Classroom Strategies for Students with Deafness and Autism

The following are suggestions for Teachers of the Deaf who have students in their class with ASD:

- Towards the end of all activities, give five and one minute warnings that they will soon be finished, especially if the activity is something the child enjoys (Dunn, Buron, & Wolfberg, 2008).
- Keep routines consistent for the child, minimize changes and make sure all teachers and staff members are aware of the routine. In order to make sure the child eases in to changes that may occur, teachers may want to use the following tip: consider having a Change Board (a designated place in the classroom to post upcoming changes to the schedule) in the classroom for older students. This board should be updated by the teacher, and the child should be prompted to look at changes for the day. If problem behaviors occur, the teacher can clearly state that the changes were on the board.
- Post schedules and expectations to reduce power struggles.
- Provide a space in the classroom that is completely free of all stimuli. Children with ASD are easily overwhelmed and may need time without any external distraction to calm themselves.
- Communicate daily with parents. "Tell the parents about their child's challenges and successes in school." Facilitate the parent communicating events that may impact their child's school performance, for example, lack of sleep, change in diet, or new medication).
- Use a three-step prompting sequence when making demands; Tell the child, show the child, and then assist the child in completing a task. Provide rewards when the child independently completes a task.
- Incorporate rewards throughout the day for positive behaviors. The following is another tip teachers can use knowing that children with ASD tend to fixate on one object; have options available and allow the child to pick. Monitor access to items that are overly reinforcing and could lead to challenges when removed. Seek feed back from parents about new interests, and make those interests work in the classroom. (This works for all students- being able to relate the required learning material to what the students can relate to.)
- Keep track of data related to any challenging behaviors whenever possible. Be explicit when documenting what occurred before the behavior (antecedent), during the behavior (exactly what the child did), and after the behavior (consequence).


**Intervention Strategies to Promote Language**

- **PECS**

PECS is: Picture Exchange Communication System

Picture boards, cue cards, photos, drawings. All of this can be used to help a child communicate effectively and easily and Inexpensive. It is appropriate for all ages Easily used in many different locations (school and home) It can be taught with little training to family and other caregivers. However, it could be cumbersome to transport multiple pictures to various locations (ex. Vacation, forgot to bring different food pictures!) For examples of pecs go to: PECS

Goal: Is to help nonverbal children or children with language difficulties to access communication

- **Social Stories**

Social Stories are: Short stories that explain common occurrences with matching social cues, and what and why the situation happens. The goal: these stories are designed to prepare an individual with information, strategies and a well thought out process of how to deal effectively with an event. They are used by: Select a behavior that would increase a positive social interaction for that child, match a social story with the target behavior, help the child generalize the story across many situation with various activities, reread the story, gradually fade the story out after the you have seen the child's behavior change.


- **Sensory Integration Therapy**
Sensory Integration Therapy is a type of therapy that focuses on improving abilities to take in sensory information and process the information productively. The goal: Sensory integration therapy is designed to help the child develop more appropriate sensory input processing and responses and lessen self- stimulating behaviors or other sensory related awkward behaviors. During sensory integration therapy, the child interacts one-on-one with the occupational therapist and performs an activity that combines sensory input with motion. This usually looks like "play time" and can be a collection of "games" that help children better collect and process sensory information. Sensory Integration Therapy is important for some children who need a re-training of their general motor skills. This type of therapy can take on the form of gymnastics, movement education, and adaptive physical education. The child is led through a series of exercises that help them respond accurately and appropriately to sensory data.

**Sensory Integration Therapy**

**Autism Therapies**

**Typical accommodations that may need to be made:**

- Transitions
- Classroom design and structure
- Presentation of assignments, instruction and testing
- Note the student's response to transition between activities. Is s/he disoriented, distracted, or overwhelmed visually or auditorily when moving or preparing for new activity? Is s/he agitated or anxious during the change? If so, consider these questions in addressing this difficulty