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AMA Teaching Tool Kit

*Take Action, don't
wait! AMA teaching is
here for you.*

It can be scary to think there might be something different going on with your child's development, but you are not alone. The purpose of this tool kit is to provide you with specific resources and tools to help guide you on the journey from your first concern to action.



AMA Teaching does not provide medical or legal advice or services. Rather, AMA Teaching provides general information about autism as a service to the community. The information provided in this tool kit is not a recommendation, referral or endorsement of any resource, therapeutic method, or service provider and does not replace the advice of medical, legal or educational professionals. AMA Teaching has not validated and is not responsible for any information or services provided by third parties. You are urged to use independent judgment and request references when considering any resource associated with the provision of services related to autism.

Take Action: 4 things you can do right now

Here are four things you can do right now if you have a concern:

1. Don't wait. If you ever have concerns, talk to your health care provider. A health care provider can be a pediatrician, family doctor, community health care worker, specialist or a trusted, knowledgeable professional in your community.
2. Be prepared for your conversation with your health care provider. See what other children the same age is doing and note how your child is different. Take notes about your child's development based on the milestones included in this kit. Prepare in advance for your visit with your health care provider.
3. Start the intervention process right away. Your child can receive a free evaluation without a formal diagnosis by contacting Early Intervention services through your state.
4. Contact the Autism Speaks Autism Response Team for assistance.

Call: 1-888-288-4762 (In Spanish: 1-888-772-9050) Email: familyservices@autismspeaks.org

What are the signs of Autism?

Learn the Signs

The autism diagnosis age and intensity of autism's early signs vary widely. Some infants show hints in their first months. In others, behaviors become obvious as late as age 2 or 3.

Not all children with autism show all the signs. Many children who *don't* have autism show a few. **That's why professional evaluation is crucial.**

The following may indicate your child is at risk for an autism spectrum disorder. If your child exhibits any of the following, ask your pediatrician or family doctor for an evaluation right away:

By 6 months

- Few or no big smiles or other warm, joyful and engaging expressions
- Limited or no eye contact

By 9 months

- Little or no back-and-forth sharing of sounds, smiles or other facial expressions

By 12 months

- Little or no babbling
- Little or no back-and-forth gestures such as pointing, showing, reaching or waving
- Little or no response to name

By 16 months

- Very few or no words

By 24 months

- Very few or no meaningful, two-word phrases (not including imitating or repeating)

At any age

- Loss of previously acquired speech, babbling or social skills
- Avoidance of eye contact
- Persistent preference for solitude
- Difficulty understanding other people's feelings
- Delayed language development
- Persistent repetition of words or phrases (echolalia)
- Resistance to minor changes in routine or surroundings
- Restricted interests
- Repetitive behaviors (flapping, rocking, spinning, etc.)
- Unusual and intense reactions to sounds, smells, tastes, textures, lights

*Visiting your
HealthCare Provider*

If you have concerns, get your child screened and contact your healthcare provider

The [M-CHAT \(Modified Checklist for Autism in Toddlers™\)](#) can help you determine if a professional should evaluate your child. This simple online autism screen, available below, takes only a few minutes. If the answers suggest your child has a high probability for autism, please consult with your child's doctor. Likewise, if you have any other concerns about your child's development, don't wait. Speak to your doctor now about screening your child for autism.

Please fill out the following about how your child usually is. Please try to answer every question. If the behavior is rare (e.g., you've seen it once or twice), please answer as if he or she does not do it.

1. Does your child enjoy being swung, bounced on your knee, etc.? Yes No
2. Does your child take an interest in other children? Yes No
3. Does your child like climbing on things, such as upstairs? Yes No
4. Does your child enjoy playing peek-a-boo/hide-and-seek? Yes No

5. Does your child ever pretend, for example, to talk on the phone or take care of a doll or pretend other things? Yes No
6. Does your child ever use his or her index finger to point, to ask for something? Yes No
7. Does your child ever use his/her index finger to point, to indicate interest in something? Yes No
8. Can your child play properly with toys (e.g., cars or bricks) without just mouthing, fiddling or dropping them? Yes No
9. Does your child ever bring objects over to you (parent) to show you something? Yes No
10. Does your child look you in the eye for more than a second or two? Yes No
11. Does your child ever seem oversensitive to noise?(e.g., plugging ears) Yes No
12. Does your child smile in response to your face or your smile? Yes No
13. Does your child imitate you? (e.g., you make a face-will your child imitate it?) Yes No
14. Does your child respond to his/her name when you call? Yes No
15. If you point at a toy across the room, does your child look at it? Yes No
16. Does your child walk? Yes No
17. Does your child look at things you are looking at? Yes No
18. Does your child make unusual finger movements near his/her face? Yes No
19. Does your child try to attract your attention to his/her own activity? Yes No
20. Have you ever wondered if your child is deaf? Yes No
21. Does your child understand what people say? Yes No
22. Does your child sometimes stare at nothing or wander with no purpose? Yes No
23. Does your child look at your face to check your reaction when faced with something unfamiliar? Yes No

Please score 1 point if you answered “NO” to all questions EXCEPT 2, 5, and 12 or if you answered “YES” to questions 2, 5, or 12. If your total score is 0 – 2, and your child is younger than 24 months, screen again after second birthday. If your total score is 3 or higher, your child needs a follow-up interview with your provider or health care professional. Even if your total score is less than 3, and you still have concerns about your child, bring this completed form and your questions to your provider for a more in-depth evaluation or referral.

Info to bring to your healthcare provider

Answer the questions below to help you discuss your concerns. You should also fill out the M-CHAT-R so you can discuss the results with your child’s health care provider. Bring all of these things with you to the appointment.

1. What are your concerns?
2. When do you see these concerns?

3. Has anyone ever told you he/she has concerns about your child? If so, what has he/she said?
4. Does your child exhibit any unusual behaviors? If so, what are they?
5. Do you think your child hears well? If not, explain.
6. How many words does your child have?
7. Do you understand what he/she says?
8. Does your child have any medical problems? If so, what are they?

*What if they say
“Autism?”*

What if its Autism?

Step 1: Act early If your child has been recently diagnosed with autism, you are probably feeling very overwhelmed. But there are many resources out there for you and your family and those resources and supports are growing every day!

Why is it important to act early? Early attention to improving the core behavioral symptoms of autism will give your child – and the rest of your family – several important benefits. Among other benefits, a good Early Intervention program will:

1. Build on his or her strengths to teach new skills and improve areas of weaknesses Early intervention is a way to teach your child some things that he or she may need extra help learning. For example, using words to talk, playing with other children or dealing with changes.
2. Provide you with information that will help you better understand your child’s behavior and needs
3. Offer resources, support and training that will enable you to work and play with your child more effectively
4. Improve the outcome for your child If your child receives a diagnosis, reach out for services as soon as you can. It is never too early to act on your concerns or to reach out for help!

Step 2: Access Early Interventions Services.

Early Intervention services can vary widely from state to state and region to region. However, all services should address your child’s unique needs and should not be limited to what is currently available or customary in your region. Early intensive behavioral intervention involves a child’s entire family working closely with a team of professionals. In some early intervention programs, therapists come into the home to deliver services. These services can include parent training with the parent leading therapy sessions under the supervision of the therapist. Other programs deliver therapy in a specialized center, classroom or preschool. Depending on your child’s needs, his or her early intervention services may include, among others: - Family training, counseling and home visits - Speech, occupational and physical therapy - A multidisciplinary team that can include a physician, speech-language pathologist, occupational therapist, physical

therapist and other professionals Objective scientific studies have confirmed the benefits of two methods of comprehensive behavioral early intervention: the Lovaas Model based on Applied Behavior Analysis (ABA) and the Early Start Denver Model. Parents and therapists also report success with other commonly used behavioral therapies, including Floortime, Pivotal Response Therapy and Verbal Behavior Therapy.

Have more questions or need assistance? Please contact AMA Teaching for information, resources and tools.

www.AMATeaching.com

Info.AMAteaching@gmail.com

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