

# **Autism Spectrum Conditions in the Early Years Foundation Stage**



**Information for Early Years Settings**

## **Preface**

This booklet has been produced by the Service Development Manager - Autism, working with teams from Children's Services. It aims to support early years settings in meeting the needs of young children with autistic spectrum conditions. It provides basic information and an introduction to some simple strategies that will be of use to all staff.

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## Section I : What is autism?



Imagine what it feels like to be alone in a foreign country, lost in a crowd of 2,000. Picture your confusion as you struggle through a chaotic muddle of legs, faces and bodies.

Imagine trying to find your way through the crowd with only jumbled signposts to follow and directions which you can only partially understand ...



**For a child with an autistic spectrum condition, ordinary situations can feel just like this. But as they try to make sense of the world around them, they face the added problem of feeling that they are ‘different’.**

Although it was first identified in 1943, autism is still a relatively unknown disability, yet autistic spectrum conditions are estimated to touch the lives of over 500,000 families throughout the UK.

People with autism are not physically disabled in the same way that a person with cerebral palsy may be; they do not require wheelchairs and they ‘look’ just like anybody without the disability. Due to this invisible nature it can be much harder to create awareness and understanding of the condition.

## Part I : Information

Because an autistic child looks 'normal' others assume they are naughty or the parents are not controlling the child. Strangers frequently comment on this 'failing'.

A lot has been written on the subject of autism – an in-depth description could easily take a whole book. This section will summarise the main aspects that any interested professional needs to know.

Autism is a lifelong developmental disability that affects the way a person communicates and relates to people around them. Children and adults with autism have difficulties with everyday social interaction. Their ability to develop friendships is generally limited as is their capacity to understand other people's emotional expression. People with autism can often have accompanying learning disabilities but everyone with the condition shares a difficulty in making sense of the world.

There is also a condition called Asperger syndrome, which is a form of autism used to describe people who are usually at the higher functioning end of the autistic spectrum.

*"Reality to an autistic person is a confusing, interacting mass of events, people, places, sounds and sights. There seems to be no clear boundaries, order or meaning to anything. A large part of my life is spent just trying to work out the pattern behind everything."*

- A person with autism

### **What causes autism?**

The exact cause or causes of autism is/are still not known but research shows that genetic factors are important. It is also evident from research that autism may be associated with a variety of conditions affecting brain development which occur before, during, or very soon after birth.

### **Diagnosis**

The earlier a diagnosis of autism is made, the better the chances are of a person receiving appropriate help and support.

### **Can people with autism be helped?**

Appropriate education and structured support can really make a difference to the life of a person with autism, helping to maximise skills and achieve full potential in adulthood.



## Section 2 : Signs of Autism

Children with Autistic Spectrum Conditions (ASCs) share a triad of impairments affecting their ability to:

- Understand social situations and emotions and relate to other people
- Understand and use non-verbal and verbal communication
- Think and behave flexibly which may be seen in restricted, obsessional or repetitive activities

It can be hard to understand how an autistic child sees things, they often seem to be in their own private world, but we need to understand their world if we are to help them and their families.

### How can ASC affect children?

#### Social behaviour and social understanding

Typically developing children do not need to be specifically taught social behaviour and social understanding as it is something they just seem to acquire. Children with ASC, however, think and interpret differently often finding it very difficult to understand the social behaviour of other people. This means that they sometimes behave in socially inappropriate ways.

Some children seem to be indifferent to other people, they may not want to play with other children and only join in with an activity if an adult insists and assists. For children with autism other people's opinions may have little or no significance so they may say or do exactly what they want, and may not respond to the usual methods of praise and positive attention. Their behaviour and reactions may be confusing to their peers who may therefore avoid or tease them.

To adults with no knowledge of ASC these behaviours may be misunderstood and viewed as naughty, difficult or lazy and responded to as such when in fact the child may not have understood the situation or task and was unable to read the adult's mood or intentions correctly.

#### Non-verbal and verbal communication

Communication is a predominantly social act. Given the difficulty children with ASC have with social interaction it is therefore not surprising that they have similar difficulties in understanding communication, and therefore developing skills in this area. These children may be later in learning to speak or may not develop speech. They may have very little language, they may echo what is said or talk a lot about topics of great interest to them. Some children develop good language skills but find it hard to use them socially or see another's point of view. Conversations can be very one-sided. Their eye contact may be poor.

#### Think and behave flexibly according to the situation

Children with ASC may play with toys in a different way to other children, preferring to arrange toys in a certain way, collect specific objects, or spin and turn toys or hands repeatedly and watch them move. They tend to play alone or alongside rather than with other children. Some children with ASC develop special interests in certain toys, topics or activities which may dominate their play. They may be unable to play imaginatively, unless it is in a very stereotyped way recalling observed actions.

When new skills are learned they will be linked to the situation in which they are acquired, and therefore not generalised.

If familiar routines are changed or disturbed they may exhibit very fearful and bizarre behaviour.



### **Sensory perception and responses**

Some children with ASC have a different perception of sound, sight, smell, touch and taste and may be over or under sensitive to some of these sensations. This can explain their reactions to changing clothes, food or noise and has implications for their home and nursery environments. They may not make appropriate eye contact, either finding it hard to look or staring intently. Some children may not be able to look and talk or listen at the same time being confused by all the sensory stimulation they receive.

### **Motor Development**

Some children with ASC may appear clumsy and uncoordinated within certain activities, for example seemingly poor gross motor skills but very good fine motor skills or vice-versa.

### **Strengths of children with ASC**

All children with ASC are individuals and they will have differing abilities. If they are interested they may be able to concentrate and focus in detail on an activity. This absorption in a task can mean they develop a high level of skill and work for longer periods than many others. Generally those with ASC are better able to process visual information than that which is presented verbally. More able children with ASC can succeed in academic areas where the language used is technical or mathematical and high degrees of social understanding are not required (for example information technology, science, engineering and music).

A diagnosis of autism can be given without all the above signs being exhibited and children without autism may display some of these behaviours.

Children with autism can be very different from each other because:

- There is a spectrum of disability and the triad of impairments can occur in varying degrees of severity
- The three areas of impairment may not all be affected to the same degree
- All children have their own personalities
- All children have a unique family and environment which impacts on their development
- Their behaviour will be affected by their access to education and the quality of that education

*“When considering any developmental disorder, it must be remembered that what is seen in an individual (of whatever age) is not the disability itself, but how that individual has adjusted to the disability and the consequent difference in the course of development.”*

(Jordan 2001, lecture notes)

The following strategies although designed for children with autistic spectrum conditions may be of use for children with a variety of differing needs.

Every child is different and what works for one may not work for another. These strategies should be tailored to the specific needs of each individual. Remember that parents and carers know their children well and will probably be able to assist in the development of approaches within your setting.

### Section 1 :Transitions

Preparing for and managing change is important for all children, but this is particularly so for those with an ASC. Change includes starting at a new setting, arriving and departing, and transitions between activities over the course of a day.

Staff and parents will need to prepare the child for any changes. Knowledge of the child and what they are likely to require before transition is essential.

### Section 2 : Physical Environment

Some children with ASC experience difficulties with sensory stimuli. They may be over-sensitive or under-sensitive to certain sounds, sights, smells, tastes or textures. Even the number of children present may have an overwhelming effect on the child.

#### How can we modify the environment to reduce anxiety for children with ASC?

- Structure in the environment helps children make sense of what can be a confusing place. Are areas of the room clearly divided and labelled with pictures or symbols to show what activities can take place there?
- Clutter and distraction may be inhibiting and a low arousal setting is likely to be the most reassuring. Try to create a low distraction area within the setting - this may be a quiet room, quiet book corner with cushions or even a tent.
- Have you taken into account that smells, sounds and lighting may be distracting?
- The setting needs to be calm and focused allowing opportunities for relaxation and a relief of tension.

Staff need to be aware that they and the other children are part of the environment. Therefore many of the issues listed above also need to be considered in relation to people:

- Be aware of the child's need for space
- Warn the child of any approaches – it is often best to approach children with ASCs from the side
- Consider their positioning at an activity, they tend to be most comfortable working alongside others rather than opposite them
- Wherever possible adopt a calm and quiet manner

Some children with ASC may have a lack of awareness of their own safety and of other hazards.

- You should undertake a risk assessment which takes this into account.

Some children with ASC may not seem to react to pain. They may not cry when hurt, so it is important that they are carefully observed when on play equipment.





## Section 3 : Communication

Most early years staff are used to dealing with children who are not yet talking. However, children with ASC present a new challenge as for them language and communication develop separately. A young child with an ASC may have no spoken language, or may have an advanced vocabulary and very grown-up sounding speech pattern. But, in both cases they may have little understanding of communication.

Autism teaches us that language is not always 'a form of communication' so in working with children with ASC we have to be prepared to teach both language and communication.

### Something to communicate about

Children with ASC have wants and needs but may have little awareness of them or may not be able to communicate them in ways that others can understand (some of the behaviours seen in young children with autism are their attempts to communicate). Teaching about communication therefore, must start at the very beginning:

Help the child have joint attention (a shared focus of attention between the child and adult) with others:

- start by playing alongside the child and imitating them
- vary the pace of imitation so that the child is waiting for it and beginning to appreciate the turn-taking
- introduce some variations and try to entice the child to imitate you

Help the child understand eye contact as a signal:

- engage in an activity that the child needs you for
- stop the activity abruptly – most children will look at the adult to see why s/he has stopped 'playing'
- as the child looks say 'Oh, would you like some more?'
- eventually the child will connect that looking is the signal to continue, and will start using eye gaze as a communicative signal

Help the child understand what they are feeling in situations when you are certain what this is. Look for clear situations of happiness, fear, anger and then help the child know what they are feeling as well as what led to it and how you want them to express it (in the case of negative emotions which might otherwise lead to challenging behaviour).

### Something to communicate with

A child who is not speaking needs to be given a way of communicating. Children with speech may also need a system of pictures and symbols to help them express themselves (especially if they are in the grip of a strong emotion such as anger or fear). The problem is deciding on the best system for the child and in such situations the advice of a specialist teacher or speech and language therapist should be sought.

### Something to communicate for

Children have to have a reason to communicate; that means they must not be able to do everything for themselves, nor have every need anticipated. Children with ASC need to learn to see others as sources of having their needs met, and staff and parents will need to see how the child is communicating (at whatever level) and make the most of it.

## Communicative functions

Children with ASC, if they communicate at all, do so usually for only 2 or 3 purposes. These are request, protest, and, for those with speech, 'lecturing' about a favourite topic. The child will also express emotions especially frustration, anger and fear, but usually as a direct act (behaviour) without any communicative intent.

Before beginning to teach communicative functions a simple observational assessment should be undertaken using the checklist for communicative functions form (Appendix 1). This checklist is useful when trying to understand the ways in which a mostly non-verbal child communicates. Each communicative function or reason for communicating may be expressed using any number of communicative means or ways to communicate through actions and behaviour. To use the checklist, simply go through each communicative function and check off the communicative means that apply. For example, if a child requests objects by pointing, looking and moving closer to them, you would check off all three of these pre-verbal means in the "request object" row.



When teaching communicative functions start with request ('I want...'), then protest ('no'); further functions are difficult to teach and specialist advice may be required.

## Understanding instructions

- Give instructions confidently and say exactly what you mean using simple language. Children with ASCs need direct instructions, not wrapped up as questions or statements, or offering them opportunities to refuse (e.g. say 'John, reading time', rather than 'Would you like to come and sit down now John, it's time to read; or 'John, coat on', rather than 'Please get your coat before you go out to play').
- Try to avoid using phrases that the children may take literally such as: 'I laughed my head off', 'I've got frog in my throat', 'It's raining cats and dogs', 'Cat got your tongue?', 'Go and wash your hands in the toilet.'

Provide visual supports for verbal instructions.

## Section 4 : Helping children become more flexible

- Provide a predictable and safe environment – it helps children with ASCs if they know what to expect to be happening in different places, and where to find things.
- Offer consistent daily routine – routine is often very important for these children, so having fixed aspects of the day can be beneficial e.g. snack times, quiet times etc.
- Introduce changes gradually with good communication - children with ASCs can learn to cope with changes if they know what to expect, giving them information, if possible visual clues, can really help.
- Teach what 'finished' means – lots of activities have no clear end point so one needs to be created, e.g. you can play in the sand for 10 minutes (use a sand timer), you can play on the bike until the whistle is blown etc.
- Make choice meaningful, but not too complex for the child to understand – it is good to start with choices of just two things, e.g. 'would you like to do a puzzle or paint' if you can support the choice with either object or picture clues (see page 13 choice boards).
- Provide information about what is happening or is about to happen – by letting a child with an ASC know what is happening next, you are removing the element of surprise which they may find distressing.

## Section 5 :The Curriculum

The Early Years Foundation Stage curriculum is truly inclusive and can be adapted to meet the needs of all children with careful planning and an understanding of the implications of autism. Essentially a child with ASC needs to develop 'learning to learn' skills in order to access the curriculum – sitting for short periods, looking, listening, attention, concentration, enjoyment and simple self help skills such as toileting and dressing. A lot of practice may be needed.

Cumine, Leach and Stevenson (2000) give an outline of how the curriculum can be adapted to meet the needs of children with ASC. They emphasise the child's special needs and give hints on teaching, with case study information. The following is a summary of some key points.

### Personal, social and emotional development

- Talk to parents and find out about the child's mood, interests and preferences.
- Start by following the child's lead, seeing what interests him/her and gradually share the activity.
- Slowly involve one other child in the activity, introduce turn-taking.
- Carefully structure the activity so that each child's role is obvious.
- Note the child's favoured activities for use as potential rewards.
- Specifically teach imitation skills: 'Watch me!'; 'Do this!'.
- Extend this by asking the child to copy what another child is doing.
- Give clear visual clues to help prepare the child for new activities.
- Develop an awareness of the things which may upset the child.

### Communication and language, and Literacy

- Use attention grabbing toys and activities, linking with the child's specific interests
- Introduce stories and action songs, one-to-one with the child or in a small group – before expecting him to sit in a large group.
- Specifically teach pointing – starting with a point which touches the desired item, leading to a more distant point later. Use other children to demonstrate pointing.
- Create situations which could prompt the child into using his language communicatively, e.g. 'forgetting' to give him a straw for his drink.
- Place yourself between the child and an item he wants (e.g. the next piece of a puzzle or the next Lego brick). Encourage him to prompt you to reach the things he needs.
- Use visual or musical cues to supplement verbal instructions, e.g. having a piece of music that signals 'come and sit on the carpet'.
- In literacy, be aware that the child may learn to decode words quite quickly, but understanding the meaning of what he reads takes much longer.

## Mathematics

- Create opportunities for the children to use number language.
- Link the child's fascination for counting to real items.
- Build on any particular strengths in mathematical skills. Help the child show someone else what to do.
- As mathematical problems are introduced, make them realistic and close to the child's own experience.
- Continue to offer concrete number materials as the child is likely to have some difficulty with abstract number concepts.

## Understanding the world

- Start from the child's own interests, no matter how unusual. Encourage him to share these with others. Help him record the interest e.g. through drawing, writing, making a model, taking a photograph.
- Note what sort of changes are likely to cause distress and either avoid them or give the child clear warning, supported by visual clues.
- Set up simple problem-solving tasks, e.g. trying to work out how to operate a simple action toy.
- Help the child draw on past experiences to answer the question, 'What will happen if.....?'
- Use an interest in computers as an opportunity to increase the child's ICT skills.
- Help the child develop an idea of the sequence of time from past to present, perhaps using photographs.
- Encourage the child to ask questions.
- Introduce language to describe emotions.
- Link the language of emotions to actual events and actions.
- Use opportunities to explain the emotions others must be feeling, drawing the child's attention to body language and facial expression.

## Physical development

- Have clear safety rules which the child can understand.
- Give the child opportunities to explore the space available in his own time – at first perhaps when no other children are present.
- Help the child understand the language of co-operation as it relates to physical activity – e.g. 'wait' and 'take turns' using picture cues.
- Model 'finding a partner', and make sure the child understands what each partner has to do.
- Spend some time specifically teaching imitation skills which involve body actions and movement.
- Help the child with autism initiate playground games such as 'chase'.
- Help the child recognise when he needs help and how to ask for it.

## Expressive arts and design

- Offer a variety of textures and sensory experiences and discover what the child can tolerate.
- Gradually work with the child to extend their range of activities. If a child heads for one activity to the exclusion of all other play opportunities, don't have that activity available all the time – just bring it out for part of the session.
- Get involved in play activities that 'push' the child's imagination.
- Encourage role-play by starting with people and situations very familiar to the child.
- Support children in making choices by limiting the options available.
- Help children recall and review things they have already done – use photographs to help.

## Section 6 : Play

Early years staff need to recognise that when working with children with ASC rather than teaching through play, play itself has to be taught. The following examples may help with this.

### Functional play

Many young children with ASC have poor self-occupancy skills and lack the imagination to truly experiment and examine toys. Because of their rigid behaviours they seem uninterested in trying new toys or experiences.

- Introduce new toys/activities in a one-to-one situation, demonstrating how to use the toy/access the activity.
- Gradually increase the range of toys/activities the child is familiar with.
- Provide a structure for making choices during 'free time' so that the child is aware of what options are available to him. This can be helped by showing the child 2 objects that relate to a potential choice e.g. a lego brick and a paintbrush. If the child understands photographs or pictures a choice board can be created.



### Interactive play

- Imitating: the first step consists of 'tuning in' to the child so that eventually he will 'tune in' to you. Imitate vocally and physically.
- Play routines: games such as 'peek-a-boo' and 'round and round the garden' with appropriate use of timing, pausing, anticipation and climax, can be fun for young children with ASC well beyond the age at which they would usually be used.
- Set songs: e.g. 'Wind the bobbin up', 'The wheels on the bus' and 'Five fat sausages' benefit from repetition. Again the use of dramatic pauses, allowing the child to take the lead can create variety in routine.
- Flexible songs: e.g. 'Here we go round the Mulberry Bush' in which the words can be changed to suit the situation.



## Developing simple play structures

- Have a time when you play one-to-one with the child in a defined area. Simple recognisable toys, which motivate the child, are collected into a box (if possible two sets so sharing is not essential). Start by imitating the child, reinforcing the child's initiatives and gradually guiding play.
- Extend from imitation to parallel play – imitate the child and gradually provide new ideas.
- Visual scripting a picture story accompanied by matching toys prompts the child to play out the story. Over time introduce additional toys to allow variety.
- Taking turns in games using props to indicate whose turn it is e.g. a hat.



## Section 7 :Toileting

Some children find toileting very difficult. You may find that a child with ASC who is dry at home may need nappies at nursery - others may use other places than the toilet, not realising that this is inappropriate. They are not being naughty they are just struggling to understand what is required of them.



To tackle any toileting problems it is important to take it one step at a time. It is worth considering, based on discussions with the child's parents, whether or not to use a potty, or to use a toilet from the outset.

Try and establish a routine. For example, take the child to the toilet or potty about 20 minutes after every meal. You can also look out for non-verbal signals that indicate the child wants a wee or poo. Parents should be able to advise on this. Take the child to the toilet and encourage them to sit on the toilet or potty. Try and get them to sit for a short period of time, say five minutes, before you let them off. If they don't do anything let them off but return a short while later, especially if they give signals that they are about to do something in their nappy or pants.

It is important to keep a record when a child goes to the toilet e.g. did a wee, did a poo, pants wet, just sat etc. This will give useful information in order to determine whether visits to the toilet should have shorter/longer intervals and whether a child wets/poos at around the same time daily. Timings of visits can then be adjusted accordingly. For a child who dislikes using the potty/toilet, it may be useful to give them a favourite book/toy to use while getting them to tolerate just sitting down. For a child who holds on to their urine, it might be worth plying them with their favourite drinks throughout the day. Rewards for using the toilet need to be instant so that the child relates the reward with the correct action. Set up a reward system when toilet training. Rewards usually need to be real things such as allowing the child to undertake a favourite activity. Children with autism may not understand praise or tokens such as stickers.

## Section 8 : Eating

Snack times and lunch times can be particularly difficult for children at nursery. Some are very sensitive to certain textures or flavours, or are frightened of trying new foods. Many are overactive and find it hard to sit down and eat at a table. It is therefore important to take things in small steps and praise the child for their progress. They may find eating as part of a group overwhelming - sitting the child at their own table and gradually introducing other children may help.

Lunch time must be a very consistent routine with, perhaps, a personal table mat so that the child knows that it is time to sit down and eat. Encourage the child only to eat when sitting. Keep returning him to his chair to sit for a few minutes to eat. Be very clear what you are working on, e.g. favourite foods, so that the child wants to sit down and eat.

Gradually build up the amount and variety of food presented to the child. During the early days, only present the foods that the child knows and likes. Then put one small new item in the middle of a favourite food e.g. one pea in a jacket potato and gradually build up. If he shows interest in other foods, by all means then try the new food, unless the child is on a special diet. Give praise once the food has been swallowed, and not before. If the child leaves food on their plate, just remove their plate without comment. Don't make a big fuss about what is left. Accept it may be better for a child to initially use his fingers, rather than a spoon/fork, if you just want him to eat. Teach one skill at a time.

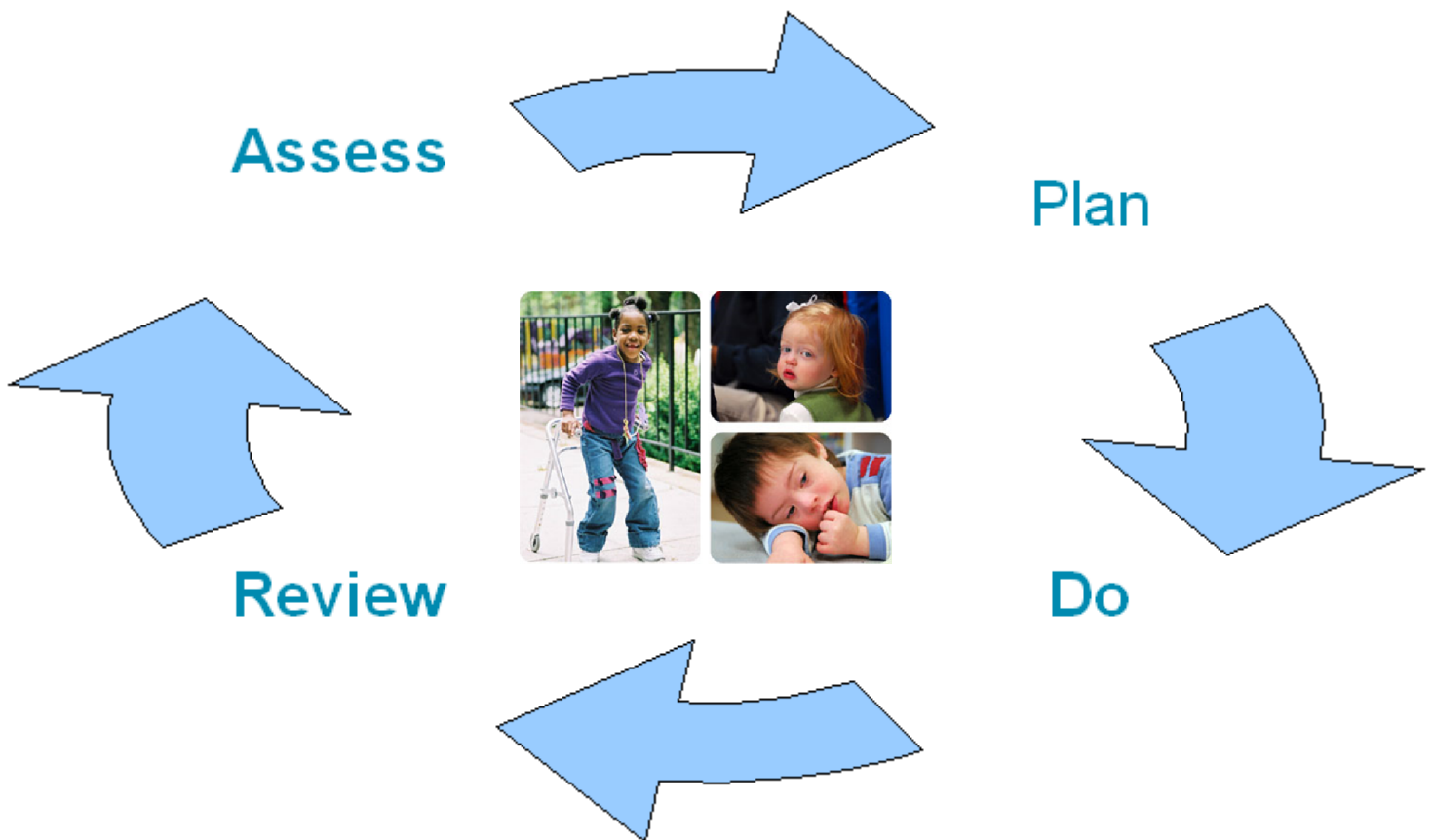


## What to do if you are concerned about a child's development and/or behaviour

This booklet is not intended to be used as a way of diagnosing young children with autism. Diagnosis requires specialist assessment by a multi-agency team. Therefore, if you are concerned about a child's development and/or behaviour, please be aware that it is not appropriate to use the term autism until it has been confirmed through the diagnostic process.

As with any child be sensitive and careful when discussing your concerns with parents.

### The Graduated Approach in the Early Years



"This cycle of action should be revisited in increasing detail and with increasing frequency, to identify the best way of securing good progress. At each stage parents should be engaged with the setting, contributing their insights to assessment and planning. Intended outcomes should be shared with parents and reviewed with them, along with action taken by the setting, at agreed times."

*(SEND Code of Practice 2014, paragraph 5.44)*



## Observations / Diary

- Refer to information gathered prior to child's entry into the setting.
- Continue to observe and record aspects of the child's development and /or behaviour that are causing concern.
- Through the use of a diary look for patterns of frequently observed behaviour:



## Discuss developmental concerns with parents/carers

- Arrange a time to meet with the parents/carers (in schools this will be the role of the SENCO, in other early years settings it will be the role of the key worker, setting SENCO and/or manager).
- Establish if the parents/carers have any concerns about their child's development.
- Based on your observations describe your concerns to the parents.
- Discuss appropriate next steps, in particular the need to start Code of Practice procedures, and if relevant, referral on for specialist assessment via either a health visitor or school nurse.
- Obtain written parental consent prior to sharing information with other professionals (unless concerns relate to child protection issues).

## Liaise with health visitor / school nurse

- Based on your observations and the developmental checklist describe your concerns to the health visitor/ school nurse.
- Discuss appropriate next steps, in particular the need to refer on for specialist assessment.

## Advice and Training

Private, voluntary and independent settings requiring advice should contact their Area INCO.

A variety of training courses is available within Cumbria. Look out for courses advertised through Children's Services training bulletins and other organisations.



## Books and Leaflets

(All available from the National Autistic Society)

### **It can get better...dealing with common behaviour problems in young autistic children**

***Paul Dickinson and Liz Hannah***

Aimed specifically at parents and carers of young children, it looks at common behaviour problems and offers strategies and tips on how to deal with them in a jargon free format. It offers help with many problem behaviours, including temper tantrums, toileting problems, sleep, feeding, self-help skills and learning to play, coping with obsessional and repetitive behaviour and self injury.

### **Autism: how to help your young child**

***Leicestershire County Council and Fosse Health Trust***

Aimed particularly at parents but helpful also to early years practitioners, this practical book offers practical and jargon-free advice. It is divided into three areas where difficulties may arise for a child with autism: social interaction, communication (verbal and non-verbal) and imagination. It also includes an index of pen-pictures to help parents more easily find their child among the examples and directs them to the relevant section. Each section is divided into what to look out for followed by things to try to help the child's behaviour.

### **Guidelines for working with children with ASC at Foundation Stage and Key Stage 1**

***South Gloucestershire Council***

This book offers helpful and practical guidance for staff working with children in the early years. One of the NAS best sellers, it suggests strategies that will benefit not just children with an autism spectrum disorder but all children.

### **Playing, laughing and learning with children on the autistic spectrum: a practical resource of play ideas for parents and carers**

***Julia Moor***

This book is full of ideas to gain a child's attention and motivation and build on small achievements, with advice on how to redirect obsessions and rituals positively. It also covers reading and making the most of television. The strategies will help toddlers as well as older children.

### **Early years and autism: a guide for early years practitioners**

***Christine Deudney and Lynda Tucker***

This booklet offers practical advice on the difficulties young children encounter, including starting at nursery, picture timetables, toileting, communication, eating, tantrums and play. Aimed at anyone who works with young children but parents of children with an autism spectrum disorder will also find it helpful.

**Autistic spectrum disorders: a guide for nurseries and infant schools**

**National Autistic Society**

Introductory packs of useful information leaflets, booklets and posters for anyone working with children with autism spectrum disorders in early years settings: posters to help recognise the difficulties children with autism may experience, guidance on play and learning and helpful signposts for finding out more information.

**Autistic spectrum conditions in the early years: a guide for practitioners**

**Rita Jordan**

This clear and concise guide is aimed at teachers but would also be very helpful for parents. It covers diagnosis, communication, behaviour management and developing social understanding and provides practical advice on support for children with autistic spectrum disorders to aid their learning and development as much as possible.

**Autism in the early years**

**Val Cumine, Julia Leach, and Gill Stevenson**

This practical guide outlines the characteristics of autism as they present themselves in the early years; considers the nature of autism and the issues surrounding assessment and diagnosis; offers practical strategies for effective and realistic intervention both at home and in a variety of early years settings; and explores possibilities for enhancing access to the early years curriculum. (Published by David Fulton Publishers, 2000).



## Websites

**The National Autistic Society:**

**[www.nas.org.uk](http://www.nas.org.uk)**

A useful site with a variety of factsheets for both parents and professionals, information about services, courses, approaches and current autism research.

**The Scottish Society for Autism**

**[www.autism-in-scotland.org.uk](http://www.autism-in-scotland.org.uk)**

**Do2Learn**

**[www.do2learn.com](http://www.do2learn.com)**

Simple black and white picture cards are provided here to print, cut out and make your own one-inch visual communication tools, with or without words.

## Useful Contacts

### Early Support

Early Support is the way we achieve better coordinated, family-focused services for young disabled children and their families.

Early Support in Cumbria is developing effective multi-agency working arrangements that will make a real difference to the lives of young children and their families. Early Support is designed to ensure that all services provided for families with young disabled children are:

- well co-ordinated
- well planned
- well executed
- responsive to their needs

Families have the support of a key worker or lead professional in their Team Around the Family.

Early Support provides the ethos, materials, training and website to facilitate effective multi-agency working. Find out about Early Support and download all the materials at:

[www.councilfordisabledchildren.org.uk/earlysupport](http://www.councilfordisabledchildren.org.uk/earlysupport)

# Checklist of Communicative Functions and Means

Wetherby 1995

Child's name:	Date of Sample: (mm/dd/year)
Context:	

COMMUNICATIVE FUNCTIONS	COMMUNICATIVE MEANS																				
	Pre-verbal							Verbal													
<b>Behavioural Regulation</b>	Physical manipulation	Giving	Pointing	Showing	Gaze Shift	Proximity	Head Nod / Head Shake	Facial Expression	Self-injury	Aggression	Tantrum	Crying / Whining	Vocalising	Other	Immediate Echo	Delayed Echo	Creative One-word	Creative Multi-word	Other	Other	
Request Object																					
Request Action																					
Protest																					
<b>Social Interaction</b>	Request Social Routine																				
Request Comfort																					
Greeting																					
Calling																					
Request Permission																					
Showing Off																					
<b>Joint Attention</b>	Comment																				
Request Information																					
Provide Information																					
<b>Other Functions</b>																					

# Communicative Functions

The Communicative Functions are divided into the following categories:

<b>Behaviour Regulation</b>	Communicative actions used to regulate behaviour for obtaining or restricting environmental goals.
<b>Social Interaction</b>	Communicative actions used to direct another's attention to oneself for social purposes.
<b>Joint Attention</b>	Actions used to direct another's attention for purposes of sharing the focus on an activity or event.

## Communicative Means

The Communicative Means are divided into two sections called Pre-verbal and Verbal. The following is a brief description of each mean or action listed in the checklist.

### Pre-verbal

<b>Physical Manipulation</b>	Touching, trying to operate a toy
<b>Giving</b>	Giving an item to another person for a specific purpose (eg to request help with activating the item or to express an interest in it)
<b>Pointing</b>	Pointing to an item for a specific purpose
<b>Showing</b>	Showing the item but not releasing it
<b>Gaze Shift</b>	Looking briefly in the direction of an item out of interest
<b>Proximity</b>	Moving closer to the item out of interest or away from it in protest
<b>Head Nod / Head Shake</b>	Indicating interest in an object through nodding or protesting by shaking head
<b>Facial Expression</b>	Smiling, frowning, etc
<b>Self-Injury</b>	Hitting, biting, banging self
<b>Aggression</b>	Hitting, biting, punching, kicking, scratching others
<b>Tantrum</b>	Screaming, throwing self down on floor
<b>Crying / Whining</b>	To make needs known
<b>Vocalising</b>	Any speech-like sounds that are not full words
<b>Other</b>	Word approximations such as "bu-bu" for "bubble"

### Verbal

<b>Immediate Echo</b>	Child repeats what is heard immediately after hearing it
<b>Delayed Echo</b>	Child repeats what was heard earlier in the day or on a previous day
<b>Creative One-word</b>	Spontaneously uses a single word (eg, saying the word "milk" can be to request it, to comment on seeing or having it, or to ask if that is what is in a cup)
<b>Creative Multi-word</b>	Spontaneously uses two or more words

