

Larry Martin Davis



# ABC's of Autism and Behavior:

**Anxiety, Behavior,  
and Calming  
strategies**

Plus Special Education:  
IEP / 504 Strategies

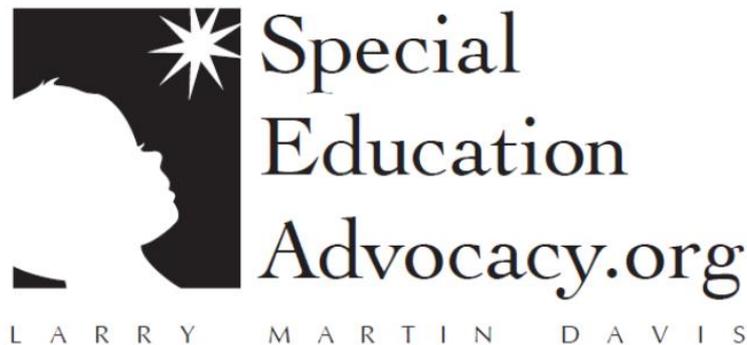
# ABC's of Autism and Behavior: anxiety, behavior, calming strategies

Purpose of today's presentation:

- Information
- Insight
- Inspiration
- Institute of Heartmath resources
  
- **Plus a bonus mini-course:  
Special Education Advocacy "Insiders Guide"**

# My background ...

- Principal: 10 years
- Teacher: 15 years
- Coordinator: 5 years
- Educ. Advocate: 15 years
- Trainer / Presenter: 10 years
- Author: 2 books
- Radio Show Host: 2 programs
- Father: 22 years



What about yours?

So what does the Autism puzzle look like in your life?



# Autism: Creating Common Understanding:

## What does “Autism” mean to you?

### DSM V: **Autism Spectrum Diagnostic Criteria: SOCIAL COMMUNICATION**

A. Persistent deficits in social communication and social interaction across multiple contexts, as manifested by the following, currently or by history (examples are illustrative, not exhaustive, see text):

- 1. Deficits in social-emotional reciprocity, ranging, for example, from abnormal social approach and failure of normal back-and-forth conversation; to reduced sharing of interests, emotions, or affect; to failure to initiate or respond to social interactions.
- 2. Deficits in nonverbal communicative behaviors used for social interaction, ranging, for example, from poorly integrated verbal and nonverbal communication; to abnormalities in eye contact and body language or deficits in understanding and use of gestures; to a total lack of facial expressions and nonverbal communication.
- 3. Deficits in developing, maintaining, and understanding relationships, ranging, for example, from difficulties adjusting behavior to suit various social contexts; to difficulties in sharing imaginative play or in making friends; to absence of interest in peers

# Autism: Creating Common Understanding:

## DSM V: **Autism Spectrum Diagnostic Criteria: BEHAVIOR, INTERESTS, ACTIVITIES**

- B. Restricted, repetitive patterns of behavior, interests, or activities, as manifested by at least two of the following, currently or by history (examples are illustrative, not exhaustive; see text)
  - 1. Stereotyped or repetitive motor movements, use of objects, or speech (e.g., simple motor stereotypies, lining up toys or flipping objects, echolalia, idiosyncratic phrases).
  - 2. Insistence on sameness, inflexible adherence to routines, or ritualized patterns or verbal nonverbal behavior (e.g., extreme distress at small changes, difficulties with transitions, rigid thinking patterns, greeting rituals, need to take same route or eat food every day).
  - 3. Highly restricted, fixated interests that are abnormal in intensity or focus (e.g., strong attachment to or preoccupation with unusual objects, excessively circumscribed or perseverative interest).
  - 4. Hyper- or hyporeactivity to sensory input or unusual interests in sensory aspects of the environment (e.g., apparent indifference to pain/temperature, adverse response to specific sounds or textures, excessive smelling or touching of objects, visual fascination with lights or movement).

# Autism: Creating Common Understanding:

## DSM V: **Autism Spectrum Diagnostic Criteria: Early Development, Impairment, and Social Pragmatic Community Disorder**

- C. Symptoms must be present in the early developmental period (but may not become fully manifest until social demands exceed limited capacities, or may be masked by learned strategies in later life).
- D. Symptoms cause clinically significant impairment in social, occupational, or other important areas of current functioning.
- E. These disturbances are not better explained by intellectual disability (intellectual developmental disorder) or global developmental delay. Intellectual disability and autism spectrum disorder frequently co-occur; to make comorbid diagnoses of autism spectrum disorder and intellectual disability, social communication should be below that expected for general developmental level.
- **Note:** Individuals with a well-established DSM-IV diagnosis of autistic disorder, Asperger's disorder, or pervasive developmental disorder not otherwise specified should be given the diagnosis of autism spectrum disorder. **Individuals who have marked deficits in social communication, but whose symptoms do not otherwise meet criteria for autism spectrum disorder, should be evaluated for social (pragmatic) communication disorder.**

# Social Pragmatic Communication:

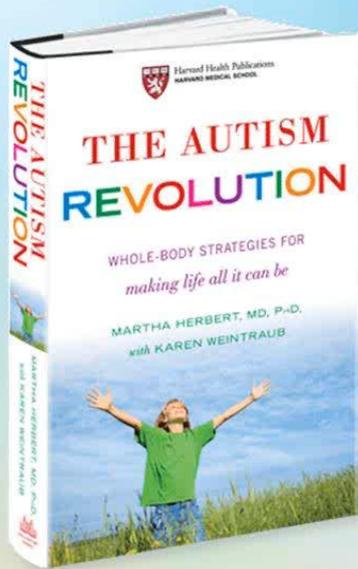
- DSM V: **SOCIAL PRAGMATIC COMMUNICATION** Diagnostic Criteria:
  - A. Persistent difficulties in the **social use of verbal and nonverbal communication** as manifested by all of the following:
    - 1. **Deficits in using communication for social purposes**, such as greeting and sharing information, in a manner that is appropriate for the social context.
    - 2. **Impairment of the ability to change communication to match context or the needs of the listener**, such as speaking differently in a classroom than on the playground, talking differently to a child than to an adult, and avoiding use of overly formal language.
    - 3. **Difficulties following rules for conversation and storytelling**, such as taking turns in conversation, rephrasing when misunderstood, and knowing how to use verbal and nonverbal signals to regulate interaction.
    - 4. **Difficulties understanding what is not explicitly stated** (e.g., making inferences) and nonliteral or ambiguous meanings of language (e.g., idioms, humor, metaphors, multiple meanings that depend on the context for interpretation).
  - B. **The deficits result in functional limitations** in effective communication, social participation, social relationships, academic achievement, or occupational performance, individually or in combination.
  - C. The onset of the symptoms is in the early developmental period (but deficits may not become fully manifest until social communication demands exceed limited capacities).

# Autism: From Clinical Perspective:



INSTITUTE OF HEARTMATH<sup>®</sup>  
Connecting Hearts and Minds

## THE AUTISM REVOLUTION



How Total Load Creates Autism  
Every Day: Chronic, Persistent  
and Changeable Features

Featuring  
Martha Herbert  
and Jeff Goelitz



[www.AutismRevolution.org](http://www.AutismRevolution.org)  
[www.autismWHYandHOW.org](http://www.autismWHYandHOW.org)

# Traditional Paradigm: Fix the Symptom ... “defined by behavior”

Hyper Focus

Social Language  
& Skill Deficits



**INCONVENIENCE\***  
\* behavior replacement

Sensory  
**(Foundation)**

# Old Paradigm: Cause of Autism

Vaccinations

Environmental

**“Disease”**

Genetics



# Autism: The Davis Perspective

- Autism is not a disease; *though not feeling at ease is an issue.*
- Not caused by vaccinations; *though they may impact symptoms.*
- Highly Sensitive individuals; *living in an overwhelming - insensitive environment including:*
- Often creating a sensory response: Sensory = Anxiety
- Often easily influenced by foods, medications, and other sensory related experiences: *(taste, touch, smell, feel, and see)*
- Most notably, inspired and moved by the “gift within” ... *entelechy!*

**How does this perspective resonate for you?**

# New Paradigm: Holistic Approach ...

Entelechy

Maslow's Hierarchy:



Executive Functioning / Processing / Sensory

# Anxiety-Stress Pattern:

Stress (often Sensory) = Anxiety

Anxiety = Creates Systemic Fear

Fear / Worry / Panic = Behaviors

Behaviors = Self Management /  
Compensatory Tools

# Anxiety-Stress: Amygala

## Amygdala Enlarged in Young Autistic Children

By John Gever, Senior Editor, MedPage Today Published: May 04, 2009

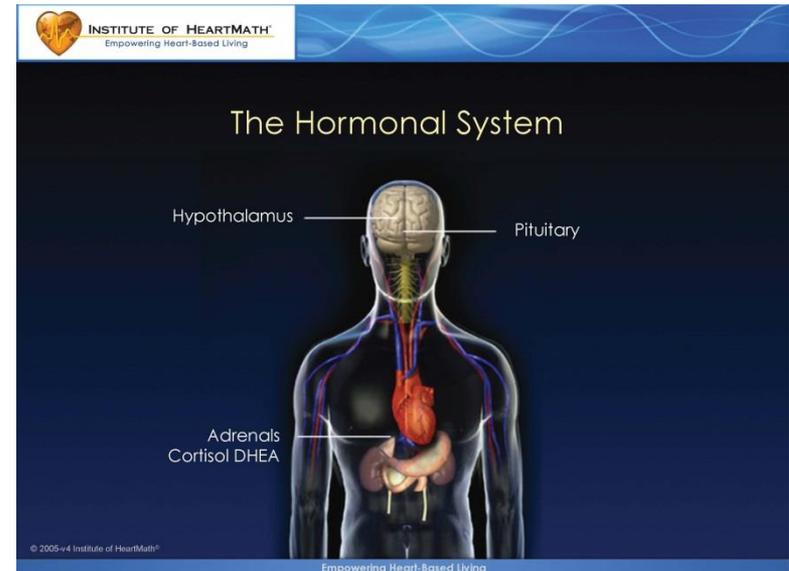
Reviewed by [Zalman S. Agus, MD](#); Emeritus Professor  
University of Pennsylvania School of Medicine.

WHEELING, W.Va., May 4 -- Amygdala size was associated with both autistic symptoms and attention to other people's eyes in young children, researchers said.

Among 50 children diagnosed with autism before age 2, left and right amygdala volumes were 15% and 19% larger, respectively, than in 33 non-autistic children at two time points up to age 4 ( $P \leq 0.005$ ), according Joseph Piven, M.D., of the University of North Carolina in Chapel Hill, N.C., and colleagues.

Their findings appeared in the May *Archives of General Psychiatry*.

# Anxiety-Stress: “Overwhelmed” Mind-Body Connection



# Anxiety-Stress: Typical Compensatory Behaviors

## Flight

- Avoidance
- Transitions
- Depression
- Shut down

## Fight

- Oppositional
- Melt-downs
- Insomnia
- Self Injury

## Interventions:

### External:

- Accommodations;
  - Seating' environment modifications
  - Sensory breaks
  - Schedule; predictable & familiar
  - Transition support
  - Sensory supports

### Internal:

- Specially Designed Instruction
  - Social Language Skills
  - Emotional Self Regulation

# New Paradigm: Holistic Approach ...

Entelechy

Maslow's Hierarchy:



**“OVERWHELMED”  
ANXIETY**

Executive Functioning / Processing / Sensory

# Maslow's Hierarchy:

## Symptoms:

- Stress
- Anxiety
- Worry
- Depression

22% of children; poverty (1)

33% raised w/o father (2)

21% of foster children; attachment (3)

25% of foster children; behavior (3)

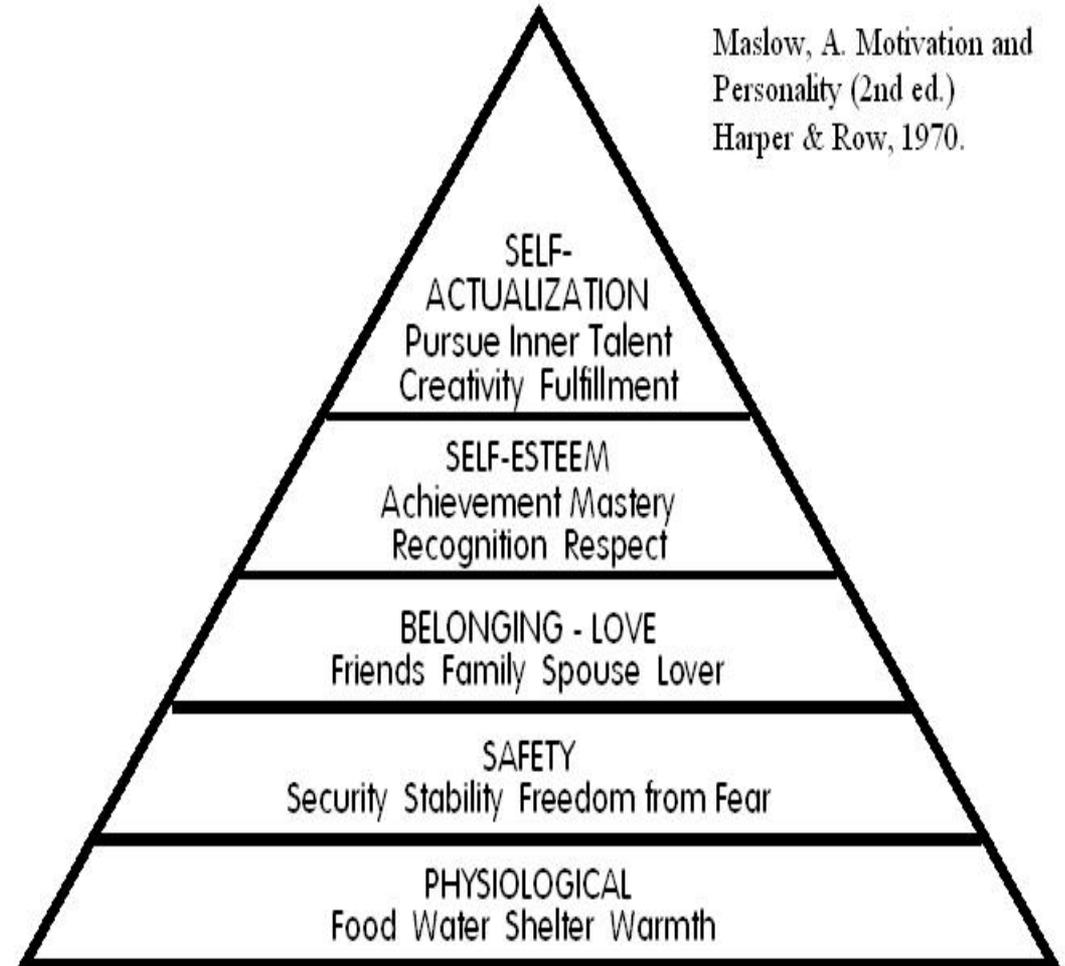
1 USDA

2 2010 Census

3 DSHS (adoption)

## ABRAHAM MASLOW HIERARCHY OF NEEDS

Maslow, A. Motivation and  
Personality (2nd ed.)  
Harper & Row, 1970.



# Brain-Based Learning

## Addressing Our Needs: Maslow Comes to Life for Educators and Students

February 6, 2014 | [Lori Desautels](#)

### Tier One: Meeting Physiological Needs in the Classroom:

- **Water bottles and water breaks.**
- **Focused attention practices:** These practices, involving breathing, imagery and sound, last one and a half to two minutes as students close their eyes or focus on an object of attention, practicing quieting their minds from the free-flowing thoughts that bombard our thinking every day.
- **Physical surroundings:** These include room arrangement, color, temperature, plants, etc.
- **Food:** Provide a mixed snack bar and have the class designate times to grab some energy bites and continue working.
- **Instrumental Music.**
- **Questions to Ask Myself**
  - What do I need?
  - Am I tired?
  - Am I hungry?
  - How much water have I had over the past 24 hours? Is it enough?
  - What resources (people, activities or experiences) could assist me in reaching my physiological and psychological goals?

### Tier Two: Stability, Safety and Security, Freedom from Fear

- **Attitude:** Sometimes it is enough to have a personal affirmation that creates feelings of safety and security. For example: "Right now in this moment I am safe. I am breathing, I am aware, awake and I can think."
- **Worry drop box:** As you enter the room, drop a written concern in a box situated by the door. Research shows that writing out our concerns and worries frees up the working memory and relieves anxiety.
- **Pin-ups:** The class assigns various students to physically post a compliment or affirmation each day. We all need to feel validated and often lose sight of our strengths and talents because the brain is wired with a negative bias. These pin-ups help us focus on positive experiences and behaviors instead of faults and mistakes.
- **Common experiences:** Develop class guidelines together. Create a class blog. Invite outside speakers that promote service and safety: police officers, counselors, former students who have risen above difficult situations, etc.

# Brain-Based Learning

## Addressing Our Needs: Maslow Comes to Life for Educators and Students

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### Tier Three: Belonging and Love

- **Classroom service project.**
- **Partnered work.**
- **Celebrations:** Create special and celebratory days all year long: birthdays, VIP days, strength day, progress days, colorful days, etc.
- **Working together:** Assign these roles within the class:
  - Listener
  - Recorder of feelings and thoughts
  - Small group of decision-makers
  - Student who "cares for" the teacher, office staff and other students
  - Poetry reader
  - Designer of classroom decorations
  - Gatekeeper who checks for disputes and conflicts
- **Community circle:** For 3-10 minutes at the beginning and ending of class, share a time where empathy is defined, discussed and brought to life. You might also share movie clips, personal narratives, or a story to jumpstart the day.
- **Identity:** A classroom theme, flag, song, flower and animal totem.
- **Questions to Ask Myself**
  - How do I handle negative situations? When these situations occur, what do I typically say to myself?
  - What statement would encourage me?
  - What are three negative emotions I feel most often?
  - What are three positive emotions I feel often or sometimes?

### Tier Four: Achievement, Recognition and Respect of Mastery, Self-Esteem

- **Expert Day:** Students get to demonstrate personal expertise.
- **Career Day:** Bring in college students and community members to share the possibilities of academic and professional success following high school.
- **Display skills as a class:** Create and design quizzes, assignments and instruction for students in other classes and grades.
- **Small Goals I Am Mastering**
  - Work completion
  - Dialogued about frustrations
  - Stayed focused on assignments
  - Showed respect and compassion for others
  - Regrouped and continued to work after a frustrating time
  - Helped another student or teacher
  - Contributed ideas and suggestions to a conversation
  - Used positive language in describing a need
  - Self-reflected about my daily work and interactions
- **Questions to Ask Myself**
  - What statement would encourage me?
  - Who are my heroes? What character traits do I admire that make them my heroes?
  - How will I know I am on the right track? What will tell me if I stray from pursuing my goals?
  - What are my strengths?
  - What are my challenges?
  - How will I focus on these strengths knowing that my thoughts and feelings drive all my words and actions?

# Brain-Based Learning

## Addressing Our Needs: Maslow Comes to Life for Educators and Students

February 6, 2014 | [Lori Desautels](#)

### **Tier Five: Self-Actualization and Self-Fulfillment Needs**

- This is level of self-evaluation related to service. We begin to explore and model, designing, evaluating and analyzing information outside of our own basic needs, serving others. To become creative thinkers, we have to begin discovering the problem, not just coming up with a solution. In this tier, students become self-assessors and self-reflectors. They are able to see and understand how their actions, thoughts and feelings affect all lives.
- **Questions to Ask Myself**
  - What is my purpose in life?
  - What are the challenges in reaching my purpose and the lives of others?
  - How can I serve the world?
  - Why is there conflict and war? What can I do? What can we do?

For more information on this tool or other related resources:

<http://www.edutopia.org/blog/addressing-our-needs-maslow-hierarchy-lori-desautels>

# Executive Functioning:

## Executive Functioning:

- **Inhibitory Control: transitions / self regulation**
- **Non-Working Visual Memory: hindsight / foresight**
- **Verbal Working Memory: auditory memory**
- **Emotional Control: emotional roller coaster / manic responses**
- **Planning and Problem Solving: cause & effect / organization**

“Research shows that **depression** and **stress** both have major impact on executive functioning. Dr. Denckla explains **anxiety** can mimic ADHD/executive dysfunction, causing too much dopamine to flood the brain, causing a disconnect in the frontal lobes central executive function from other brain functions.”

Executive Functioning"  
New Research About Familiar Behavior  
A Report from the Recent IECA Conference  
By Loi Eberle, M.A., Educational Consultant

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## Standardized Measures To Test Executive Functions:

**Behavior Rating Index of Executive Function (BRIEF):** Designed for students ages 5-18

**Child Behavior Checklist – Teacher Report Form (CBCL):** This is a general measure of behavior that taps into social emotional functioning and attention

**NEPSYII (Korkman, Kirk, Kemp, 2007)** An individually administered assessment battery for students ages 3 to 4 and 5-16,

**WISC-IV** Advanced Clinical Interpretation (Weiss, Saklofske, Prifitera, Holdnack, 2003); Four sub-tests including: Verbal, Perceptual Reasoning, Processing Speed, and Working Memory.

# Executive Functioning:

## **Accommodations:**

### **Change the physical or social environment by:**

- Changing the level of background noise.
- Changing the level of visual stimulation.
- Changing the physical restrictions (walls, room size etc.).
- Using lists or visual reminders.

### **Changing the amount of organizational structures.**

- Change the task.
- Change the cues or change the ways they are provided.

### **Classroom wide interventions**

- Use routines to help provide organizational structure.
- Beginning of day routine.
- End of day routine.
- Routines for lunch, etc.

### **Provide an organizational structure by:**

- Giving specific directions
  - Monitoring performance
  - Encouraging, motivating and giving feedback
  - Problem solving when something doesn't work well
  - Determining when the task is finished.
- 
- **Use the Big 5:**
    - When to start.
    - How much to do.
    - How to do it.
    - What finished looks like.
    - What to do next.

# Executive Functioning:

## **Specially Designed Instruction:**

### **Teaching through coaching:**

- Set goals.
- Hold daily coaching sessions using Goal, Plan, Predict, Do, Review.
- Check on student's goals.
- Check on student's plan for accomplishing tasks.
  - Predict task outcome,
  - account for obstacles.
  - Do the task.
  - Review to see how the plan worked for the student.

### **Quality checking**

- Check on completion of planned tasks.
- Check on application of time and effort to the task.
- Student responsibility for today's plan.
- Check on long-term projects

### **Explicitly teach the skill needed in an applied setting.**

- Fade support as soon as the student is able to accomplish the skills.
- Use external reinforcements only as necessary.
- To assist in generalization of skills, explicitly teach the skill needed in other settings.
- Guide practice of skill through group coaching or mentoring.
- Fade guidance as skill becomes internalized and guidance is no longer needed. -

# Entelechy:

## The Spirit/force within: A positive perspective

### o en tel e chy

In the philosophy of Aristotle:

The condition of a thing whose essence is fully realized; actuality.

**a vital force that directs  
an organism toward  
self-fulfillment.**

***“There is a vitality, a life force, a quickening that is translated through you into action, and because there is only one of you in all time, this expression is unique.***

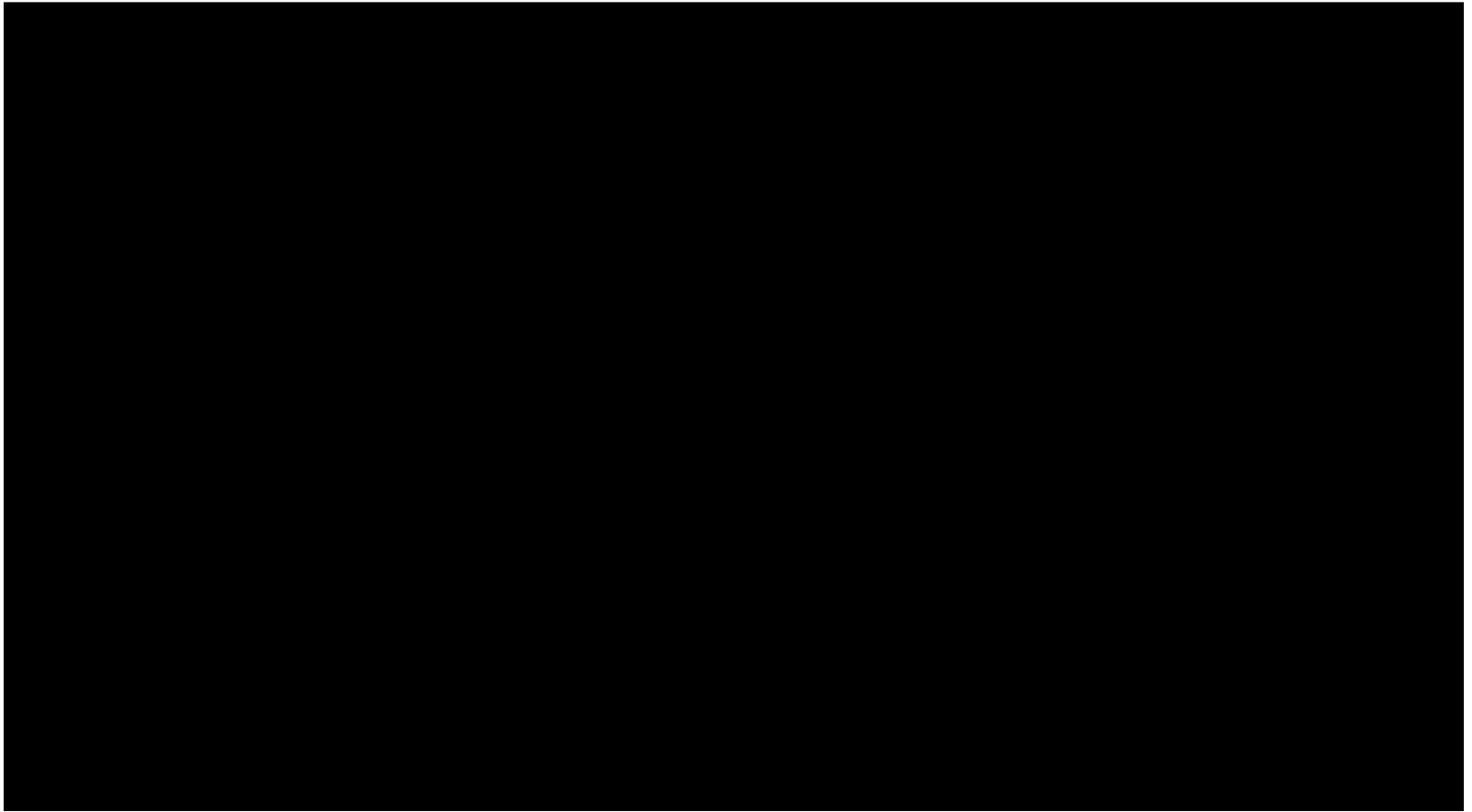
*And if you block it, it will never exist through any other medium and will be lost. The world will not have it. It is not our business to determine how good it is; nor how valuable it is; nor how it compares with other expressions. It is your business to keep it yours clearly and directly.*

*You do not even have to believe in yourself or your work. You have to keep open and aware directly to the urges that motivate you.*

***There is no satisfaction whatever at any time. There is only a queer, divine dissatisfaction; a blessed unrest that keep us marching and makes us more alive than the others.”***

Martha Graham

# Entelechy: What Makes You Itch?



# Entelechy & Autism:

## o Autism Constructs:

Hyper-Focus

Limited Social  
Compliance / Social  
Language /  
Communication

Purpose-driven /  
Meaning Centered

## o Channeling toward a positive outlet:

- Interest based learning
- Project approach
- Mentorship,  
apprenticeship, and  
classes

Mind / body



# Holistic Approach ... Mind, Body Spirit

Entelechy

Maslow's Hierarchy:



Executive Functioning / Processing / Sensory

# Anxiety-Stress:

## Identifying the Source, the Cause, The Antecedent, the Itch ...

- **Functional Behavior Analysis:**

1. Behavior of concern.
2. Where does the behavior occur and where not?
3. Hypothesis; Cause of behavior?
  1. Maslow's Hierarchy of Needs
  2. Executive Functioning
  3. Sensory
  4. Processing
  5. Entelechy: "The Itch"
4. Identify interventions (Creating New Tools: "Calming Strategies")
5. Test hypothesis and Implement Interventions: Accommodations / SDI
6. Evaluate

# Sample FBA

## Functional Behavior Assessment

**Date:** 11/2/05  
**Name:** Sample Student  
**Age:** 11-7 years  
**Grade:** 6th  
**School:** BMOP

## Definition of Target Behaviors:

**Non-compliance:** refusing to work, not following directions, failure to comply with class routines, arguing, communicating in a confrontational tone

**Inappropriate noises:** inappropriate verbalizations (e.g. "you're stupid"), disruptive or loud noises, shouting, joking with other students, incorrect use of objects.

## Assessment Methods Used:

Evaluator and/or staff collected data using Antecedent Behavior Consequence data sheets. Other methods include behavioral observations by evaluator, staff records, and information provided by or elicited from staff, student, and family.

## Historical analysis:

The main concern the family expressed was that when he is overwhelmed or stressed out, he shuts down with difficult tasks. He needs to learn how to use feeling words and talk about how he is feeling. He also needs better understanding of consequences for his actions. He can be very self-conscious, shy, and has a low self-esteem. He needs a lot of movement and responds to coaching and encouragement. He can react by pushing people. He loves skateboarding.

## Summary of information provided by various interviews and report/record reviews:

Mrs. Caring, his Science teacher, noted that he is often distracted in class. She felt it was difficult for him to read much of the material used so he tended to "drift" while he was working. She also noted that it takes him a long time to copy the objective from the board, not to mention any notes or writing being done in class. Directions often need to be given several times. He has tried to participate, though he speaks very softly. She stated that his homework was not always turned in.

Mrs. Goodness, his reading & language arts teacher, reported that he started out very positively, but then began to exhibit some inappropriate behaviors such as not following directions, calling out inappropriate comments (this is stupid), and making fun of another student. Mrs. Goodness moved his seating and has found that his behavior has immensely improved since then. She also stated that all his homework had been turned in on time and that his work demonstrated thought and effort.

In Art, Mrs. Artistic noted that he works better when separated from particular peers. She felt that they acted out to show off for each other. He was making faces and seemed unable to focus. Since moving his seat, she has noted some improvement.

- This evaluator observed the student on 10/17/2005 in Mrs. Goodness's class. He came in on time and Mrs. Goodness delivered positive behavior specific praise (Good job coming on time). He wrote down his homework while the class listened to a story on tape. When the story was finished, the teacher asked the students to put all their doodling away. Sample refused and stated "No". Mrs. Goodness calmly restated the direction and Sample put his doodling away. Later on, he took out his doodling again and Mrs. Goodness asked him to put it away. He refused again and put it on his lap. Mrs. Goodness gave him the choice of putting it in his desk or taking it away. He then took notes. He called a peer "stupid" and juggled a marker in the air, later drawing on himself. While some of these behaviors were inappropriate, their duration was brief, resolved quickly, and took up no more than 3 minutes of the entire 42 minute observation.

## Previous Behavior Interventions:

### Strengths:

Sample can be a capable and willing student. He has demonstrated his ability to work hard and turn in tasks.

**Notes:** Based upon observations & interviews, Sample does not need a formal behavior intervention plan. However, there are some strategies that have been noted to work already with him as well as some that may be potentially useful.

## Behavior Intervention Recommendations and Strategies

### Antecedent procedures:

As stated in Sample's IEP, he has difficulty with written tasks. Because of this, it may be beneficial to offer him guided notes (where he fills in words rather than copying the whole thing) or giving him a copy of notes to follow along with. This may allow him to better focus on the actual instruction rather than on copying down written material.

Sample continues to benefit from seating arrangements that minimize distractions from peers and peer attention.

### Skill Acquisition:

Sample may benefit from Social Skills Instruction that is designed to help him deal with ignoring distractions, making & maintaining healthy friendships, and coping stress or anger.

### Reinforcement:

Sample would continue to benefit from behavior specific positive social praise ("I like the way you are following along in your book", "That was great problem-solving")

### Consequence:

### Evaluation Procedures:

At this time, a formal behavior plan is not being recommended. Measurement will be based upon staff and parent observations. If Sample becomes involved in the Timberlane Social Skills Group, the SSRS will be used to measure pre-intervention and during intervention results.

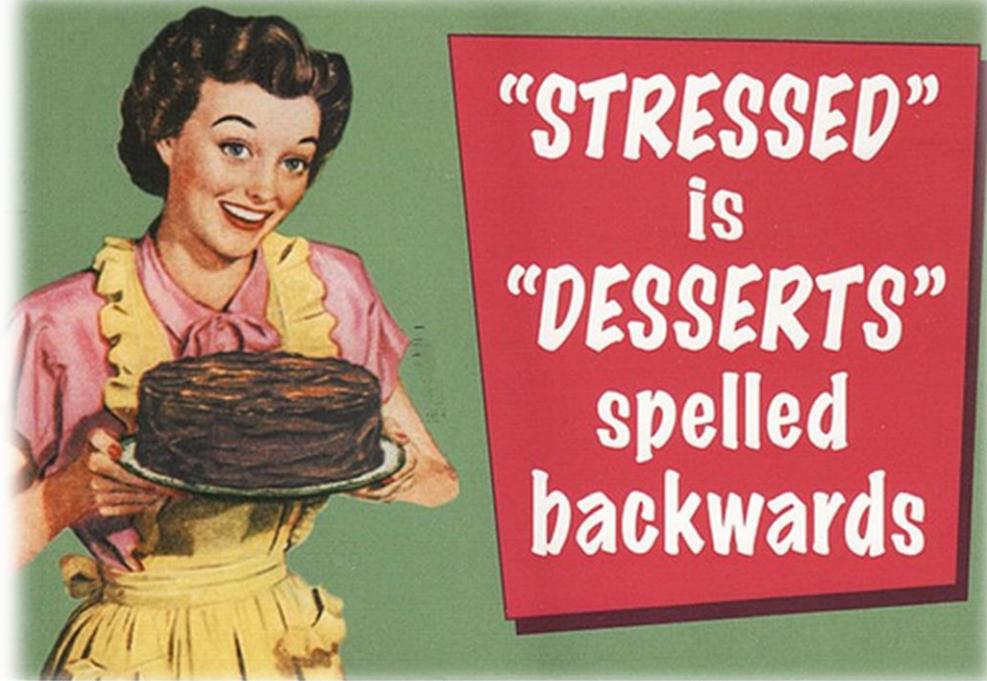
**Materials needed for program implementation:** Hassle log, Problem-solving sheet

### 7.2.1.13 Functional Behavioural Assessment (Dawn Reithaug)

<b>Functional Behavioural Assessment*</b>				
Date: _____ Data Collected by: _____				
Student: _____ Grade: __ Age: __ Teacher: _____ School: _____				
<b>①</b> Strengths/Preferences		<b>②</b> Background Information/History		
<b>⑤</b> Slow Triggers (Setting Events)	<b>④</b> Fast Triggers (Antecedents)	<b>③</b> Inappropriate Behaviour(s)	<b>⑦</b> Perceived Functions (hypotheses / possible explanations)	<b>⑥</b> Consequences for the Inappropriate Behaviour(s)

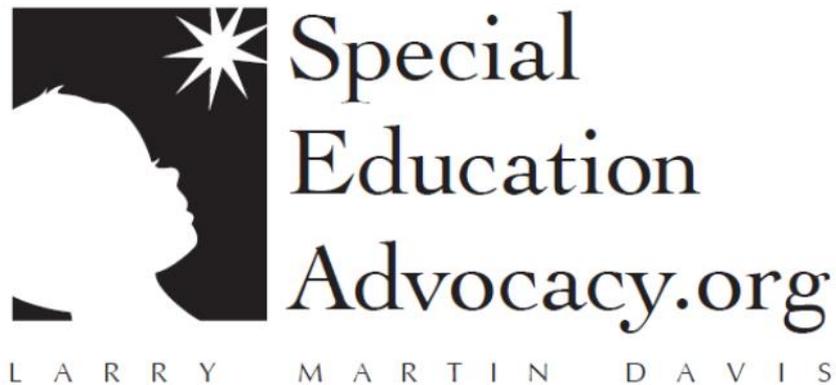
\*Adapted from: O'Rourke, S., Knoster, T., & Llewellyn, G. (1999). Screening for understanding: An initial line of inquiry for school-based settings. *Journal of Positive Behaviour Interventions*, 1(1), 35-42.

# Purpose of an FBA: Creating a New Tool Kit:



**Minimizing anxiety allows the gift within to emerge.**

# Contact Information:



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