Family Resource Navigators

Autism and Special Education

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About FRN



We are a multilingual and multicultural nonprofit that knows what it's like to walk in the shoes of the parents we work with.

We support families with children with disabilities, delays and medical conditions – ages 0 to life.

About FRN



Our community is at its best when every person is treated with respect and dignity.

In 14 different languages, we **empower**, **educate**, and **support** families in learning how to advocate for their child's needs.

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Agenda

- Learn about Autism and IEPs
- Special Education Assessments and Eligibility
- Evidence-Based Practices

Entitlements for Special Education

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Special education in California is governed by both state and federal laws. These laws require school districts to provide students with disabilities a **free, appropriate public education** (FAPE), which includes special education and related services at no cost, meets quality standards, and follows the student's **Individualized Education Program** (IEP).

Special education must be provided in the **least restrictive environment**, meaning students with disabilities should be educated with non-disabled students whenever possible.

Additionally, FAPE ensures that students with disabilities can participate in and make progress in the general education curriculum and work toward their IEP goals.

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Autism

Autism and Special Education







What is Autism?

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Autism Spectrum Disorder (ASD)

- A neurodevelopmental disorder characterized by:
  Deficits in social communication
  Restricted interests and repetitive behaviors
- In 2013, the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition* (DSM-5) replaced the *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV)* diagnostic criteria.

DSM-5 changes:

- Introduced the concept of ASD as a "spectrum."
- Merged previous diagnoses:
  - Pervasive Developmental Disorder (PDD)
  - PDD–Not Otherwise Specified (PDD-NOS)
  - Asperger's Syndrome
- Severity levels were added to classify how much support individuals with ASD require.

Autism Defined through the Educational Lens

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According to the definition provided by the California Department of Education

Autism means a **developmental disability** significantly affecting verbal and non-verbal communication and social interaction, **generally evident before age three**, which adversely **affects educational performance**. Other characteristics often associated with autism include engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences.

The term does not apply if a child's educational performance is adversely affected primarily because the child has an emotional disturbance. **A child who manifests characteristics of autism after age three could be diagnosed as having autism if the criteria in the above paragraph are satisfied**. (34 CFR Sec. 300.8(c)(1)).

U.S. Department of Education. (2023). *IDEA regulations: Autism definition*. 34 C.F.R. §300.8(c)(1).
CALPADS Primary Disability Category Codes - California Assessment of Student Performance and Progress (CAASPP) System (CA Dept of Education)

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ASD and Special Education

How Students with Autism (ASD) are Counted

Every state reports the number of students receiving special education services.

A student is counted under Autism (ASD) if:

Autism is listed as their **primary disability**, and

They are receiving special education and related services.

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Autism by the Numbers

Fact

- **1 in 31**
- About 1 in 31 children were identified with **Autism Spectrum Disorder** among a 2022 sample of 8-year-olds from 16 US communities in CDC's ADDM Network.

- Autism Data Visualization Tool | Autism Spectrum Disorder (ASD) | CDC

Autism by the Numbers

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Education – *Special education services and outcomes for autistic students*

Compared to the U.S. average of **12.2 percent, 16.1 percent** of students of special education students in **California** are receiving special education services for autism. Understanding this information can help special education planning for appropriate staffing and curriculum to better meet the needs of autistic students. Demographic differences can help us plan for connecting autistic people to services they may need.

In **California, 2.4 percent** of autistic students received at least a one-day suspension for disciplinary action, compared to **5.3 percent** in the U.S. This indicator describes how schools manage autistic students' behavior.

In **California**, rates of students graduating with a diploma were **slightly higher** than those in the U.S. It is important to understand if school supports for autistic people are appropriate in meeting their needs. These numbers may give insight into the effectiveness of supports for autistic students and the quality of the schools in the state.

	California	United States
Receiving special education services	16.1%	12.2%
Received disciplinary action	2.4%	5.3%
Received diploma	74.3%	72.4%

Source: *U.S. Department of Education, Part B Child Count Data 2021-2022*

Autism Speaks. (2024). Autism Speaks, Autism by the Numbers - California. https://www.autismspeaks.org/autism-statistics-asd
Yolande Loftus, B. (2025, July 7). *Autism statistics you need to know in 2024*. Autism Parenting Magazine. https://www.autismparentingmagazine.com/autism-statistics/
Autism by the Numbers - National Autism Data Center

Medical Diagnosis vs. Educational Eligibility

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Medical Diagnosis

- A **medical diagnosis** is made by a licensed healthcare professional (such as a developmental pediatrician, psychologist, or psychiatrist).
- Based on criteria in the **Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5-TR)**
- Focuses on developmental history, behavior, communication, and social interaction
- May include standardized testing and clinical observation

Educational Eligibility Diagnosis

Educational Eligibility – Autism

- Under **IDEA** eligibility in the "Autism" category is **determined by the district**, often including the school psych.
- The decision is based solely on whether or not Autism-related characteristics affect educational performance
- A child may have a medical diagnosis and not qualify educationally or qualify educationally without a medical diagnosis

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Takeaway

A medical diagnosis **does not automatically qualify** a student for an IEP.

An educational classification **does not equal** a medical diagnosis.

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IEP Basics

Assessment

- **Evaluations and assessments** are the foundation of any IEP. Evaluations should be comprehensive, multidisciplinary, and determine a student's needs in all areas of disability.

Goals

- **Goals** define a reasonable next step (with appropriate services and supports) for where a child should be within a year.

Placement

- **Placement** is the classroom where a child is placed (with all necessary supports and services) to have a reasonable chance of meeting their goals.

Eligibility for Special Education Services

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IEP

- Eligible under 1 of 13 disability categories where the child is unlikely to progress without specialized instruction
- Backed by IDEA, and can be enforced with Due Process
- Federal Guidelines establish parents' rights & participation
- Supports access to the curriculum
- Includes Special Education and Related Services such as PT, OT or speech and language services
- Includes annual Goals, accommodations and modifications

504 Plans

- Eligibility is anyone with a disability or perceived disability
- Disability interferes with learning
- No Due Process protections; however, it is supported by the Rehabilitation Act of 1973
- Supports access to the learning environment in general education
- Can include services such as counseling or transportation
- Parent participation depends on the district
- Includes only accommodations

Social and Communication Challenges

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ASD Influences Learning Behaviors, including Social & Communication Challenges

• Students with ASD may struggle with social interaction and communication, affecting participation in group learning and peer collaboration.

Sensory Processing Differences

• Sensory sensitivities (e.g., to sound, light, touch) can impair classroom engagement and attention.

Behavioral Patterns & Focus

• Repetitive or fixated interests and executive functioning differences (e.g., planning, shifting focus) influence how students engage with instruction.

Sensory Processing Challenges

A better understanding of need can lead to more appropriate services and support.

- If all areas of need are identified, goals can be written that address these areas, and specific services and supports can be provided to address those needs.

- When there is more specificity as to the diagnosis, there may be **peer-reviewed interventions** available to address those needs. Peer-reviewed interventions provide guidance to practitioners and families about the most effective ways to improve learning outcomes.

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Accessing Special Education Services

Referrals and Evaluations







Related Disorders for Learning Disabilities

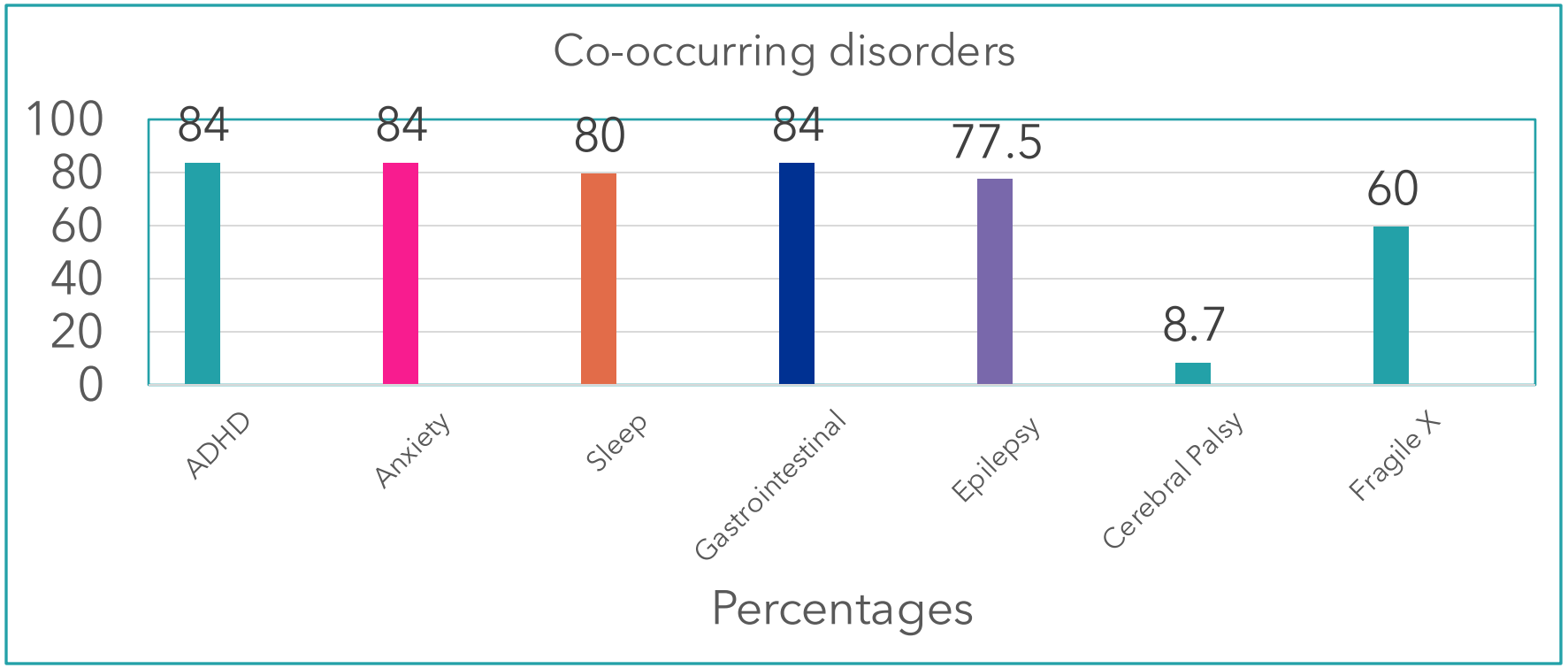
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There is a continuum of neurologically based disorders that are frequently found together. The basic concept is that if something impacts on the developing brain, resulting in an area or system being “wired differently,” it is possible that other areas might be involved as well.

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Autism and Co-occurring Disorders



Non-Percentage Conditions

- Sensory Processing differences
  - Sensitivity to light, sound, touch, food, textures
- Fragile X – approximately 30-60% of those with Fragile meet diagnostic criteria for ASD. Current statistics
- ASD and ADHD statistics show a higher prevalence of ADHD in boys
- ASD and Epilepsy show a higher predominance in girls than in boys.

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Learning Challenges







Sensory Challenges

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What are sensory challenges?

Differences in how a student **perceives** and **responds** to sensory input (e.g., sound, light, touch, movement). Students with sensory challenges may feel and showcase fear, anxiety, and disorientation, inability to ignore sounds or smells, feel overwhelmed, or display agitation. Sensory challenges can include **hypersensitivity** (over-responsiveness), **hyposensitivity** (under-responsiveness), or sensory-seeking behaviors, which may impact attention, behavior, and participation in the classroom.

Behavioral responses like: Elopement, crying, hands on ears, aggression

- Accommodations:
  - Fidgets, Noise-Reducing Headphones, Sensory Breaks, Extra Passing Time (for middle/ high school students)

Executive Functioning Challenges

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Executive Functioning skills are challenges in areas of those mental skills that help a student **plan, organize**, start tasks, **manage time**, remember instructions, and **regulate behavior**.

In IEPs, challenges may show up as difficulty with transitions, completing multi-step tasks, or staying on track.

Accommodations:

- Extra time on assignments/tests, written summaries, and notes
- Breaking assignments into smaller, manageable steps, with clear deadlines and step-by-step instructions
- Visual schedules/timers and weekly planners,
- Self-regulation: quiet space, sensory breaks

Visual and Auditory Processing Challenges

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Visual Processing

How the brain interprets and makes meaning from what is seen. Difficulties may include trouble recognizing patterns, reading social cues (like facial expressions), or processing written information efficiently.

- Accommodations: Written or verbal instructions, highlighted areas, breaks for fatigue

Auditory Processing

How the brain interprets and understands sounds, especially spoken language. Challenges may include difficulty following verbal directions, distinguishing sounds, or processing information in noisy environments.

- Accommodations: Visual schedules, preferential seating, graphic organizers

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Goals and Evidence Based Practices

- The IEP team writes measurable goals that stem directly from assessment data. **All goals should be S.M.A.R.T. Goals.**
- **Specific:** Clear and well-defined
- **Measurable:** To track progress to goal
- **Achievable:** Goals should be ambitious, yet fully attainable
- **Relevant:** Goals should align with the broader objectives & unique needs of the child
- **Time-bound:** Goals have a defined deadline for achievement or amending

Then:

- The team selects EBPs that research has shown to be effective for addressing the identified needs (we will talk about that a little later in this presentation).

Services and Supports



Often, the intervention written on the IEP is for them to have time with a Resource Teacher or spend time in a resource classroom.



This could be effective, but it is important to ask about what the teacher will be doing to address the needs that are identified in a student's assessments – what techniques, tools or methodologies they will use and why they think that this will help.

Service Providers

Who is overseeing the strategy and support services? Where? Individual vs. Group?

Areas: General Curriculum, SDC, Pull-out or Push-in Services

Speech and Language Pathologists

- provide support for students with communication challenges such as articulation, expressive, and receptive language skills.

Occupational and Physical Therapists:

- Provided to students needing help with motor skills and mobility

Service Providers

1:1 Aides

- Para-educators support children's IEP goals, ensure safety within the school environment, and help implement a Behavior Plans (BIP); Only offered if child requires this level of support.

AAC Specialists

- Provide support for children with limited or non-verbal communication skills, consult with parents on AAC devices for school/home collaboration

Common reasons for IEP Denial

Denials

A student's condition must have an adverse impact on a student's educational functioning in order for them to qualify for special education

May Overlook:

- Masking
- Executive functioning issues
- Social communication deficits

The **Special Education Rights and Responsibilities (SERR)** manual guides parents on eligibility, evaluation, dispute rights, and advocacy steps if IEPs are denied or inadequately implemented.

Independent Educational Evaluations

Parents can request mediation, due process hearings, or **Independent Educational Evaluations (IEEs)** if they disagree with eligibility decisions.

Behavioral Patterns and Focus

All behaviors occur because we get something out of them – they serve a purpose in communicating an underlying need.

Challenging behaviors often correlate with learning and communication challenges and may require proper assessments and intervention.

When behaviors are analyzed, the reason behind the behavior and the reasons they continue to occur are called a ***Function of Behavior.***

Functions of behavior generally fall into one of four categories: **Escape, Attention, Sensory, and Access to Tangibles.** They define the purposes of behavior, including those considered dysfunctional

Behavior Intervention Plans (BIPs)

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Behavior Challenges:

A **behavior plan s**erves as a roadmap for modifying the behaviors of children whose actions affect their learning. Officially, the Behavior Intervention Plan (BIP) outlines the intervention strategy and ensures that everyone involved with the child responds consistently to behaviors. This benefits teachers, staff, parents, and caregivers by providing a clear set of behavioral objectives and strategies for all to follow.

When concerned: **Ask for a Functional Behavior Assessment (FBA).** This assessment will provide data not only to learn the function of the behavior but also to help determine which EBP is the best practice to support the student.

Independent Educational Evaluations

If the school district denies an evaluation, an IEP or the parent feels that the evaluation was inadequate, incomplete or inaccurate, a parent can request an IEE *at district expense*.

- An Independent Educational Evaluation (IEE) is an evaluation of your child by a qualified professional **not employed by the school district,** usually to get a second opinion on the school's assessment.
- A **request for an IEE must be submitted in writing** and clearly state that you disagree with the assessment(s).
- The school district must either pay for the IEE or file for due process and request a hearing to defend its evaluation

*The school district must respond without "unnecessary delay." Unreasonable delays may provide cause to file a compliance complaint

Evidence Based Practices



Evidence Based Practices

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What is an Evidence-Based Practice?

NCAEP definition of an EBP: "Focused intervention practices that have **evidence of efficacy in promoting positive outcomes** for learners with Autism."

Evidence-Based Practices (EBPs) are **instructional strategies, interventions and supports that have been verified** through rigorous research to produce positive outcomes for students – including those with disabilities like Autism Spectrum Disorder (ASD).

EBP Implementation

Once **assessed** and **found eligible** for special education services, the IEP team writes **measurable goals** that are directly derived from the gathered **data**.

Then:

- The team selects EBPs that research has shown to be **effective** for addressing the identified needs
- The IEP includes **how** these practices will be **implemented** and **who is responsible**
- Example: A student with ASD is having difficulty initiating communication.
- "Given a visual cue, the student will independently request a preferred item using a multi-modal communication (AAC) device in 3 out of 5 opportunities."
- **EVB used: Functional Communication Training and Visual Supports**
- **Responsible: SLP, AAC specialist.**

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AAC

Augmentative & Alternative Communication (AAC) is an EBP intervention using and/or teaching the use of a system of **multi-modal communication** that is not verbal/vocal, which can be aided (e.g., device, communication book) or unaided (e.g., sign language).

AAC Evidence Based Practice: ASL



ASL is a complete natural language comprised **of facial expressions and hand/finger movements** with the same linguistic characteristics as spoken language, often used by the deaf/hard-of-hearing community.

AAC Evidence Based Practice: PECS

Picture Exchange Communication System (PECS) – a formal evidence-based system of **augmentative communication** using picture exchange of standard images that represent words.



AAC Evidence Based Practice: PECS

Object choice board, choice board using photographs of objects/events, communication book using photographs, simple communication board using photographs, or complex communication book using symbols and letters.



AAC Evidence Based Practice: PECS

A **high-tech AAC** option that allows a person to communicate using **electronic based application** that generates an electronic voice



Takeaway: AAC Devices

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- Supports – not hinders – natural speech development
- Increases expressive and receptive vocabulary
- Promotes longer utterances and emerging grammar in preschool children
- Reduces frustration by giving children a reliable way to communicate

AAC provides access to communication while speech develops – it does not replace the opportunity to talk.

Evidence Based Practice: Modeling

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Strategy

- Modeling is a strategy that helps individual learners acquire new skills through visual demonstration.
- A person learns a skill or behavior by watching someone correctly perform the task or behavior
- Examples:
  - Folding clothes
  - Hand washing
  - Engaging in play

Benefits

- Can be used BEFORE you expect to perform a skill or behavior, as a prompt or priming method to provide extra support in areas of:
  - Academics
  - Communication
  - Social Greetings & Scripts
  - Development of Empathy
  - Adaptive and Daily Functioning

Modeling

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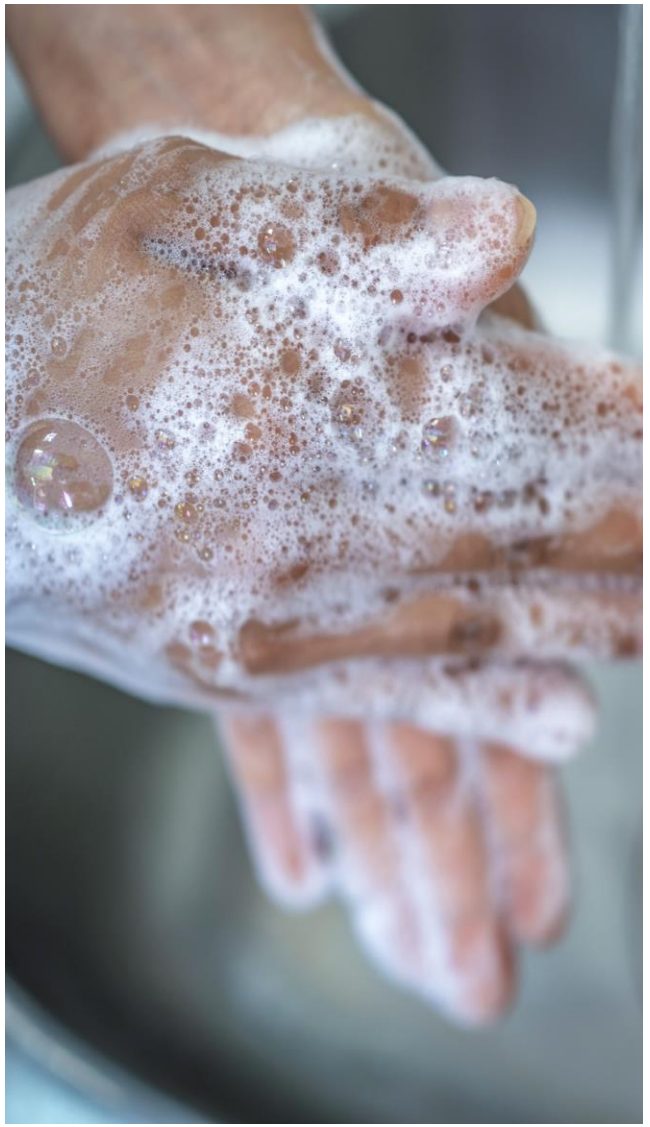
Two Types of Modeling Evidence-Based Practices

Primer (Demonstration First)

- Used to teach a new skill by providing an example first
- Steps:
  - Cue the learner to watch the model
  - Demonstrate the target skill
  - Allow time for the learner to imitate

Prompt (Used When Needed)

- Used when the learner does not perform the skill independently
- Steps:
  - Direct the learner to perform the skill
  - If the learner does not respond, model the target skill



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Social Narratives and Social Stories

What are Social Narratives and Social Stories?

Social Narratives are the broader EBP category, while Social Stories are specific types of social narratives developed by Carol Grey. They have defined structures and follow strict guidelines for true fidelity.

Social Stories

Social Stories aim to provide individuals with a better understanding of social contexts, expectations, and behaviors.

They are particularly beneficial for children with autism, helping them to:

- Understand social norms and expectations.
- Reduce anxiety in unfamiliar situations.
- Promote positive behavior and emotional regulation.

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Social Stories

When My Classroom Feels Busy

Example:

Sometimes my classroom feels loud and busy.
Many students are learning at the same time.
When the room feels loud, my body might feel tight or uncomfortable.
Other students may not notice the noise the same way I do.
I can use my headphones or ask for a quiet break.
Taking a break helps my body feel calm.
When I feel calm, I can learn better.

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Social Stories

Asking for Help in Class

Example:

Sometimes my work feels hard.
Everyone needs help sometimes.
My teacher wants me to understand my work.
When I raise my hand or use my help card, my teacher knows I need support.
Asking for help helps me learn new things.
It is okay to ask for help.

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Questions?







References and Resources

SERR – Special Education Rights and Responsibilities – This manual explains how to become eligible for special education, how to request and advocate for special education services, and what to do if you disagree with school districts.

C.A.P.T.A.I.N.

California Autism Professional Training and Information Network. Provides training, support, and EBP guidance for families, professionals, and educators working with individuals with ASD. https://www.captain.ca.gov/

AFIRM: ASD EBP Modules – Autism Focused Intervention Resources and Modules

Modules – AFIRM

Nowell, S., Sam, A., Waters, V., Dees, R., & AFIRM Team (2022). *Augmentative & Alternative Communication*. The University of North Carolina at Chapel Hill, Frank Porter Graham Child Development Institute, Autism Focused Intervention Resources and Modules. https://afirm.fpg.unc.edu

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Thank you

