parents**
 - Recognize that a diagnosis can be scary for parents who may have preconceptions of autism
 - Share your concerns empathetically with the family, emphasizing the school's commitment to supporting the child, and collaborate by gathering data, seeking their input, and inviting them to observe while maintaining open and transparent communication.
 - Help family understand neurodivergence framing autism as a brain-based difference. Neurodivergent conditions like ADHD, autism, and anxiety are brain-based differences that affect brain structure, processing, and learning styles, with individuals often having nervous systems highly sensitive to stress.

- **Data collection and functional understanding**
 - Use tools like functional behavior assessments and student interviews to gather data on behavior triggers, preferences, and effective reinforcers.
 - Consider using a [Student Reinforcement Survey](#) to interview to identify the reinforcers he prefers and how he likes adults to interact with him, ensuring support is personalized and effective.



- **Connect with primary care provider**
 - Communicate concerns with his primary care doctor, ideally through the family, to ensure he has a medical home and explore necessary referrals.
 - Consider whether past trauma might be triggering dissociative behaviors like staring off, crying, or disengagement, and whether he might benefit from an autism evaluation.
 - Consider trauma focused CBT.
 - Ensure safety plans are in place and consider trauma or life changes as potential triggers for behavior changes, guiding appropriate interventions.
 - Determine if these behaviors occur only at school or also at home, and support the family with resilience-building skills to improve co-regulation and self-regulation.

- **Music:** Consider using music, his strength and interest, as a tool for emotional expression, such as identifying feelings through musical styles (e.g., staccato for anger) to help him communicate.

- **Social stories:** Use age-appropriate social stories or visuals, like graphic novels, to help him identify when he needs regulation and model proper responses to anxiety or upset feelings.

- **Connect with OT (through the school district and/or private) to help with the following:**
 - Explore how his quick shifts in regulation (e.g., lying on the floor, leaving the room, hitting his head) could be signals of stress, possibly linked to high performance anxiety in certain classes, and focus on slowing these shifts by providing more regulation tools like movement or fidget options acceptable in class.
 - Emphasize co-regulation with trusted adults, particularly in predictable moments like morning check-ins or lunch, to create stability and address potential trauma from past invalidation or unmet needs.
 - Explore deeper regulation strategies, such as scheduled movement breaks, safe spaces, or calming tools like headphones, while advocating for a formal identification process to provide him with appropriate support and protection.
 - Get some strategies, especially with some interoceptive work. Help him notice what he does. When he's starting to get that shift in his nervous system, it's all related to his inner body experience. That's a hard thing to pair for autistic humans.

Resources:

[Student Reinforcement Survey](#)
[Zones of Regulation](#)