

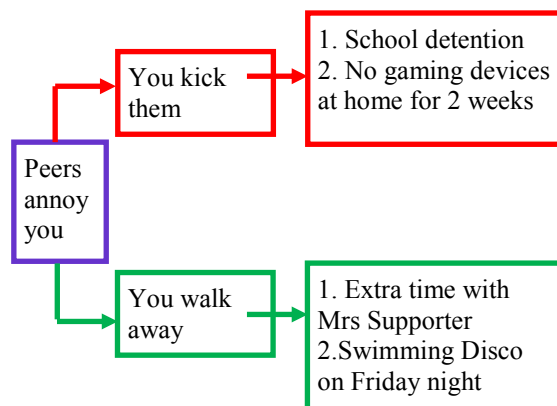
Praise and Rewards

Understanding Consequences

Notoriously, pupils find it hard to see the direct connection between their behaviour choices and punishments and even rewards.

Rewards can help motivate them but the rewards need to be meaningful to the pupil and they are best given immediately.

“Why didn’t we realise earlier? The pupil has had time in isolation but things only changed when we taught them a different way to handle their emotions and behaviour.”



It's helpful to the pupil for school and home to be in close communication. If school offers a meaningful reward, communicate it home so they get another reward at home.

Transition Times

Autistic youngsters have more challenges journeying too and fro from school as well as during break times and lunchtimes because these periods of time are not adult led.

What can I do to help?

- Provide activities during transition times eg breakfast clubs, homework clubs, IT, sport, music, film, art, drama, construction, meditation, calm spaces, mentoring, peer support groups
- Offer social skills lessons using pre-written materials to help eg comic strip conversations, Social Stories™, life skills, safe-space role-play, Circle of Friends
- Ensure there is a zero tolerance on bullying
- Create opportunities for youngsters to grow an understanding of medical conditions so that they can empathise better using their own self-talk and their peers
- Check out resources that can support you better in the role you have in school
- Support the learning support department by keeping up to date with pupil passports/profiles and through regular communication



AUTISM FRIENDLY SCHOOL COMMUNITIES

Empathy



Watch YouTube: Bene Brown on Empathy

Making efforts to understand, respect and relate to the experience of the autistic person must underpin our attempts to develop communication and reduce anxiety.

The quality of the relationship between the person and supporter is of vital importance.

National Autistic Society

AUTISM FRIENDLY COMMUNITIES ARE CALM, PREDICTABLE, GOOD HUMOURED, EMPATHETIC AND ANALYTICAL

Communication

- Say less. Use specific key words, repeating them and stressing them
- Speak slowly, pause between words and phrases to give the person time to process what you've said, and to give them chance to think of a response
- Don't use too many questions. Keep questions short and relevant and structure them by offering options or choices.

“It's hard to filter out information that isn't necessary for me. There's just too much information. The environment affects my capacity to decode what you are saying, for example if it's too noisy or full of people.”

- Use less non-verbal communication (eg eye contact, facial expressions, gestures, body language) when a person is showing signs of anxiety.
- Use visual supports (eg symbols, timetables, Social Stories™)
- Provide visual if they don't ask for help
- If you use irony, sarcasm, figurative language, exaggeration, idioms, rhetorical questions or literal language be clear and explain what you need to say

Behaviour

If youngsters won't comply, then ascertain the function of their behaviour using a Functional Analysis Questionnaire (Adapted from Willis & LaVigna, 1993).

1. What happens during a behavioural incident (ie, what does the behaviour look like)?
2. How often does the behaviour occur (ie, several times per day, daily, weekly)?
3. How long does the behaviour last?
4. How severe is the behaviour?
5. What time of day is the behaviour most likely to occur?
6. In what environment or where is the behaviour most likely to occur?
7. With whom is the behaviour most likely to occur?
8. What activity is most likely to produce the behaviour?
9. Are there any other events or situations that can trigger the behaviour (such as particular demands, delays or transitions between activities)?
10. What is gained by engaging in the behaviour (ie, what is the consequence or outcome for the individual)?

11. What is avoided by engaging in the behaviour?
12. Is the person experiencing any medical issues that may be affecting their behaviour (such as toothache, earache, sinus infections, colds, flu, allergies, rashes, seizures)?
13. Is the person experiencing difficulty with sleeping or eating?

**BE PATIENT BE REALISTIC
BE CONSISTENT
CONSIDER THE SENSORY ENVIRONMENT
SUPPORT COMMUNICATION VISUALLY**

14. How predictable is the person's daily routine (ie, to what extent does the person know what is happening throughout the day and when)?
15. Have there been any recent changes to routine?
16. How does the individual communicate the following: • Yes/no/stop • Indicate physical pain • Request help • Request attention • Request preferred food/objects/activities • Request a break.
17. What objects, activities or events does the individual enjoy?
18. What skills or behaviours does the individual have that may be alternative ways of achieving the same function as the behaviour of concern?