PARENT RESOURCE GUIDE

University-Community Autism Conference

Friday, March 20, 2020

OPTIMIZING SCHOOL & COMMUNITY INCLUSION FOR STUDENTS WITH AUTISM SPECTRUM DISORDERS
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Disclaimer: The content within this booklet is for information purposes only. It does not intend to substitute professional medical advice nor does it reflect the views of any of the organizations or universities participating in this conference. Families are encouraged to discuss the information in this booklet with their child’s doctor or health-related provider.
The Early Years
What is Autism?

- Autism spectrum disorder (ASD) and autism are both general terms for a group of complex disorders of brain development
- These disorders are characterized, in varying degrees, by difficulties in social interaction, verbal and nonverbal communication and repetitive behaviors
- 1 in 68 American children are on the autism spectrum
- Autism is four to five times more common among boys than girls

How Parents Can Spot the Signs?

As a parent, you’re in the best position to spot the earliest warning signs of autism. You know your child better than anyone and observe behaviors and quirks that a pediatrician, in a quick fifteen-minute visit, might not have the chance to see. Your child’s pediatrician can be a valuable partner, but don’t discount the importance of your own observations and experience. The key is to educate yourself so you know what’s normal and what’s not.

Monitor your child’s development. Autism involves a variety of developmental delays, so keeping a close eye on when—or if—your child is hitting the key social, emotional, and cognitive milestones is an effective way to spot the problem early on. While developmental delays don’t automatically point to autism, they may indicate a heightened risk.

Take action if you’re concerned. Every child develops at a different pace, so you don’t need to panic if your child is a little late to talk or walk. When it comes to healthy development, there’s a wide range of “normal.” But if your child is not meeting the milestones for his or her age, or you suspect a problem, share your concerns with your child’s doctor immediately. Don’t wait.

Don’t accept a wait-and-see approach. Many concerned parents are told, “Don’t worry” or “Wait and see.” However, by waiting, you risk losing valuable time at an age where your child has the best chance for improvement. Furthermore, whether the delay is caused by autism or some other factor, developmentally delayed kids are unlikely to simply “grow out of” their problems. In order to develop skills in an area of delay, your child needs extra help and targeted treatment.

Trust your instincts. Ideally, your child’s doctor will take your concerns seriously and perform a thorough evaluation for autism or other developmental delays. But sometimes, even well-meaning doctors miss red flags or underestimate problems. Listen to your gut if it’s telling you something is wrong, and be persistent. Schedule a follow-up appointment with the doctor, seek a second opinion, or ask for a referral to a child development specialist.
Although autism is hard to diagnose before 24 months, symptoms often surface between 12 and 18 months.

The earliest signs of autism involve the absence of normal behaviors—not the presence of abnormal ones—so they can be tough to spot. You can catch warning signs early if you know what to look for.

**Early Signs**

Your baby or toddler doesn't:

- Make eye contact, such as looking at you when being fed or smiling when being smiled at
- Respond to his or her name, or to the sound of a familiar voice
- Follow objects visually or follow your gesture when you point things out
- Point or wave goodbye, or use other gestures to communicate
- Make noises to get your attention
- Initiate or respond to cuddling or reach out to be picked up
- Imitate your movements and facial expressions
- Play with other people or share interest and enjoyment
- Notice or care if you hurt yourself or experience discomfort

**Developmental Red Flags**

The following delays warrant an immediate evaluation by your child’s pediatrician:

**By 6 months:** No big smiles or other warm, joyful expressions

**By 9 months:** No back-and-forth sharing of sounds, smiles, or other facial expressions

**By 12 months:** Lack of response to name

**By 12 months:** No babbling or “baby talk”

**By 12 months:** No back-and-forth gestures, such as pointing, showing, reaching, or waving

**By 16 months:** No spoken words

**By 24 months:** No meaningful two-word phrases that don’t involve imitating or repeating
Questions to Ask the Doctor

- Is my child's development on target for his or her age?
- Are my child's social skills developing normally?
- What further evaluation and testing are necessary to evaluate my child for possible autism?
- What resources are available to support our child and family?

Early Diagnosis and Services

- Every individual’s diagnosis of autism is different and at different times, children and families may need different supports
- A typical diagnostic evaluation involves a multi-disciplinary team of doctors including a pediatrician, psychologist, speech and language pathologist and occupational therapist.
- Genetic testing may likewise be recommended, as well as screening for related medical issues such as sleep difficulties
- This type of comprehensive evaluation helps parents understand as much as possible about their child's strengths and needs

Regional Center Intake Process

How Do You Receive Regional Center Services?

- A person can qualify for services at any age, however, the person must be diagnosed with an intellectual and/or a developmental disability before the age of 18
- Regional centers do not provide support to persons who are only diagnosed with a mental illness (i.e. depression, schizophrenia), have a learning disability (i.e. dyslexia, auditory processing disorder), are only deaf or blind, or only have a speech disorder
- The primary diagnosis must be an intellectual and/or developmental disability. A person can be found eligible who is dually diagnosed with an intellectual or developmental disability as well as other disabilities described above
- However, if you feel someone is delayed, and are unsure if they would qualify for Regional Center services, please refer them for an assessment

Regional Center Eligibility

- **Income is not a factor for eligibility**
- **Services are provided for free**
- **Services are provided regardless of citizenship or residency status – consumers can receive services if they are undocumented**
Intake Process

• If you think a person may be eligible for services, call your local regional center and ask for “Intake”
• Indicate the age of the person being referred
• Birth to 3 – Early Start/PPRRS (Prevention Resource and Referral Services) Intake
• 3 and above – Regular Intake
• Intake Worker completes an initial telephone screening and schedules an appointment for an office visit if needed. Early Start may schedule an in-home visit if needed
• Please call first, do not walk in
• Helpful to bring any documentation that indicates why the person may meet eligibility criteria, i.e. medical records, psychological/psychiatric evaluations, school records (IEP’s, report cards, etc.)
• Intake Service Coordinator (SC) will interview the potential client and family and complete a psycho-social assessment within 15 days of initial request for screening
• Other clinicians, such as a psychologist, physician, OT/PT, or others may also assess the prospective client if needed
• In some cases, Intake may observe the individual in the community, i.e. in school, to ensure an accurate assessment
• Finally a “Core Staffing Team” comprised of clinicians, managers, and the Intake SC will make a determination regarding eligibility
• For those not found eligible, referrals will be made to appropriate alternative resources in the community
• The intake process for ages 3 and older generally takes 45-120 days to complete.
• Birth to three cases are reviewed by the Early Start Eligibility Team which generally takes 45 days to complete
Regional Center Services
Nonprofit private corporations that contract with the Department of Developmental Services to provide or coordinate services and supports for individuals with developmental disabilities.

South Central Los Angeles Regional Center (SCLARC)
2500 S. Western Avenue
Los Angeles, CA 90018
(213) 744-7000

West Side Regional Center
5901 Green Valley Cir #320
Culver City, CA 90230
(310) 258-4000

Harbor Regional Center
21231 Hawthorne Blvd.
Torrance, Ca. 90503
310-540-1711

Frank D. Lanterman Regional Center
3303 Wilshire Boulevard, Suite 700
Los Angeles, CA 90010
213.383.1300

Eastern Los Angeles Regional Center
1000 S. Fremont Ave.
Alhambra, CA, 91802
626-299-4700

North Los Angeles Regional Center
9200 Oakdale Ave.
Chatsworth, CA 91311
818-778-1900

ZIP code lookup for regional centers in LA County:
http://www.dds.ca.gov/RC/regionMap.cfm?view=laCounty
Some of the services and supports provided by the regional centers include:

- Information and referral
- Assessment and diagnosis
- Counseling
- Lifelong individualized planning and service coordination
- Purchase of necessary services included in the individual program plan
- Resource development
- Outreach
- Assistance in finding and using community and other resources
- Advocacy for the protection of legal, civil and service rights
- Early intervention services for at risk infants and their families
- Genetic counseling
- Family support
- Planning, placement, and monitoring for 24-hour out-of-home care
- Training and educational opportunities for individuals and families
- Community education about developmental disabilities

For additional information about these services and supports, see:

- Information About Programs and Services:
  http://www.dds.ca.gov/RC/ProgramServices.cfm

Source: Department of Developmental Services, State of California
http://www.dds.ca.gov/RC/RCSvs.cfm
Evidence-Based Practices

There are ongoing professional conversations regarding which educational supports are most effective and should be considered “evidence-based.” There are a number of methodologies, or approaches to accomplish a goal, that can be used successfully with children with autism. As research continues to evolve evidence-based approaches are expected to expand.


Below, please find some information on generally-accepted interventions and practices as well as specific methodologies which are considered “evidence-based” or promising.

General Considerations, Interventions and Practices

- Behavioral characteristics associated with ASD, including social interaction and communication, often negatively impact learning.
- Early intervention has been proven to positively impact outcomes for people with ASD.
- There is no clear evidence of one particular intervention being effective for all children. Interventions must match the needs of a specific child.
- Active engagement in systematically planned developmentally appropriate activities is necessary for all students with ASD.
- Educational goals should focus not only on traditional academic outcomes, but also in building functional use of academic skills, then personal independence, responsibility, social abilities, communication skills, adaptive skills, and the reduction of behavioral difficulties.
- Assessment should drive instruction; children with autism often have scattered and atypical skill sets so it is important to determine each child’s specific profile of strengths and needs.
- Children with ASD often have difficulty generalizing skills across environments and people so it is important to practice new skills in a variety of ways, in multiple settings and with various individuals and groups before mastery is indicated.
- Social functioning plays a large role in the ability to access curriculum and to participate responsibly in the social world (holding a job as an adult or participating in cooperative learning activities as a child). Even students with excellent academic capabilities need social instruction to ensure that they are able to function in society.
- There are many everyday behaviors that typical children learn through observation and application. Children with autism often times need to be explicitly taught seemingly ordinary behaviors.
- Differences in motivation are apparent in many students with autism; they may need tasks presented in different ways and reinforcement delivered based on individual needs, rather than using the same techniques used with the rest of the class.

Applied Behavior Analysis (ABA)

Applied behavior analysis is comprised of research-based, demonstrably effective procedures tailored to meet the unique and individualized needs of each child. It is grounded in analyzing the antecedents-behaviors-consequences (i.e. ABCs) of behavior: It utilizes the application of the basic behavioral practices of
reinforcement, repetition, and prompting to teach appropriate behaviors and skills and to reduce inappropriate behaviors. Targeted skills to be learned are broken down into smaller elements and systematically taught using positive reinforcement.

ABA is an adult-directed methodology. All children (with ASD or not) respond positively to some aspects of operant conditioning (ABA) because of the routine established, the reinforcement, and the 1:1 teaching often recommended. However, the same aspects that are positive can have negative outcomes for a child, especially when instructors rigidly adhere to a “program schedule” and drill isolated skills that are difficult to generalize.

Applied Behavior Analysis: The Discrete Trial
Discrete Trial Teaching/Training (DTT) is one of the instructional methodologies under the umbrella of ABA. It is errorless-free learning in which targeted skills to be learned are broken down into smaller elements and systematically taught using prompting techniques and positive reinforcement. Learning opportunities are presented in a “trial” format, consisting of five major components: 1. SD (Discriminative stimulus, better known as the direction); 2. Prompt if needed; 3. R (Student response); 4. C (Consequence, what happens following the response - the reward); 5. Pause between trials. The majority of time Discrete Trial is conducted in 1:1 learning sessions but can be implemented in small groups as well.

Applied Behavior Analysis: Pivotal Response Training
Pivotal Response Training (PRT) was developed as a methodology that falls under the ABA category as it incorporates the principles of basic behavioral practices (positive reinforcement, repetition, and prompting) to facilitate the development of appropriate behaviors and skills and to reduce inappropriate behaviors. The fundamental difference in PRT is that it addresses improvements in “pivotal behaviors” that produce simultaneous changes in many other behaviors instead of relying on programs that focus on one behavior at a time. Key pivotal behaviors to be addressed include joint attention, motivation and responsivity to multiple cues. What this means is that a child must be able to engage in these behaviors in order to learn many other things about his/her environment. Take, for example, motivation. When a child is motivated, he or she tries harder and is more interested and therefore learns more.

TEACCH: Structured Teaching
Treatment and Education of Autistic and Related Communication Handicapped Children (TEACCH) approach includes a focus on the person with autism and the development of a program around that person's skills, interests, and needs. Emphasizing the “culture of autism,” TEACCH requires starting where people are and helping them to develop as far as they can go, building on their strengths.

Structured teaching is an important component of the TEACCH program as that structure fits the "culture of autism" effectively. Organizing the physical environment, developing schedules and work systems, making expectations clear and explicit, and using visual materials have been effective ways of developing skills and allowing people with autism to use these skills independent of direct adult prompting and cueing.

Floor Time
Floor Time involves meeting a child at his current developmental level, and building upon his particular set of strengths through interactive experiences. Floor Time harnesses the power of a child’s motivation; following his lead, wooing him with warm but persistent attempts to engage his attention and tuning in to his interests and desires in interactions.

The program recommends several 20-30 minute sessions per day. The therapist/parent/teacher are instructed to empathize with the child’s emotional tone, look for ways to turn the child’s actions into interactions, and to be aware of the child’s developmental levels. Language, motor, and sensory development should be incorporated into naturalistic interaction opportunities. As the child becomes more verbal and capable of building bridges between ideas, it becomes important to add reality-based problem-solving discussions to the daily routine. This type of dialogue may be about school, friends, favorite foods, toys. The child also needs help in anticipating challenges that may emerge later in the day or the next day.

**Picture Communication* (child initiated)**

*PECS is a registered, trademarked program and should not be indicated unless training has taken place and the actual program is being implemented as intended.

Picture communication is appropriate for individuals who do not use speech or who may speak with limited effectiveness, those who have articulation or motor planning difficulties, limited communicative partners, lack of initiative in communication, etc. It is very different from picture or visual supports as it is an actual means of communication.

Picture communication is used within a social context, that is, children use it to initiate communication, make requests, comment, etc. The idea is to establish a functional means of communication. It begins with very concrete use of communication (requesting desired items, like food, and getting the food after making the request) and moves into more abstract communication like expressing feelings or commenting.
Autism Speaks Tool Kits

FOR YOUNG CHILDREN

100 Day Kit for Newly Diagnosed Families of Young Children (Ages 0-4): A guide for the first 100 days following a diagnosis of autism. Also available in Spanish and other languages.

First Concern to Action Tool Kit: Provides families having concerns about their child’s development with resources and tools to guide them on the journey from first concern to action.

FOR SCHOOL AGE CHILDREN

100 Day Kit for Newly Diagnosed Families of Young Children (Ages 5-13)

Individualized Education Program: Summary, Process and Practical Tips: Lays out steps to take through the IEP process and contains an IEP timeline.

Leading the Way: Autism-Friendly Youth Organizations: Better prepares community organizations to serve youth and families in the autism community.

School Community Tool Kit: Assists members of the school community in supporting students with autism.

FOR YOUNG ADULTS/ADULTS

Is It Autism and If So, What Next? A Guide for Adults: Provides information for young adults and adults who suspect they may have autism or have been recently diagnosed.

Community-based Skills Assessment: Assesses individual strengths and challenges to develop effective personalized transition plan.

Employment Tool Kit: Helps adults with autism research and find employment in the competitive labor market.

Housing and Residential Supports Tool Kit: Guides individuals and families as they identify and secure appropriate residential services.

Postsecondary Educational Opportunities Guide: Provides information about options available for individuals with autism after high school.

Transition Tool Kit: Guides families on the journey from adolescence to adulthood.

FOR ALL AGES

Advocacy Tool Kit: Aims to help both individuals on the spectrum and families develop and use critical advocacy skills in order to achieve the best possible outcomes.

Challenging Behaviors Tool Kit: Gives families strategies, information, and resources on how to prevent and respond to challenging behaviors from their loved ones.

Dental Tool Kit: Information for dentists and families about making visits to the dentist more successful.

Family Support Tool Kits: Teaches grandparents, parents, siblings and friends more about autism and enables them to lead happy lives with their loved ones with autism.

Special Needs Financial Planning Tool Kit: Provides essential information and guidance to help families develop a plan for their children’s financial futures.

Tips for Successful Haircuts: Information for stylists and families about making haircuts more successful.
AS-ATN/AIR-P Tool Kits

The tool kits below are products of on-going activities of Autism Speaks’ Autism Treatment Network (ATN) through its federal funding as the Autism Intervention Research Network on Physical Health.

AUTISM AND MEDICATION: SAFE AND CAREFUL USE: Created to help families work with their healthcare providers to make sure that medicine is taken safely and effectively.

BLOOD DRAW TOOL KIT: Contains tools to help you and your child prepare for future medical visits and reduce the stress that may come with blood draws.

A CLINICIANS’ GUIDE TO PROVIDING FEEDBACK TO FAMILIES: Manual and videos designed to provide health care professionals with instructional support for leading a productive diagnostic feedback session.

DENTAL PROFESSIONALS’ TOOL KIT: Provides information that helps dental professionals’ better provide care or children with ASD.

EEG GUIDES: Provides information about the EEG procedure and how to help children with ASD successfully prepare for and complete an EEG.

EXPLORING FEEDING BEHAVIOR IN AUTISM: Helps parents and professionals better understand the “nuts and bolts” of feeding issues.

GUIDE TO APPLIED BEHAVIOR ANALYSIS: Designed to provide a better understanding of ABA, how your child can benefit and where/how you can seek ABA services.

MANAGING CONSTIPATION IN CHILDREN WITH AUTISM: Provides strategies and resources for parents of children with autism who have problems with constipation and difficulties treating it.

INTRODUCTION TO BEHAVIORAL HEALTH TREATMENTS: Designed to provide parents of children with ASD with an overview of in-home strategies as well as tips to teach and increase desirable behaviors and decrease behavior problems.

MEDICATION DECISION AID: Helps you clarify your values and goals and then talk with your healthcare provider about the options, benefits, and possible downsides of medications.

PICA GUIDES FOR PARENTS AND PROFESSIONALS: Helps you better understand pica, its signs, symptoms and ways to treat and prevent it.

PUBERTY AND ADOLESCENCE RESOURCE: Provides guidance for parents on the subject of puberty that can be directly applied to pre-teens with ASD.

SLEEP TOOL KIT: Designed to provide strategies to improve sleep in their child affected by autism. Separate guide for sleep strategies specifically for teens available as well.

TOILET TRAINING GUIDE: Provides caregivers tips to increase toileting success by teaching toileting skills, providing advice on preparing schedules and routines and visual supports.

TOOLS FOR SUCCESSFUL VISION EXAMS: Video and teaching story to help prepare for trips to the eye doctor.

VISUAL SUPPORTS AND AUTISM SPECTRUM DISORDER: Provides a step-by-step, easy-to-understand introduction to visual supports and the ways that parents and other caregivers can begin using them.
HOW TO BE A GOOD PARENT ADVOCATE

All parents naturally want to be good advocates for their children. There are a few steps you can take to help you be more effective.

Know your child

- Be able to communicate your child's strengths and weaknesses. This is important in evaluation and Individualized Education Program (IEP) or Individualized Family Service Plan (IFSP) meetings, but it is also helpful in everyday interactions with teachers, therapists, and staff.
- Understand your child's diagnosis and how it affects him or her. How is your child like or unlike what is the norm for other children with Autism Spectrum Disorder (ASD)? What are your child's special interests and how might they interfere with or support learning? Does your child avoid social contact or does he or she struggle to know how to initiate or maintain an interaction?
- Know what others have said about your child, including medical professionals and educators.

Know the law

- Make sure you know the special education timelines for your child and monitor them to make sure that they are being followed. When should your annual IEP/IFSP occur? How long until your child's next evaluation? Have you discussed ESY (Extended School Year) in time to get a placement for summer (for students over age 3)? When are important papers due (for example, the NOREP - Notice of Recommended Educational Placement)?
- Understand the concepts of FAPE (Free and Appropriate Public Education) and LRE (Least Restrictive Environment). Understand other legal constraints, such as: How can a child with an IEP be disciplined? How many students can be in an autism support classroom? Is an aide allowed to provide academic instruction?
- Exercise your right to be a member of your child's team. Contribute to the evaluation and the IEP/IFSP.
- Recognize that special education is broader than academics. Your child may be entitled to services related to social, behavior, communication, motor skills, and self-help skills as well, just to name a few.
- Understand your options if you are unsatisfied with your child's special education evaluation or program or if legal procedures and timelines have not been followed.

Know your community
• Stay informed about what is happening at your child's school, at other schools within your district, and in other neighboring districts.
• Join your school's parent organization and any disability support groups in your community. These organizations may provide valuable information about what services are being offered to other students, new special education programs in the area, and information about teachers who are "autism-friendly" (and those who are not).
• Learn the chain of command at your Early Intervention (EI) agency, school, and/or school district. Who can you go to if you need help resolving a problem? Who is the special education director in the district? The superintendent? Who is on the school board and when do they hold open meetings?
• Know the resources available in your community. Attend local conferences and workshops to learn about ASD, special education, and ways to help your child.

Be courteous and respectful

• Being a good advocate doesn’t necessarily mean being adversarial! While you may have a different opinion than someone else about what is appropriate for your child, try hard to communicate your opinions in a professional manner and with facts and data that will support your opinions.
• Make sure to thank teachers, therapists, and staff when good things happen; don’t let problems be the only time you communicate. Forming a good relationship with school personnel can often be a way to learn valuable information and can be an additional motivator for teachers, therapists, and staff to want to help your child.

Stay organized and prepared

• The longer your child is in the special education system, the more paperwork you will accumulate. Keep a binder with all materials (for example, evaluations, IEPs/IFSPs, written requests, progress reports, report cards, emails, and letters).
• When you have phone calls or in person conversations related to your child's IEP/IFSP, document what is discussed through an email and keep it in your binder as well. If an email seems unnecessary, write down what is said, who says it, and when, and put the note in your binder.
• During IEP/IFSP or other important meetings, take notes (or have a friend take notes). Keep your notes in your binder.
• Set reminders for important events, such as when progress reports on IEP/IFSP goals are due, when the annual IEP/IFSP should occur, and when ESY should be discussed.
• Set several times a year (perhaps coinciding with IEP/IFSP progress reports) when you will review your child's IEP/IFSP on your own.

Show up to meetings ready to contribute

• Know what kind of meeting you are attending, who will be there, and what will be discussed. If you are unsure, ask your school or Service Coordinator. Some meetings (for example, IEP meetings) require
school to give you notice of the purpose of the meeting and who will attend. Refer to the notice
document for information when available.
• Ask for an agenda or outline of what will be discussed ahead of time. If you requested the meeting,
prioritize what you want to discuss, and provide the school or your Service Coordinator with your agenda.
For IEP/IFSP meetings, consider requesting an IEP/IFSP facilitator to help keep the meeting on track if
your team has a history of unproductive meetings.
• Come prepared. Review any relevant documents ahead of time. For IEP/IFSP meetings, think about
whether your child has been making progress with the current program. Make a list of what you think is
working and what needs to be adjusted. Request a copy of the draft IEP/IFSP if your school or EI agency
plans to bring one to the meeting, and review it ahead of time.
• Be on time for meetings, and respect reasonable time limits. Remember, most meetings don't have to be
completed in one session, and most meetings don't require you to make an on-the-spot decision.
• Don't take a back seat at the meeting! Sit across from the person running the meeting and make
appropriate eye contact with them and anyone else who is speaking. Don't be afraid to speak up when
you have something to contribute or have questions.
• If you are meeting to discuss a problem, think in advance about possible solutions. Before attending the
meeting, discuss options with trusted family, friends, and professionals who work with your child outside
of the education system.
• Bring any supporting documents that may be helpful, such as your child's communication notebook,
report cards, or a private evaluation.
• If you are uneasy about attending the meeting alone, consider bringing a therapist who works with your
child, another professional who knows your child, a friend, or an advocate along with you.
• If you need to take a break during a meeting, ask for one. It is normal to get emotional about decisions
related to your child. A break can help you get your emotions (whether anger or sadness) in check and
can make the rest of the meeting more productive.

Follow up after meetings

• Request a summary of each meeting and attendance list, or prepare one yourself and circulate to other
people who were there.
• If not everything is accomplished in one meeting, make a list of what was accomplished and what still
needs to be done. Schedule the next meeting.
• Review your notes and follow up after a reasonable period of time to ask if things which have been
promised have occurred.
• Hold yourself accountable to deadlines as well. If you promised to complete a questionnaire about your
child, send in a medical evaluation, or provide another piece of information, do so promptly.
• Take time to think about what is discussed before agreeing or disagreeing with any proposal. After a
reasonable time to think and consult with your family and with any professionals who are working with
your child outside of the education setting, get back to the school or EI agency with questions or a
decision.
• Had a bad meeting? Regroup and try again. Seek the advice or input from someone outside the situation
or appeal to someone else in your district for help (the principal or special education supervisor, for example). When necessary, pursue legal remedies, such as mediation or Due Process.

Related Articles:

- ADVOCATING FOR YOUR CHILD
- WHAT IS AUTISM SPECTRUM DISORDER?
- INFANTS AND TODDLERS EARLY INTERVENTION BASICS
- PRESCHOOL SPECIAL EDUCATION BASICS
- SCHOOL-AGE SPECIAL EDUCATION BASICS
- ALL THESE APPOINTMENTS! ALL THIS PAPERWORK! HOW TO STAY ORGANIZED

The Center for Autism Research and The Children's Hospital of Philadelphia do not endorse or recommend any specific person or organization or form of treatment. The information included within the CAR Autism Roadmap™ and CAR Resource Directory™ should not be considered medical advice and should serve only as a guide to resources publicly and privately available. Choosing a treatment, course of action, and/or a resource is a personal decision, which should take into account each individual's and family's particular circumstances.
Strategies for Working With Children With Autism Spectrum Disorder

1. **Children with ASD need structure and routine.** Structure and routine to a child with ASD is like glasses for a child who has a visual impairment or a hearing aid for a child with a hearing impairment. It’s that important. The more organized and structured the environment and consistent the teaching style, the better.

2. **Structure “time” for the child with ASD.** A daily schedule is one tool for structuring “time” for the child with ASD. You may have your daily schedule posted on the board, but typically this is just not enough for the child with ASD. Most children will require a personal interactive daily schedule which is often more detailed. Mini-schedules for specific time periods are often needed.

3. **Structure “space” for the child with ASD.** Children with ASD benefit from clearly defined boundaries for specific areas of the classroom. Use of furniture to define areas or tape on the floor is often helpful. The student’s work area should also be organized. Having a folder for work “to do” and “done” can be useful.

4. **Prepare the child with ASD for changes in the routine.** Despite the most routine-based classroom, there will always be changes in the schedule. Think of the all the events that may occur that impact the routine of your classroom. Assemblies and fire alarms are typical events that impact the routine of the classroom and often cause distress for the student with autism. The use of the daily schedule or a tool such as a social story may be helpful.

5. **Children with ASD have significant difficulty processing oral language.** Language deficits are the hallmark of autism. Children with ASD have difficulty processing long strings of verbal input. Provide one to two directions at a time and keep it simple. Directions such as, “get your math book out of your desk, turn to page 59, complete the first 10 problems, be sure to put your name on your paper and then put it in the basket”, would be very difficult for the child with ASD. Of course, the amount of information that can be processed is different from child to child, but be aware that processing oral language is always an area of deficit.

6. **Children with ASD are visual processors.** Although the language areas of the brain are affected, the visual areas are often normal or, in many cases, well developed. Children with ASD process information visually significantly better than oral language. When at all possible, content information should be accompanied by visual representations. Pictures! Pictures! Pictures!

7. **Children with ASD have a difficult time understanding non-verbal communication.** You know your disapproving “teacher look” when the class is too loud? Well, your student with ASD will likely not understand that your look means that you want your class to quiet down. While the rest of your students quickly realize to they are to stop talking, the child with ASD will continue to chat and then be perplexed as to why he’s now in trouble. You will need to be direct in your language and tell the child exactly what you want him to do (“Joey, stop talking”).
8. **Children with ASD have difficulty reading social cues.** Children with ASD have significant difficulty understanding social cues. They have a difficult time taking on the perspective of another person. They may not understand how their comments or actions affects another person’s feelings. Social skills such as using social greetings, turn taking, and sharing are all skills that likely need to be taught directly.

9. **Children with ASD are often rule followers.** High functioning students with ASD are often known as the classroom policeman. Once a rule is established, it is established forever and breaking of a rule by a classmate often causes stress for the child with ASD. They are black and white thinkers with no shades of gray. This often causes conflicts with peers as the child with ASD is viewed as a tattler.

10. **Many children with ASD have sensory related issues.** Many children with ASD have sensitivity to touch, sight, sound or a combination of some or all. They may be oversensitive to the buzzing of the lights in the classroom or the echoes in the school cafeteria or gym. Sensory related issues may be so severe that escaping these situations may be the cause of significant behavioral issues. Your school’s Occupational Therapist may be helpful in determining sensory-related triggers for the students. The child’s parents can also provide valuable information as to how their child likely perceives certain environments.

11. **Children with ASD focus on details rather than on the whole.** Children with ASD tend to focus on specific details rather than the big picture. For example, coming up with the main idea of a story will likely be difficult for the child. They may focus instead on irrelevant details of the story. It is important to keep your instructional materials simple. When teaching letters or words just have the letter or word on a flashcard rather than a fancy chevron border, for example. The child is just as likely to be paying attention to the stripes than to the letter or word itself.

12. **Children with ASD have significant difficulty generalizing information.** Learning skills in one setting are not likely to easily transfer into another setting. There will need to be a concerted effort to teach skills (social, language, academic) in a variety of settings and with various people.

13. **Children with ASD are literal thinkers.** Figurative language such as “raining cat and dogs” is lost on the person with ASD. In the course of the day, we use a tremendous amount of figurative language that would be confusing for a child with ASD. Children need to be taught the literal meanings of common phrases used by classmates and teachers.

14. **Children with ASD are often the victims of bullying.** Children with ASD are easy targets for bullies. Because their triggers are so obvious and often their reactions severe, some children tend to enjoy setting them off. All adults in the child’s environment need to be especially aware of this issue. Educating classmates about autism and explaining the “why” behind the behaviors is often helpful.

15. **Children with ASD are children first!** Children with ASD are unique and wonderful individuals. They are first and foremost children. They are only children who think and perceive the world differently than most individuals.
When Teaching Your Child To Follow Directions.

**Keep your instructions simple and specific.** Avoid giving general commands, i.e. “clean your room.” Provide specific actions you would like your child to complete, i.e. “put your blocks in the basket”

**Try using positive statements,** such as “keep your shoes on” vs. “don’t take your shoes off.”

**After asking your child to do something, wait a short period and help them complete the action.** Try not to provide the child with too much time between the giving a command and when they complete the command. The time you provide them may actually be a reward for them.

**Avoid negotiating with your child about what you are asking them to do.** For example, you may ask your child, “don’t you want to go inside to eat?” in an attempt to motivate your child to follow your direction. Then your child says “no.” and you are left with, “well, we are going inside to eat anyway.”

- Example: Grace is running in the shopping mall. You would like her not to run. State, “walk.” When she complies, state “thank you.” When she doesn’t walk, get her and hold her hand while helping her to talk. Then state, “we walk to the store.”

One final note about talking to your child: There is a difference between giving a command and making a request/asking questions. When giving commands, give the command and then help them do it. When making a request or asking a question, the child may decide yes or no.


**Tips for Reading at home**

- **Include reading in routine.** Some children need or like to follow a routine. Why not incorporate reading into the schedule of his day? This could include reading a book each night before bedtime
- **Read books with favorable topics.** Choose books about topics your child enjoys. If your child love trains or dogs, incorporate those aspects of his life into the reading process
- **Make it fun!** If you combine reading with cuddling, playtime or other enjoyable activities, it links books with fun time, as well as learning
- **Be mindful of time.** If your child has a short attention span, begin by reading shorter books
- **Re-read the same stories.** Repetition will help the child learn language
- **Associate words with pictures.** To increase the opportunity for your child to learn words, consider labeling throughout your house to identify objects that correspond with that label, and include both the word and a picture for the designated object
- **Read aloud.** Once your child is learning to read, encourage him to read aloud. First, have him listen to the story, then follow along by scanning the text with his finger as he reads aloud. Talk about the pictures. Reading aloud also helps with language development and listening skills

Source: SanDiegoFamily.com
Meal Times

Meal Times can be difficult when children do not want to eat

Typically a child will sit and behave when they are hungry and like the food that you offer. Parents often feel helpless when it comes to getting their child to eat. They want their child to eat a variety of foods and sit calmly during mealtime.

- Make sure the child is hungry for the meal. The parent may need to remove snacks and juice for 2 hours before a meal (keep a schedule)
- Provide 2 foods that you know your child likes and 1 food that you would like your child to try
- During mealtime, you (as the parent) are responsible for WHAT is offered during the meal, WHEN you offer it, and WHERE the child must eat it. Parents often feel pressure when a child is not eating and we offer them anything, wherever, and whenever the child may want it, just to get them to eat something. The parent is responsible for what, when, and where. The child is responsible for eating.
- During mealtime, the child may demonstrate undesired behaviors. Follow the recommendations for setting limits, talking to your toddler, and water the roses/ignore the weeds
- Model good eating habits by sitting down with your child during mealtime. Eat a variety of foods and behave the way you want your child to behave

Source: BehaviorInterventions.org

Communication Enhancement Strategies

- Make favorite items inaccessible: place your child’s favorite items out of reach but within view. Put the item on a high shelf, on a counter top, in clear containers with tight lids, etc. Don’t automatically offer items
- Give small portions: At meals or snack time, offer bite-sized or small portions. Cut up a sandwich and give only part at a time. Put one or two swallows of a drink in a cup at a time. Help your child to understand that more is available by giving subtle cues such as saying, “we have more juice,” or by showing the food/drink item
- Consume a portion of a favorite food/drink in front of your child: in view of your child, eat or drink portions of the items he really wants. Show your extreme pleasure at being able to consume the item (“This juice is good!”)
- Create the needs for assistance: give your child access to a favorite item that he/she needs your assistance to enjoy. Encourage the child to seek assistance from you.
- Interrupt a favorite cooperative activity: Begin a favorite activity that you and your child both participate in. Once you are both enjoying yourselves, stop the activity and encourage your child to signal to you that he/she wants to continue. For example, while pushing your child on the swing, you may stop her/him in mid-air
- Offer your child something that he/she does not like: Offer your child a non-preferred item/activity and encourage him/her to communicate to you “no” in an appropriate way
- Offer a choice: Hold out two favorite items and say nothing. Expect the child to let you know which one he/she wants

Resource: Author Unknown: Based on Wetherby and Prizant, 1989
Technology has transformed the way children with autism learn and communicate. Mobile apps, in particular, have given parents, educators, and therapists multiple approaches to engage a child who develops at a different pace than his or her peers. Research from the American Psychological Association (APA) has shown that computers, and more recently tablets, help give a voice to kids who have autism. Tablets and other mobile devices can serve as beneficial social and academic tools for these children.

Over the past year, a wide range of specialized apps have been designed to assist children with autism to handle social situations, develop fine-motor skills, and effectively communicate. Google Play offers thousands of autism-friendly apps, such as Puzzingo, Giraffe's Preschool Playground, AutismXpress, and Show Me Numbers, and over 200 of these apps are free to download.

While our primary focus at KIDO’Z is to protect children from unsavory content online, we also strive to make our application educational and fun for children of all walks of life. We view all autism-friendly apps as fantastic resources for helping children flourish. With this in mind, our team constantly monitors the industry for new, accessible apps to pre-approve and add to our bank of applications offered in the KIDO’Z safe and secure digital environment.

Although these apps can be valuable, striking a balance in determining how much screen time your child is exposed to is important, particularly when it comes to children with autism. Here are some tips for parents:

- Set limits on your child’s use of digital technology at a young age. Do not permit your child to get to the point where they are spending an inordinate amount of time with their iPad or television, in comparison to other physical, social, and family activities.

- Translate app or game interests into real-world environments. Instead of allowing your child to become overly captivated with an app or video game, help him or her to take this area of interest and move it offline. Provide your child with opportunities and settings, such as a museum or historical site, for healthy and mutual discussions about their interests.

- Monitor your own interaction with digital devices. This is particularly relevant when you use technologies for solitary activities, such as searching the Internet, playing games on your phone, sending emails, or using social media. The more of these isolating behaviors that you display as a parent on devices, the more you are modeling this type of behavior for your child.

As parents ourselves, the KIDO’Z team understands the importance of giving children the support and tools they need in order to grow and succeed. Technology, with careful guidance and supervision, can open many doors for children with autism.

Gai Havkin is the CEO of KIDO’Z, a mobile app for Android smartphones and tablets designed to provide a safe environment for kids to play fun and educational games.
<table>
<thead>
<tr>
<th>Step</th>
<th>Image</th>
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<tbody>
<tr>
<td>1. Washing hands</td>
<td>![Image]</td>
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<tr>
<td>2. Water on</td>
<td>![Image]</td>
</tr>
<tr>
<td>3. Hands wet</td>
<td>![Image]</td>
</tr>
<tr>
<td>4. Rub hands with soap</td>
<td>![Image]</td>
</tr>
<tr>
<td>5. Rinse</td>
<td>![Image]</td>
</tr>
<tr>
<td>6. Water off</td>
<td>![Image]</td>
</tr>
<tr>
<td>7. Dry</td>
<td>![Image]</td>
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</tbody>
</table>
Calm Down Checklist

When I am frustrated, angry or upset, I will choose to:

- close eyes and count to five
- ask for a break
- take deep breaths and count to five
- ask to take a walk
- ask for a sensory activity
- ask for help
School Aged Years: K-12
What is the IEP?

- The Individualized Educational Plan (IEP) is a plan or program developed by the IEP team to ensure that a child who has a disability identified under the law and is attending an elementary or secondary educational institution receives specialized instruction and related services.

Who is part of the IEP team?

- You, as the child's parent or guardian, and/or your representative
- A school administrator
- A special education teacher or a special education provider when appropriate
- A general education teacher if your child is or may be participating in general education
- Other persons, such as your child, whom you or the school wish to invite; and
- A person knowledgeable about the assessment procedures used to assess your child, familiar with the results of the assessment, and qualified to interpret the instructional implications of the results. This may be one of the persons described above.

Special Education Services and Supports

- Special education services are specially designed instruction to meet the unique educational needs of children with disabilities who meet the eligibility criteria under the law. Special education services can begin at age three (3) and may continue until your child graduates or reaches the age of twenty-two (22).

What are Related Services?

Related services are transportation, developmental, corrective, and other supportive services that are needed to assist a child in benefiting from special education services.

What Programs, Supports, and Services are Available?

Special education services and supports are provided in a variety of ways including, but not limited to:

1. Regular Education Program
2. Resource Specialist Program
3. Related Services (also known as designated instruction and services)
   a. Speech and Language services
   b. Audiological services
   c. Orientation and Mobility Services
   d. Adapted physical education services
   e. Physical Therapy
   f. Occupational Therapy
g. Vision Services  
h. Counseling and guidance services  
i. Psychological services (other than assessments for IEP)  
j. Parent Counseling and Training  
k. Health and Nursing Services  
l. Social Work Services  
m. Specially designed vocational education and career development services:  
   i. District Office of Transition Services (DOTS):  
   ii. Career and Transition Center (CTC):  
   iii. Center for Advanced Transition Skills (CATS):  

n. Recreational therapy services  
o. Interpreting Services  

4. Special Classes  
   a. Special Day Program (SDP) Core Curriculum  
   b. Special Day Program (SDP) Alternate Curriculum  

5. Nonpublic, nonsectarian school services  

6. State Special Schools  

7. Extended School Year  

8. Behavioral Intervention  

9. Transportation  

Program Options  

The following are examples of possible program options within LAUSD:  

Pre-School  

- Inclusive programs with supports/services: Head Start, California State Preschool Program and School Readiness Language Development Program, Preschool Collaborative Classrooms  
- Special Day Programs (SDP): Preschool Mixed, Preschool for All Learners, Autism, and Preschool Comprehensive classrooms at selected general education sites  

Elementary  

- General Education with Designated Instruction and Services (DIS) and Supports  
- General Education with Resource Support  
- Any Special Day Program IF it will meet the unique needs of the student with ASD on a general education campus  
- SDP specifically for students with autism or High Functioning/Asperger on a general education campus  
- SDP on Special School site
Secondary

- General Education with DIS and Supports
- SDP Autism, High Functioning/Asperger, Special Schools, Community-Based Instruction (CBI)
- SDP for students with mild-moderate disabilities IF it meets the unique needs of the student with ASD

Specialized Program

High Functioning/Asperger Autism Program

- Program addresses the unique needs of the high functioning student with Autism Spectrum Disorder (ASD)/Asperger Syndrome
- Students are based in general education classes, with the support of the Special Education Teacher or paraprofessional going into the general education setting when needed
- Embedded social communication development and pragmatic language are the primary focus
- The student may be "pulled" into the smaller, special education classroom to work on specific behavioral and/or social skills, or possibly for specific academic instruction on a limited basis
What is the Placement in the Least Restrictive Environment?

The Least Restrictive Environment (LRE) means that a student who has a disability should have the opportunity to be educated with non-disabled peers, to the greatest extent appropriate.
Additional Rights Under the Special Education Process

1. Your right to receive prior written notice
2. Your right to consent to activities involving your child
3. Your right to revoke consent for continued provision of special education and related services
4. Your right to access your child’s educational records
5. Your right to procedural safeguards to resolve disagreements over what is appropriate for your child
   a. informal dispute resolution (IDR)
   b. Due process hearing proceeding
6. Your right to file a complaint
   a. Local complaints
   b. State complaints
7. Your child’s right to be protected from discrimination and harassment
8. Your right to access your child’s educational records
9. Your child’s right to be protected from discrimination and harassment

Division of Special Education Contact Information

(213) 241 – 6701

http://achieve/lausd.net/sped
## Acronyms in Special Education

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>APE</td>
<td>Adapted Physical Education</td>
</tr>
<tr>
<td>ASL</td>
<td>American Sign Language</td>
</tr>
<tr>
<td>AT</td>
<td>Assistive Technology</td>
</tr>
<tr>
<td>BSP</td>
<td>Behavioral Support Plan</td>
</tr>
<tr>
<td>CAC</td>
<td>Community Advisory Committee</td>
</tr>
<tr>
<td>CDE</td>
<td>California Department of Education</td>
</tr>
<tr>
<td>DIS</td>
<td>Designated Instruction of Services (Related Services)</td>
</tr>
<tr>
<td>ESY</td>
<td>Extended School Year</td>
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<tr>
<td>FAPE</td>
<td>Free Appropriate Education</td>
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<tr>
<td>504</td>
<td>Section 504 of the Rehabilitation Act</td>
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<tr>
<td>IDEA</td>
<td>The Individuals with Disability Education Act</td>
</tr>
<tr>
<td>IEE</td>
<td>Independent Educational Evaluation</td>
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<tr>
<td>IEP</td>
<td>Individualized Education Program</td>
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<tr>
<td>ITP</td>
<td>Individual Transition Plan</td>
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<tr>
<td>LAUSD</td>
<td>Los Angeles Unified School District</td>
</tr>
<tr>
<td>LRE</td>
<td>Least Restrictive Environment</td>
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<tr>
<td>LEP</td>
<td>Limited English Proficiency</td>
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<tr>
<td>NPA</td>
<td>Nonpublic Agency</td>
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<tr>
<td>NPS</td>
<td>Nonpublic School</td>
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<tr>
<td>OCR</td>
<td>Office for Civil Rights</td>
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<tr>
<td>OT</td>
<td>Occupational Therapy</td>
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<tr>
<td>PT</td>
<td>Physical Therapy</td>
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<tr>
<td>RSP</td>
<td>Resource Specialist Program</td>
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<tr>
<td>SDP</td>
<td>Special Day Program</td>
</tr>
<tr>
<td>SSPT</td>
<td>Student Support and Progress Team</td>
</tr>
</tbody>
</table>
Name:

General Info.
Birthday: ##-##-####
Food Allergies:
Contact: Name (Home; Mobile)

Academic Info.
General:

ELA:

Math:

IEP Status and Goals:

Accommodations/Modifications:

Behavioral Info.
Works Well with:

Triggers:

Intervention:

Other important information:
FAQ Sheet
IEP Ideas

What are some ideas for Specially Designed Instruction that I can include in an Individualized Education Program?

Specially Designed Instruction (SDI) is anything specific and unique to your child, determined by their areas of need, to help them access their education. It is based on the evaluations done on your child. SDIs are used to help your child achieve the goals listed in the Individualized Education Program (IEP). Most SDIs should be applied across all environments, not in just one class or classroom. They are adaptations or modifications to the regular curriculum. SDIs are in place to help your child reach his or her IEP goals and objectives. The lists below will give you a starting point for brainstorming about your child's IEP.

**Visual/Audio Assistance**
- Visual charts
- Visual schedules
- Visual cues in locker, lunch box, or on desk
- Written schedules on locker, lunch box
- Visual cues in hallways to guide child to next classroom or cafeteria
- Use of FM headsets to either have blocking out music, or FM transmission of teacher speaking,
- Special sign or signal between teacher and student to notify student of something
- Graphic organizers
- Choice cards
- Emotion Cards
- Ear plugs or headphones
- Adaptive equipment such as pens, pencils, calculators, fidgety toys, large print books, audio, etc.
- Watch videos of social stories/interactions and ask them to explain
- Visual schedule on blackboard
- Alarms as reminders on phone, wristwatch, etc.
- Picture calendar or schedule
- Provide audio recordings
- Provide video/audio recordings
- Voice recognition software
- Remind student to wear glasses/hearing aids
Token board
Pencil grips and slant boards
High contrast materials, limited visual clutter
Reward charts
To-do lists
Show example of completed projects

Test/Homework Assistance
- Extra time to complete the work or reading given
- A quiet area to complete the work or take a test
- Having someone read the material to them
- Having someone read a test to them
- Minimal use of open ended statements or questions
- Allow 5-10 second (whatever the child needs) processing time when a request is made
- Chunk down verbal instructions
- Use only 1 question or instruction task at a time if the child cannot do 2-3 part questions
- Homework assignments chunked down by teacher to define each task
- Breaking down tests into segments
- Alternatives for completing assignments (typed instead of written, or verbal)
- Clear, concise instructions that are at the child’s ability
- Provide notes, outlines or organizers with key concepts or terms highlighted
- Mnemonics
- Explain metaphors and double meanings
- Limit oral questions to the number that the child can manage
- Frequent test breaks with opportunities to move
- Testing in a study carrel
- Testing in the morning only
- Masking test items so only single questions are visible
- Allow use of preferred writing implement
- Test format to tap “recognition memory” such as matching or multiple choice rather than fill in the blank without a word bank
- Use of a scribe or oral testing to open ended or essay formats
- Provide a study guide
- Extra set of text books (1 for home, 1 for school)
- Permission to hand in all assignments late, as pre-determined
- Modify assignments to only include essential content
- Access to resource room or learning support room
- Spelling dictionary, or spell checker
- Longer assignments broken down and scheduled out in pictures or words
Structuring the Student’s Environment at School

- A quiet area to complete the work or take a test
- “Preferential Seating”, means sitting near the front, or away from distraction or in their area of preference.
- Preferential seating for hearing/audio
- Preferential seating away from distractions, windows, doors, speakers
- Early dismissal from class to get to locker and to next class
- “Hot pass” or “cool off card”, which is a card the student gets and they can leave class, flash the hot pass to the teacher, and go to the office, guidance counselor, nurse (designated ahead of time) to cool off, if they feel a negative behavior coming on (usually happens after peer to peer interactions such as bullying)
- Personal time outs to regroup and prepare for transition
- Time warnings and increased transition time
- Do not use sarcasm or inferences when communicating with student
- Adapted lunch setting to reduce sensory stressors
- Adapted recess with adult lead activities to increase peer interactions
- Recess and group activities to be designed with IEP goals in mind
- Monthly, weekly or bi-weekly phone or in person conferences with parents (progress monitoring)
- Have child write down verbal questions to aide in processing
- Advance notice of transitions
- Speak slower
- Use literal language
- Give sensory breaks- have the child carry down attendance sheets or just a few envelopes to the office to allow for movement
- Timed bathroom breaks
- Encourage but do not force eye contact; forcing eye contact may break train of thought
- Awareness of sensory issues- smells, sounds, lighting; adjust as appropriate
- Set up opportunities for child to self advocate
- Keep days and activities structured
- Buddy system for unstructured times
- Peer to peer tutoring as appropriate
- Structured social skills groups
- Role play
- Social stories
- Yoga, meditation, relaxation techniques
- Education sessions for peers to help them understand disability
- Pre-teaching information, then post-teaching afterwards
- Structured seating arrangements
Activity based learning  
Provide direct feedback in appropriate settings  
Cooperative games rather than win/lose  
Facilitated socialization at recess, lunch, breaks  
Role playing—both with successful and undesired outcomes (i.e.-troubleshooting)  
Small group instruction  
Provide facilitated experiences  
AM/PM check in with preferred staff person  
Use of prompt hierarchy  
Incorporate child’s personal interests into activities whenever possible  
Journal  
Frequent reinforcement for desired/positive behaviors  
When appropriate and will not cause a distraction—guide student through real life situations  
Provide with calming strategies  
Use of first__________, then__________.  
Peer modeling—appropriate play, interaction  
Scheduled sensory breaks  
Task strip with preferred activity at the end  
Intersperse preferred and non-preferred tasks  
Develop a sensory diet  
Agenda check list for check-ins with preferred staff member  
Intersperse easy and difficult demands on a 80/20 basis (and work to increase)  
Pair with student prior to learning a new task  
Give the opportunity for practice  
Identify and limit distractions

Information courtesy of A Day in Your Shoes:  
http://adayinourshoes.com/printable-list-of-strategies-sdis-for-your-iep-meeting/
<table>
<thead>
<tr>
<th>5 good things he/she does now</th>
<th>5 things I would like to see him/her learn to do less often</th>
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</table>
Sample Letter to Request External Review of Autism Assessment or Treatment Denial - For Private Insurance

Your Name
Your Address

Date

Name and Address of the Health Plan's Appeal Department

Re: Name of Child: 
Plan ID Number:
Claim Number:
Provider Name:
Date(s) of Service:

To Whom It May Concern:

I am writing to request [a standard/an expedited (select one)] external review of your denial of the claim for assessment, treatment, or services provided by [name of provider on date provided].

The reason for denial was listed as [reason listed for denial on the plan's internal appeal determination], but I have reviewed my policy and/or discussed the treatment with my child's provider and believe the treatment or service should be covered.

Here is where you may provide more detailed information about the situation. Write short, factual statements.

You do not need to resubmit documents that you sent for your internal appeal. If you are including new documents, include a list of what you are sending. For example:

• Reference and attach letters from your child's medical providers, including your child's treatment plan, prescriber's evaluation or statement of medical necessity, provider's progress notes, etc.
• Reference and attach a copy of the internal appeal denial determination and the Plan's EOB, if applicable.
• Reference and attach proof of your child's age and provide a copy of your child's Insurance card (if either age or coverage is in dispute). Reference and attach proof of your child's Autism Spectrum Disorder diagnosis (if diagnosis is in dispute).
• Reference and attach published research, if applicable.
• Reference and attach any other new documents you wish to provide to support your appeal.

Please send me a list of the documents being sent to the CRE at the address below. I look forward to receiving your response as soon as possible.

Sincerely,

Signature
Typed Name
Address
Email address
Phone#
Sample Letter to Request Internal Review of Autism Assessment or Treatment Denial - For Private Insurance

(Your Name)
(Your Address)

Date

Name and Address of the Health Plan’s Appeal Department

Re: Name of Child:
Plan ID Number:
Claim Number:
Provider Name:
Date(s) of Service:

To Whom It May Concern:

I am writing to request [standard/expedited (select one)] appeal of your denial of the claim for assessment, treatment or services provided by [name of provider on date provided].

The reason for denial was listed as [reason listed for denial on the plan’s Explanation of Benefits (EOB)], but I have reviewed my policy and/or discussed the treatment with my child’s provider and believe the treatment or service should be covered.

Here is where you should provide more detailed information about the situation. Write short, factual statements.

if you are including documents, include a list of what you are sending. For example:

- Reference and attach letters from your child’s medical providers, including your child’s treatment plan, prescriber’s evaluation or statement of medical necessity, provider’s progress notes, etc.
- Reference and attach a copy of the Plan’s EOB, if applicable.
- Reference and attach proof of your child’s age and provide a copy of your child’s insurance card (if either age or coverage is in dispute).
- Reference and attach proof of your child’s Autism Spectrum Disorder diagnosis (if diagnosis is in dispute).
- Reference and attach published research, if applicable.
- Reference and attach any other documents you wish to provide to support your appeal.

I would like to participate in the appeal meeting, and am available if you need additional Information. My contact Information is below. I look forward to receiving your response as soon as possible.

Sincerely,

Signature
Typed Name
Address
Email
Phone number

(School Aged Years, 15)
Being a teenager isn’t easy. But it’s even harder for a teen with Autism Spectrum Disorder (ASD) - particularly when it comes to friendship.

By the teen or even pre-teen years, parents no longer arrange “play dates.” And the concept of including everyone is no longer the norm, as kids begin to segment themselves into different peer groups, often determined by common interests. It isn’t difficult to see why teens with ASD who have unusual preoccupations may have trouble finding someone who shares their fascinations.

Furthermore, the hallmarks of an ASD diagnosis are impairments in social skills and language abilities. Yet these are the very tools so necessary to make teen friends. Teenage conversations go beyond what is spoken. They rely on more subtle forms of language, such as body language, facial expressions, and speech inflections. They demand the ability to take another’s perspective and to interpret someone else’s theory of mind. Difficulty picking up on these social cues can lead to social gaffes, misunderstandings, and potentially rejection, isolation, and bullying.

Complicating things are co-occurring conditions that many with ASD have. In particular anxiety can make it difficult for your teen to try to make friends, particularly if he or she has had trouble in the past. Unexpected behaviors (whether stimming, tantrums, or uncontrolled emotions) may make peers wary of getting to know your teen.

Your child may benefit from counseling to learn social skills, overcome anxiety, and learn to regulate his or her behaviors. But aside from having a really good behavior plan and Individualized Education Program (IEP) and filling the week with social skills groups, what can your teen do to develop friendships?

- *Initiate and reciprocate*. It takes a friend to be a friend. Your teen may need to be the one to make the first move. Though it may be uncomfortable for your teen, encourage him or her to initiate social interaction. This starts by simply saying “Hi” to people in the hallway at school and asking people about their weekend, talking about the upcoming Geometry test, or commenting on the school lunch offerings. When someone talks to your teen, your teen needs to know how to respond appropriately. (Here’s how
that social skills group can be helpful.)

- **Get involved.** Encourage your teen to join clubs or organizations at school and in your community. You may even want to require that your teen find two afterschool activities to take part in. After all, if your son or daughter comes home and plops in front of the TV or computer every day, the opportunities for developing friendship are limited. Help your child find something that he or she is interested in. If your teenager likes sports, join a team, even if it is as the manager or statistician. Team sports can sometimes be difficult to learn in the teenage years, but sports like tennis and squash have developmental leagues for people of all ages, which may help your teen to meet new people and even develop a healthy new passion. If sports aren’t your child’s thing, perhaps it might be drama, robotics, or cooking. Your local YMCA and/or community college likely will have an array of classes to choose from if there isn’t something available at your teen’s school. The local church or synagogue likely has a youth group with planned and supervised activities too.

- **Encourage age-appropriate activities when possible.** If your teen continues to have interests in activities that other kids his or her age have outgrown, consider making a deal with your child. Your child can go to a Lego® group (his preference) if he tries something new (robotics, for example). If your child is not developmentally ready for a group with same age, typical peers, consider finding a special needs group that your child can join. Expand your child’s horizons, but don’t put your child in a situation that is too much for him or her to handle. Start with what is comfortable and branch out from there if needed. The point is for your child to have the opportunity to practice social skills and develop friendships. It is important that your teen experience success, regardless of the setting.

- **Blend in.** As most teens will tell you, it is important to act and look like everybody else. Maybe your teenager doesn’t care what he or she wears, but peers at school will notice and judge accordingly. Pay attention to what other kids are wearing and how they wear it. (For example, how low are their pants on their waists? How long is their hair? Do they wear basketball shoes instead of pull-ons? Do they wear graphic t-shirts of popular bands or collared shirts? Jeans or khakis? Carry a backpack or use a rolling cart?) The point is not to inhibit your child’s individuality but to make sure your teen is not an easy target for teasing or bullying.

- **Practice good hygiene.** The easiest way to being ignored, shunned, or worse is to have body odor or bad breath. Make sure your teen takes regular showers, brushes his or her hair, wears deodorant, doesn’t wear too much cologne or perfume, and practices good grooming skills daily.

- **Know what’s cool.** Learn what is popular and expose your child to it. This will give your teen something to talk about or enable him or her to join a conversation with peers. Watch popular movies and TV shows with your child so you can explain any uncharted content. While you may be worried that a popular show is “too advanced” for your son or daughter, recognize that if it is popular with your child’s age group, your child will become exposed to it one way or another.

The most important variable in whether your teen develops friendships is his or her desire to do so. Some teens with ASD don’t much care if they have a friend until they see a reason for having one, perhaps to have a girlfriend or a date to a school dance. Until that motivation, they are comfortable being alone. After all, friendship is hard work: sharing, compromising, showing interest in someone else’s passions, and being sensitive to someone else’s feelings.
Being able to be a friend as well as having one doesn't happen overnight. Remind yourself and your child that friendship is a process, not an end to itself.

Related Articles:

- ADOLESCENCE
- SEXUALITY INSTRUCTION FOR TWEENS, TEENS AND YOUNG ADULTS
- SPEECH, LANGUAGE, AND COMMUNICATION
- BULLYING
- CO-OCCURRING CONDITIONS OR CO-MORBIDITIES
- STIMMING: WHAT IS IT AND DOES IT MATTER?
- TEACHING YOUR CHILD HYGIENE AND GROOMING SKILLS

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ARE FOUR YEARS OF HIGH SCHOOL ENOUGH? WHEN TO STAY LONGER

Most High School students can't wait for graduation day. It is often seen as a day that marks the end of four years of hard work and that signals the transition to adulthood. But if you have a child with Autism Spectrum Disorder (ASD) who is receiving special education services, your child is entitled to stay in High School until the end of the school year in which your child turns 21. For many students in special education, this can mean an additional three or even four years of free education. Should you take advantage of this opportunity?

The decision to stay in school past the usual four years of High School is very much an individualized one and should be based on your child's needs and your child's and your own preferences. Below are things to consider when deciding what is best for your family.

- **Is your child eligible to graduate?**
  - States have different graduation requirements; however, in general students graduate when they have the requisite number of credits, have passed one or more required assessments, and/or have reached the goals set in their Individualized Education Programs (IEPs). If your child doesn't seem on track to meet the requirements of your state and district, perhaps some extra time in High School will make it easier to do so. If you are not sure of your child's progress, request an IEP meeting to discuss and also consider requesting a re-evaluation of your child's present educational levels, needs, and skills.

- **What will your child do after High School?**
  - Higher education? Perhaps your child can benefit from taking classes at a community college while still enrolled in high school. Students can be "dually enrolled," so long as the classes taken at the community college level are in furtherance of the student's IEP goals. If your child is considering a trade school, there are many "vo-tech" programs in high school, which may provide the training your child is looking for.
  - Supportive day program? These can be difficult to find and the hours may not be as long as the school day your child is accustomed to. Create an IEP that mimics what you hope to obtain through a supportive day program. The program could include community outings to help improve your child's ability to purchase food from a grocery store, eat in a restaurant, or take part in recreational activities, or instruction on doing laundry and other necessary home chores, for example.
  - A job? Vocational training is often available to High School students with IEP goals related to developing job skills. Indeed, once your child turns 18 (even earlier in some states, like Pennsylvania, through the Early Reach Initiative), his or her IEP can include working with the local Office of Vocational Rehabilitation (OVR) to further refine interests and abilities and to obtain a job coach or participate in job sampling. Research shows that individuals with ASD are
often unemployed or underemployed (working in a job below their capabilities). Extra time to refine skills and to
develop work experience can only help in today's job market.

- Unsure? This uncertainty may be an indication that your child could benefit from more time in High School to develop
both short and long term goals for the future. Your child's Transition Plan (a part of the IEP) should include support to
help your child and you come up with a plan.

- **How are your child's independent living skills?**
  - Your child may benefit from extra time to develop adaptive skills, such as learning to use public transportation,
  hygiene self-care, or money math skills. Take an honest inventory of areas in which your child needs assistance and
develop IEP goals to help your child learn to do more for him or herself.

- **Does your child like school?**
  - Some students simply don't like attending school. Maybe they've had a bad experience, such as bullying, frustration,
or isolation. These students may be adamant that they aren't going any longer, despite what parents, teachers, and
therapists may think best. By changing up what, how, and where your child learns in High School, perhaps by
providing instruction at a job site or at a vo-tech program specializing in developing a special interest (computers, for
example), your child may realize that continuing High School doesn't have to mean continuing to take the same
subjects in the same building.
  - Your child's wish to leave High School after four years may relate to his or her perception that not finishing in four
somehow reflects badly on him or her as a person; your child may think he or she is a failure if more time is needed.
These thoughts are closely related to self-esteem and self-advocacy. Work with your school's counseling department
or a private therapist to make sure your child has a positive self-image.
  - Your child may wish to graduate in four years so that he or she can take part in the graduation ceremony with his or
her same age peers. In many states, including Pennsylvania, students with IEPs who are continuing their High School
Education beyond four years are allowed to participate in the graduation ceremony for their class, and will receive a
certificate of completion in place of a diploma at the ceremony.
  - As a member of the IEP team (beginning at age 14 or 16, depending on the state in which you live), your child should
be an active participant in IEP meetings. This enables your child to learn about different curricular and placement
options and to weigh in on his or her preferences. If your child remains adamant about finishing High School in four
years, listen to your child and respect his or her right to self-determination.

Remember, there is some middle ground. Your child may stay only one or two years extra, if this is what is needed and appropriate to accomplish the transition goals established by the IEP team. Staying until age 21 is an option, not a requirement.

**What if My School Wants My Child to Graduate After Four Years?**

Sometimes schools and parents disagree as to whether a student is ready to graduate. Perhaps you and your child wish to extend the high school years in order to have additional time to work on work, life, or educational skills. Yet the school believes that your child will meet graduation requirements and be able to graduate after four years of High School. What should you do?
Graduation is considered a change in placement for a student with an IEP. If your child has an IEP, your school must provide you with written notice of the school's intent to graduate your child from High School. If your child is not yet 21 years old, you may disagree with this decision by utilizing dispute resolution.

Additionally, you may want to request a re-evaluation of your child. The school is not required to re-evaluate your child prior to graduation; however, getting an updated assessment of your child may help you and the rest of the team determine if indeed your child has met IEP goals and is ready to graduate.

To help avoid conflicts over the graduation timeline, it is very important for you and your child to be active participants developing the Transition Plan, which is contained within your child's IEP. This way, you can include a series of goals for your child to work on. When one goal is reached, another related and more challenging goal can replace it, ensuring that your child has time to generalize and expand upon what is learned.

Related Articles:

- GRADUATION TESTING
- IEP REQUIREMENTS RELATED TO TRANSITION TO ADULTHOOD
- COLLEGE OR EMPLOYMENT: WHAT'S RIGHT FOR ME?
- WHAT IS VO-TECH?
- FINDING A JOB: MEASURING YOUR INTERESTS AND APTITUDE
- WHAT TO EXPECT FROM OVR
- FUNCTIONAL SKILLS
- INDEPENDENT LIVING: ARE YOU READY
- THE IMPORTANCE OF SELF-ESTEEM
- OVERVIEW OF DISPUTE RESOLUTION PROCEDURES FOR FAMILIES IN PRESCHOOL AND SCHOOL-AGE SPECIAL EDUCATION PROGRAMS

Additional Resources:

- OVR EARLY REACH INITIATIVE

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The Transition Process in Your IEP

Developing a Vision / Post-School Outcome Statement

The following are some guiding questions to help you think about your outcome statement. All of these questions should be considered in developing a vision for your child.

1) Where do you want to see your child 1 year after completing high school?

2) Where do you want to see your child 5 years after leaving high school?

3) What are your child's goals and expectations for him/herself for after high school?

4) What are your child's interests and preferences? Are they included in your vision statement?

5) Where will your child live (housing)?

6) Where will your child working? How will he/she earn money?

7) What does your child like to do to have fun?

8) What friends and relationships will your child have after high school?

9) What quality of life will your child have?

The following are a few examples of a vision statement:

> - "It is our dream that with support Jim will be employed in a job he enjoys and will be accepted by and be able to live in our community and have people in his life that are not paid to be there, even perhaps to continue his education. He deserves the same opportunities as his typical peers."

> - "I envision Sue Anne attending the college that will provide her with the support she needs to complete her degree and be able to live in a dormitory with peers and be able to manage living away from home with the independent living skills needed for future self-sufficiency."

> - "I envision Paul working at a job he finds interesting and can perform, living in his own apartment with supports, have friends who share the same interests as Paul and be an active member of his church, community and government."
Transition Planning Survey and Profile Information

Student Name: ___________________________ Birth Date: ___________________________

Age: ____ School: ___________________________

Grade: ____ Projected Graduation Year: ___________________________

Student's and Family's Preferences and Interests:

Student:

Family:

Preferred Post School Outcome Settings:

Employment/Post Secondary Education:

- Competitive Employment
- Supported Employment
- Vocational/Technical School
- College/University
- Other ___________________________

Living Arrangement:

- Live Independently
- Live with other non-relative(s)
- Live with relative(s)
- Live with immediate family
- Live in supervised setting
- Other ___________________________
## Planning Areas:

### Employment:

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<tbody>
<tr>
<td>1. Knows job requirements and demands</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>2. Makes informed choices</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>3. Knows how to get a job</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>4. Demonstrates general job skills and work attitude</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>5. Has specific job skills</td>
<td>Yes</td>
<td>No</td>
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### Further Education/Training:

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<tr>
<td>6. Knows how to gain entry in community employment training</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7. Knows how to gain entry into GED program</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>8. Knows how to gain entry into vocational/technical school</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>9. Knows how to gain entry into college or University</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>10. Can succeed in a postsecondary program</td>
<td>Yes</td>
<td>No</td>
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### Daily Living:

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<tr>
<td>11. Maintains personal grooming and hygiene</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>12. Knows how to locate place to live</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>13. Know how to set up living arrangement</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>14. Performs everyday household tasks</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>15. Manages own money</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>16. Uses local transportation system</td>
<td>Yes</td>
<td>No</td>
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### Leisure Activities:

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<tbody>
<tr>
<td>17. Performs indoor activities</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>18. Performs outdoor activities</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>19. Uses settings that offer entertainment</td>
<td>Yes</td>
<td>No</td>
</tr>
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### Community Participation:

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<tr>
<td>20. Knows basic legal rights</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>21. Participates as an active citizen</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>22. Makes legal decisions</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>23. Locates community services and resources</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>24. Uses services and resources successfully</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>25. Knows how to obtain financial assistance</td>
<td>Yes</td>
<td>No</td>
</tr>
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</table>

This publication is supported by an Educational Rights Grant from the Pennsylvania Developmental Disabilities Council.
Health:

26. Maintains good physical health  Yes No
27. Address physical problems  Yes No
28. Maintains good mental health  Yes No
29. Address mental health problems  Yes No
30. Knows about reproduction  Yes No
31. Makes informed choices regarding sexual behavior  Yes No

Self-Determination:

32. Recognizes and accepts strengths and limitations  Yes No
33. Expresses feelings and ideas appropriately  Yes No
34. Expresses feelings and ideas confidently  Yes No
35. Sets personal goals  Yes No
36. Makes personal decisions  Yes No

Communication:

37. Has needed speaking skills  Yes No
38. Has needed listening skills  Yes No
39. Has needed reading skills  Yes No
40. Has needed writing skills  Yes No

Interpersonal Relationships:

41. Gets along well with family members  Yes No
42. Demonstrates knowledge and skills of parenting  Yes No
43. Establishes and maintains friendships  Yes No
44. Displays appropriate social behavior in a variety of settings  Yes No
45. Demonstrates skills for getting along with co-workers  Yes No
46. Demonstrates skills for getting along with supervisors  Yes No

Other Areas Not Addressed:

47. ____________________________________________  Yes No
48. ____________________________________________  Yes No
49. ____________________________________________  Yes No
50. ____________________________________________  Yes No
Student Preferences and Interests:
(Student Survey)

1) What do you want to do after high school?

2) If you plan on working, what kind of jobs are you considering?

3) If you plan on going on to school, where are you considering?

4) How will you pay bills after high school?

5) Where do you plan to live after high school?

6) What hobbies and leisure activities do you like?

7) Do you plan on being involved in your community?

8) How do you plan on getting around in your community?

9) How do you plan on taking care of yourself physically and emotionally?
10) How will you handle making decisions and setting goals that need to be made about your life?

11) How do you best get information - reading or asking questions?

12) How do you best share information - speaking, signing or writing?

13) What are your plans concerning marriage and having a family?

14) What type of friendships do you plan on having?

15) What other information may be useful in planning and preparing for your future?
Intentionally Left Blank
Adulthood
**Self-Determination**

- The promotion of self-determination in adolescents with disabilities is considered an essential practice to prepare children with disabilities for the transition to adulthood.
- Fortunately, there are several ways for parents and teachers to promote self-determination in adolescents with ASD.

<table>
<thead>
<tr>
<th>Ways of Promoting Self-Determination</th>
<th>How?</th>
</tr>
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<tbody>
<tr>
<td>Education of the transition process</td>
<td>• Attendance and participation at educational planning meetings (IEP meetings, transition meetings, etc.)</td>
</tr>
</tbody>
</table>
| Self-evaluation of interest, strengths, and weaknesses | • Create lists  
• Take quizzes online  
• Participate in extracurricular activities |
| Teaching goal setting (Identification of hopes and dreams) | • Write down goals  
• Develop objectives to meet goals  
• Track progress  
• Adjust goals as necessary |
| Promote self-awareness and self-understanding | • Identify physical and psychological needs and how to meet those needs  
• Practice communication of interests, beliefs, and values  
• Understand and accept individual differences  
• Identify strategies for handling frustration and stress |
| Teach problem-solving skills | • Teach social skills necessary to address social problems  
• Practice identifying alternative solutions to problems  
• Identify consequences of possible actions and their likelihood of occurring  
• Use analysis and exploration to solve problems |
| Encourage decision making | • Provide more opportunities for choice making in multiple contexts  
• Clear communication regarding the limits of choice making  
• Don’t assume decisions, preferences can change  
• Discuss risk and long-term consequences of current choices |
| Promote self-advocacy (how to advocate and what to advocate) | • Present during educational planning meetings in high school  
• Teach assertiveness (not aggressiveness)  
• Education on rights after high school  
• Teach effective listening skills |
Supported Decision-Making: Frequently Asked Questions

**What is supported decision-making?**

Supported decision making (SDM) is a tool that allows people with disabilities to retain their decision-making capacity by choosing supporters to help them make choices. A person using SDM selects trusted advisors, such as friends, family members, or professionals, to serve as supporters. The supporters agree to help the person with a disability understand, consider, and communicate decisions, giving the person with a disability the tools to make her own, informed, decisions.

**What does supported decision-making actually look like?**

SDM will look different for everyone.

It means finding tools and supports to help a person with a disability understand, make, and communicate her own choices. Examples of these tools might be:

- plain language materials or information in visual or audio form
- extra time to discuss choices
- creating lists of pros and cons
- role-playing activities to help the person understand choices
- bringing a supporter into important appointments to take notes and help the person remember and discuss her options
- opening a joint bank account to manage financial decisions together

Once Supported Decision-Making is formally recognized (as it is already in Texas), then a person with a disability will be able to sign a formal document with his supporters in which they all agree to undertake SDM. This document would help doctors, bankers, lawyers, and other third parties to feel confident in accepting the decision of the person with a disability without fearing lawsuits or malpractice claims.

**How is SDM different from a durable power of attorney?**

A durable power of attorney identifies the person who will be the substitute decision-maker if a person becomes incapacitated. It is a complex document that may require a high level of understanding to execute validly.

An SDM agreement identifies the people who will support the person in making her own decisions. It goes into effect right now. It is not a contract, but an authorization, and is much easier to understand and execute validly.

**How is SDM different from person-centered planning?**

Person-centered planning is an approach to future planning and Individual Program Plan (IPP) development that focuses on the preferences of a person with a disability and his or her family. Person-centered planning is a great example of a type of supported decision-making. For many people, the person-centered planning process will be one of the tools they use to support their decisions.
**How is SDM different from guardianship (called conservatorship in California)?**

<table>
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<tr>
<th>GUARDIANSHIP/CONSERVATORSHIP</th>
<th>SUPPORTED DECISION-MAKING</th>
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<tbody>
<tr>
<td><strong>Who makes the decision?</strong></td>
<td>The person with a disability uses support, but ultimately makes the final choice about his own life.</td>
</tr>
<tr>
<td>The guardian/conservator has the right to make the final decisions about the ward/conservatee’s life</td>
<td></td>
</tr>
<tr>
<td><strong>What is the role of the court?</strong></td>
<td>All changes have to go through the court.</td>
</tr>
<tr>
<td>If there is a problem with a conservator or guardian, or if the conservator or guardian dies, the court must approve any changes or appointment of new guardians/conservators.</td>
<td>The person with a disability can change the supporters they use anytime they want without a court process.</td>
</tr>
<tr>
<td>The court can replace a guardian or conservator with someone else if they think it best, or grant the conservator/guardian more powers than they requested.</td>
<td>They can easily add supporters and get the insights of many people.</td>
</tr>
<tr>
<td><strong>What are the protections against abuse?</strong></td>
<td>Typically, only one conservator/guardian makes all the decisions for one conservatee/ward.</td>
</tr>
<tr>
<td>The court technically oversees the relationship but rarely does so in practice.</td>
<td>There will usually be multiple supporters. They may provide support in different areas (i.e., a parent may help with money, while a friend or staff member may help with social decisions); or they may work together to provide support (i.e., two supporters help the person make medical decisions).</td>
</tr>
<tr>
<td><strong>How are the person’s needs assessed?</strong></td>
<td>The abilities and needs of the person with a disability are determined by a judge based on the person’s I.Q. score and diagnosis.</td>
</tr>
<tr>
<td>The court looks at what the person can do by herself, without any assistance or support.</td>
<td>The person’s abilities are based on what she can do both alone and with supports.</td>
</tr>
<tr>
<td>The court assumes that these needs will remain the same over the course of the person’s life.</td>
<td>The person can modify the supports she needs and the supporters who provide these over the course of her life, as she continues to learn and develop decision-making skills.</td>
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</table>
**How is SDM different from Regional Center authority to consent to medical treatment under the California Lanterman Act? (Specific to California residents)**

Section 4655 of the Lanterman Act allows the director of a Regional Center or their designee to consent to medical, dental, and surgical treatment for a Regional Center client under certain circumstances. This requires a determination that the person is “mentally incapable” of providing consent.

The Regional Center designee is typically unfamiliar with the patient and must quickly learn a great deal about the patient’s preferences, health, and abilities. By contrast, the supporters identified in an SDM agreement are close and trusted friends of the person with a disability, and are more likely to be accessible and in close proximity to the person. An SDM agreement would likely allow the process of medical consent to proceed more smoothly than providing consent under Section 4655. SDM also avoids the need to label the patient as mentally incapable.

**How is SDM different from discussions we have at home with my child with a disability?**

Many families, support staff, and other advocates are already having conversations and using SDM in their everyday lives. Helping a person learn decision-making skills by making her own choices with help and guidance is supported decision-making.

**So, if I’m already doing this, what does it matter what we call it?**

Even though many families and support workers are already using supported decision-making, formalizing SDM can help ensure that the choices of people with disabilities are respected. People with disabilities who do not have guardians or conservators may find that doctors, nurses, bankers, teachers, or lawyers do not believe that the person with a disability has “capacity” to make his own choice. Sometimes hospitals will tell families that they must get a conservatorship or guardianship before a surgery or procedure can be performed.

Recognition of SDM would allow a person with a disability to present his SDM agreement in a situation like this. The agreement would serve as documentation that the person is able to make his own choices, as assurance to the doctor that the person’s decisions are informed and supported, and as protection against malpractice, as long as the doctor relies on the agreement in good faith.

Recognition of SDM is also important to emphasize that people with disabilities have rights and autonomy.

**Where can I learn more about supported decision-making?**

ACLU Disability Rights Program, [www.aclu.org/disability](http://www.aclu.org/disability)

National Resource Center for Supported Decision-Making, [supporteddecisionmaking.org](http://supporteddecisionmaking.org)

Quality Trust for Individuals with Disabilities, [dcqualitytrust.org](http://dcqualitytrust.org)
Employment

**Supported Employment**

Supported employment is a service that can help your child gain competitive employment in integrated work settings, and then provide ongoing support services to help him/her maintain a position. Job coaches, co-workers, business supervisors, and mentors have all been utilized as employment supports for people with autism.
It is essential to research potential supported employment providers in your area and to help your son or daughter determine the support and job options that are most appropriate for him/her. State VR programs can assist you with this process of identifying and selecting a service provider. There have been many interventions developed in supported employment. You can review what interventions may work best with the job coach working with your son or daughter. There are online resources to assist with this task, many of which can be found at the following websites:

- www.worksupport.com
- askjan.org

The development of self-advocacy skills, are critical to your son or daughter successfully entering adulthood and employment. Information how to effectively build these skills can be found online on Autism Speaks’ Employment Toolkit along with many other helpful tools.

For more information, search the following on the Internet:

- Autism Speaks Employment Tool Kit
- An Employer's Guide to Hiring and Retaining Employees with Autism Spectrum Disorders
- A Parent's Guide to Employment for Adults with Autism Spectrum Disorders
- Autism in Big Business Report

**Housing**

As part of the transition from childhood to adult life, planning inevitably includes housing decisions. Finding and securing housing and residential supports for adults with autism can be challenging for the individual and the family.

**Housing Options:**

- Supervised Living (Semi-Independent Living) offers more direct and intensive structured supports available 24 hours a day, if needed.
- Group Home Living has been the traditional model for residential services for individuals with developmental disabilities. In a group home, several unrelated people (all of whom have a disability) live together with onsite staff who are present 24 hours a day, 7 days a week.
- Group Living/Ownership (Co-op) is similar to group home living, except that the house itself is owned by a group of families or individuals who have formed a cooperative
agreement. Caregivers hired by the cooperative, and in some cases, by an agency contracted by the cooperative, provide support services.

- Teaching Family Model/Foster Home Living offers family-style living with support services available 24/7 by professional teaching parents, usually a married couple.
- Assisted Living Facilities/Intermediate Care Facilities (ICF) provide assistance with personal care and activities of daily living such as bathing, grooming, dressing, and more. In some states, ICF programs also provide medication assistance and/or reminders.
- Nursing Homes can be used to provide housing and support services to those who are more medically fragile or aged.

How Do I Begin the Housing Search?

**Supports and Services Needed**

- Can I live alone safely?
- Can I take care of my personal hygiene needs?
- Can I organize and pay my own bills?
- Can I go grocery shopping?
- Can I cook?
- Do I need behavioral supports?
- Can I manage my own medication?

**Location**

- Do I need public transportation?
- Do I want to be able to walk to recreation areas, shopping and other community activities?
- Do I want to live near a hospital, movie theatre or family members?
- Do I need to be near my job or volunteer site?
- How close do I want my neighbors to be?

**Interests and Preferences**

- Do I want to live alone or with a housemate?
- Does it matter?
- Do I want a dog, cat or other pet?
- Do I want my own bathroom?
- Do I want to be able to cook my own meals?
- Do I want the freedom to come and go as I please?
- Do I want to live with people of the same sex, opposite sex or both?

**Financial Considerations**

- What are the sources of my monthly income?
- How will this change over time?
- What are my monthly expenses?
- Do I have a special needs trust? How can those funds be used?

Questions to Consider

Online Resource: Autism Speaks Housing and Residential Supports Tool Kit
Ending of IDEA (school-based education supports)

- The Individuals with Disabilities Education Act (IDEA) allocates federal funding to state and local school districts to provide special education services to eligible students with disabilities. Under IDEA, a child is entitled to special education services (defined as a free and appropriate education in the least restrictive environment) from three through 21 (in most states). Once the child leaves the school system, whether at age 18 or age 21, the educational entitlements of IDEA are no longer in place. Some refer to this scenario as when “the school bus stops coming to the home.”

The Rehabilitation Act

- Includes a variety of provisions focused on rights, advocacy and protections for individuals with disabilities. Section 504 of this act is a civil rights law that protects people with disabilities from discrimination related to services, employment and public accommodations. Section 504 applies to any institution that receives federal funds such as schools, public colleges, hospitals, non-profit agencies and public housing.

The Americans with Disabilities Act (ADA)

- A federal law that prohibits discrimination against people with disabilities in employment, and mandates that these individuals have the right to public accommodations, as well as access to programs of public agencies. The ADA protects against discrimination only if the individual could participate in the program or perform the job with “reasonable accommodations.” Without the accommodations, the individual must be “otherwise qualified.” It is important to note that after high school, the accommodations accessed through ADA or Section 504 are not provided automatically, but must be requested by you or your young adult with autism.

- The Office of Fair Housing and Equal Opportunity (FHEO) administers and enforces federal laws and establishes policies that make sure all Americans have equal access to the housing of their choice.

- The National Disability Rights Network (NDRN) is a nonprofit membership organization for the federally mandated Protection and Advocacy (P&A) Systems and Client Assistance Programs (CAP) for individuals with disabilities. Collectively, the P&A/CAP network is the largest provider of legally-based advocacy services to people with disabilities in the United States.
Safety

Being a part of the community is especially important for the livelihood and independence of individuals with autism. Venturing out into the community however involves many safety risks that are not necessarily experienced in the home or at school.

Top Safety Risk for Individuals with Autism:

- Wandering
- Pica (eat non-food items such as clay, mud, paperclips, hair, or paint)
- Drowning
- Household toxins

Safety Plan Checklist

- Does the individual with autism tend to wander, run away or get lost in a crowd?
- Have your home, school and community activities been evaluated for safety? Have preventative measures been put into place in each of these areas?
- Does the individual ALWAYS wear identification with a contact number listed?
- Have you let your neighbors/community know about your child with autism?
- Are safety skills included in the Individual Education Program in your school district?
- Have you contacted your local 911 call centers?
10 Things I Wish People Knew About Dating Someone on the Autism Spectrum

Author: Kerry Magro, May 31st 2016

When I started dating at 18 I had NO idea how to talk to women. Many of the people I dated meant well however they may not have understand some of the quirks that people on the spectrum like me may have. For example as a kid I hated being touched. Ten years later as a 28-year-old adult I embrace affection.

Here are some things you need to know when it comes to dating someone with autism…

10. Just because we may want to be by ourselves at times doesn’t mean we don’t care about you. Some of us want to unwind during a long day just like anyone else.

9. Eye contact may be difficult for us at times. When we are having a conversation if I’m not looking at you right in the eyes don’t think I’m trying to give you the cold shoulder.

8. Ask me any question you have. Although we may have difficulties with communication, we still need you to be as open with us as possible to avoid misunderstandings. Ask us questions early to avoid issues later.

7. If something goes over our head try to make me understand what you meant. Sarcasm can sometimes go over our heads and when it does, know that we truly want to understand.

6. We can date people who aren’t on the autism spectrum. Often a misconception is that people on the spectrum want to only date others who are on the spectrum. This couldn’t be farther from the truth. We just want to find someone we connect with and can be ourselves with.

5. If you’re shocked that I have autism don’t be. Some people on the spectrum tend to fall on the line of an ‘invisible disability.’ That means if we are on a date you may not see any characteristics of autism on the surface but it doesn’t mean I’m not on the spectrum. Autism is a spectrum disorder.

4. If you go online before our date and find out I have autism don’t jump to conclusions. See #5. Autism is a spectrum. I once went on a date and within the first 5 minutes she was already talking about how ‘Rain Man’ was her favorite movie… Interesting.

3. Help us understand what you are comfortable with when it comes to being intimate. We aren’t mind readers so tell us when we may be going too fast or to slow. We will respect you even more for being honest with us, as people on the spectrum tend to be some of the most authentic people you will ever meet.

2. Give us time to process small or big-time decisions. After we’ve been together for a while and decisions may arise, whether it be something small like trying a new restaurant or something bigger such as getting married or moving in together, understand that transitions can often be difficult at first for us to comprehend. This isn’t different for any human being on this planet. Sometimes transitions can tend to make us feel overloaded. Don’t feel discouraged. If it works out and we both care for each other we will make it work.

1. Love is love. No matter the person. Love has no race, age, gender, religion, sexuality and disability. It’s the same with autism. Love is love no matter any differences we have in our lives. Love me for the person I am and I’ll do the same with you.

Additional Resources
Should I participate in research?

Some things you NEED to know before deciding to participate in research…

What is research?
Research is the collecting and analyzing of data that is done to answer a question. Some other words for research are clinical trial, protocol, survey, or experiment.

What is a human subject?
A subject is someone who volunteers to participate in research.

Who can be a subject in a research study?
Most research studies have certain requirements that must be met in order for a subject to participate. These requirements are designed to ensure the safety of the subjects and the usefulness of the research. Some studies have broad requirements such as being over 18. Other studies have a more focused requirement such as having a certain disease.

Do I have to participate?
NO! Participating in a research study is voluntary. A subject can drop out of a study at any time. Refusing to participate in a study will not result in a penalty or loss of any benefits to which you are entitled.

Are there risks to being in a research study?
Research may involve different types of risk. A study that asks you to fill out a survey has only minor risks, such as questions that may make you uneasy. For other studies, such as taking an experimental drug, the risks can be much greater (e.g. having a bad reaction to the drug). The research team is required to explain to you the foreseeable risks of being in the study before you decide whether or not to participate.

Are there benefits to being in a research study?
Not everyone who participates in a research study will benefit personally. Sometimes, your participation in the research study will be of benefit to society by helping researchers to learn more about a certain disease or condition. In some studies, however, you may personally benefit from medication that aids in your recovery or from any needed counseling.

Who leads a research study?
The Principal Investigator (PI) leads the research study. The PI is responsible for the overall conduct of the research study. The PI is also responsible for assuring the safety of the subjects. PIs are often faculty, physicians, or students.

Who else is involved in research studies?
Principal Investigators often rely on a research team to assist them in their study. The research team can be made up of research assistants, research nurses, data coordinators, statisticians, and other people with special skills needed for the study.

**Who reviews a study?**
At a university, studies that involve human subjects are reviewed by an Institutional Review Board (IRB) before they are allowed to begin.

**What is an IRB?**
An IRB is a committee of scientists and non-scientists who review projects submitted by researchers. The IRB’s purpose is to protect the rights and welfare of the research subjects in a study.

**Who will see my records?**
Like your medical record, the information in your research record will be confidential. Information will be given only to the researchers who carry out the study or to those who make sure the study is safe and carried out the way it was planned.

**Are there any special rules to help protect certain subjects?** Children, pregnant women, and prisoners can all be participants in research studies, but are considered potentially “vulnerable populations.” There are special rules to protect participants who fall into one of these groups.

**What kinds of procedures are involved?**
Research studies can involve a wide variety of procedures, ranging from filling out surveys and questionnaires to taking experimental medicines or using experimental devices. Some research studies last only a few minutes, while others last for several years. The research team will describe to you all of the procedures that you will be asked to undergo before you agree to be in the study.

**What is informed consent?**
Informed consent is the process of learning the key facts about a research study before you decide whether or not to volunteer. Your agreement to volunteer should be based upon a clear understanding of what will take place in the study and how it might affect you. The consent process begins when the research staff explains the facts about the research study to you. The research staff will assist you with the “informed consent form” that goes over these facts so you can decide whether or not you want to take part in the study. These facts include details about the study, tests, or procedures you may receive, the benefits and risks that could result, alternatives available should you decide not to participate, and your rights as a research volunteer.

**What questions should I ask before I agree to take part in a research study?**
Before you decide to volunteer for a research study, you need to know as much as possible about it. If there are any issues that concern you, be sure to ask questions. The following is a list of important questions. **Not every question applies to every study, but you have every right for answers to all you ask.**

- Will I benefit from this study?
- Who is doing this study and what question might it answer?
- Will this research help me to understand my condition? If so, how?
- Will I miss out on any “normal care” by participating in this study?
• What tests or procedures will be done?
• What alternatives are available if I decide not to participate in the study?
• Is it possible that I will receive only a placebo (inactive substance)?
• What could happen to me, good or bad, if I take part in the study?
• How long will the study last?
• What will happen to specimens I give?
• Who has reviewed/approved this study?
• If I have a condition, could it get worse during the study?
• Will I be charged anything or paid anything to be in this study?
• If I decide to participate in this study, how will it affect my daily life?
• What will happen to me at the end of the study?
• Will I be told the results of the study?
• Who will find out that I am taking part in this study?
• How do I end my participation in this study if I change my mind?
• Whom do I contact for questions and information about the study?
• What risks are involved in this study?

Where can I find reliable autism research information?
- Tarjan Center for Developmental Disabilities tarjancenter.ucla.edu
- UCLA Autism Intervention Research Network on Behavioral Health www.asdweb.org
- UCLA Semel Institute for Neuroscience and Human Behavior www.semel.ucla.edu
- Federal Government Organizations
  - Centers for Disease Control and Prevention http://www.cdc.gov/ncbddd/autism/index.html
- National Organizations
  - Autism Genetic Resource Exchange (AGRE) www.agre.org
  - Autism Research Institute (ARI) www.autism.com
  - Autism Society of America www.autism-society.org
  - Autism Speaks www.autismspeaks.org
  - Center for the Study of Autism www.autism.org
  - OAR – Organization for Autism Research www.researchautism.org
  - Simons Foundation Autism Research Initiative sfari.org
CAPTAIN is a multiagency network developed to support the understanding and use of Evidence Based Practices (EBP) for individuals affected by Autism Spectrum Disorder (ASD) across the state.

CAPTAIN LA’s network comprises of the Los Angeles Unified School District and the South-Central Los Angeles Regional Center. We serve the Central Los Angeles communities.

**Our goals**

- Increase knowledge about Autism Spectrum Disorder (ASD) and evidence-based practices (EBPs) within the communities that we serve.
- Increase implementation and fidelity of use of the identified EBPs by providers and implementers.

**EVIDENCE BASED PRACTICES**

are scientific research interventions shown to be effective, classified by the National Professional Development Center. There are 27 identified EBPs to be effective when implemented correctly with students with ASD.

**McClaney Family Resource Center**
2500 S. Western Ave., 3rd Floor, Los Angeles, CA 90018
213 744-8882
McClaneyFRC.org

**South Central Los Angeles Regional Center**
2500 S. Western Ave., Los Angeles CA 90018
213 744-7000
SCLARC.org

**Los Angeles Unified School District**
Division of Special Education
333 S Beaudry Avenue
Los Angeles, CA 90017
213-241-6701
http://achieve.lausd.net/sped

**Additional Resources, 4**
## Parent Associations & Support

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<thead>
<tr>
<th>Advocates for Special Kids (ASK)</th>
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<tr>
<td>(<a href="http://www.advocatesforspecialkids.org">http://www.advocatesforspecialkids.org</a>)</td>
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<tr>
<td>Phone: 310-480-9310</td>
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<tr>
<td>Dedicated to helping parents with issues related to special education and advocacy for your child.</td>
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<tr>
<th>Autism Society of America (ASA)</th>
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<tr>
<td>(<a href="http://www.autism-society.org">http://www.autism-society.org</a>)</td>
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<tr>
<td>Phone: (800) 3-AUTISM</td>
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<tr>
<td>National group that has many local chapters; dedicated to raising and allocating funds to address needs</td>
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<tr>
<th>Los Angeles Families for Effective Autism Treatment (LA FEAT)</th>
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<tr>
<td>(<a href="http://www.lafeat.org/web">http://www.lafeat.org/web</a>) Email: <a href="mailto:info@lafeat.org">info@lafeat.org</a></td>
</tr>
<tr>
<td>A nonprofit organization dedicated to helping families in the LA area learn about &amp; obtain effective treatment (particular focus on Applied Behavioral Analysis- ABA); also provide parent-mentoring services.</td>
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<tr>
<th>Special Needs Network (SNN)</th>
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<tr>
<td>(<a href="http://www.specialneedsnetwork.org">http://www.specialneedsnetwork.org</a>)</td>
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<tr>
<td>Phone: 213-389-7100</td>
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<tr>
<td>A non-profit organization with a mission of raising public awareness of developmental disabilities, while providing education and resources to families, children &amp; adults.</td>
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<tr>
<th>Autism Society of America, Los Angeles</th>
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<tr>
<td>Phone: 562-804-5556 <a href="http://www.asa-la.org">http://www.asa-la.org</a></td>
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<tr>
<td>Non-profit organization that provides information, referral, support, and advocacy empowerment for the Autism Community.</td>
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<tr>
<th>The Help Group</th>
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<tr>
<td>Phone:877-994-3588 <a href="http://www.thehelpgroup.org">http://www.thehelpgroup.org</a></td>
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<tr>
<td>Serving children, adolescents and young adults with special needs related to autism spectrum disorder, learning disabilities, ADHD, developmental delays, abuse and emotional challenges.</td>
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<tr>
<th>Fiesta Educativa</th>
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<tr>
<td>Phone: 323-221-6696 <a href="http://www.fiestaeducativa.org">www.fiestaeducativa.org</a></td>
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<tr>
<td>Dedicated to empowering families of persons with disabilities</td>
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<tr>
<td>Phone: 562-804-5556 <a href="http://www.autismla.org">www.autismla.org</a></td>
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<tr>
<td>Advocacy, education, support, and community collaboration.</td>
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<tr>
<th>California Department of Developmental Disorders</th>
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<tr>
<td>Phone: 916-654-1690 <a href="http://www.dds.ca.gov">www.dds.ca.gov</a></td>
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<tr>
<td>Services and supports to individuals with developmental disabilities</td>
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<tr>
<th>Grupo de Autismo Los Angeles</th>
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<tr>
<td>Phone: 714-956-0362 <a href="http://www.grupodeautismoangeles.org">www.grupodeautismoangeles.org</a></td>
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<tr>
<th>The Iris Center</th>
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<tr>
<td>Secondary Transition: Helping Students with Disabilities Plan for Post-High School setting</td>
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### Additional Information

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<tr>
<th>National Institute of Mental Health</th>
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<tr>
<td>Friendly Parent Guide to Autism Spectrum Disorder</td>
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<tr>
<th>Center for Disease Control and Prevention</th>
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<tr>
<td>Learn about milestones, your child’s development and how to talk to your doctor about it</td>
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<tr>
<th>Disability Rights California</th>
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<tr>
<td>16 tips for Getting Quality Regional Center Services for Yourself and Your Child</td>
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<tr>
<th>Autism Speaks</th>
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<td>Treatment, transitions, finances, advocacy</td>
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<tr>
<td><a href="https://www.autismspeaks.org">https://www.autismspeaks.org</a></td>
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<tr>
<td>Special Education Rights and Responsibilities</td>
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<th>Center Information for Parent Information and Resources</th>
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<tr>
<td>IEP essential information for parents</td>
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<tr>
<th>San Francisco Unified District</th>
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<tbody>
<tr>
<td>A parent’s Guide to the 1st IEP meeting</td>
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<th>Social Security</th>
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<tr>
<td>Benefits for children with disabilities</td>
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<tr>
<th>Special Supplemental Nutrition Program for Women, Infants and Children (WIC).</th>
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<th>Insure Kids Now</th>
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<tr>
<td><a href="http://insurekidsnow.gov">http://insurekidsnow.gov</a></td>
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<th>California Department of Education</th>
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**South Central Los Angeles Regional Center (SCLARC)**

### Support Groups

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<tr>
<th>Education and Support for Early Start Families</th>
<th>Early Start New Parent Orientation (English)</th>
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<tr>
<td>Early Start English-Speaking Caregiver/Parent /Support Group</td>
<td>An overview of the Early Start program for families who have children determined as eligible. What is the Early Start program and what types of services may be available for children enrolled in the program.</td>
</tr>
<tr>
<td>A support group for parents and caregivers of children ages birth to 3 enrolled in the Early Start program. Held once a month, from 9:30 to 11:30 a.m. – Check FRC Calendar for dates and topics. Family Resource Center, SCLARC 2500 S. Western Ave., 3rd Floor Los Angeles, CA 90018 Contact: Crystal Smith FRC Specialist, 213-744-8878 FRC Main Number, 213-744-8882</td>
<td><strong>First Tuesday of every month, 9:30 to 10:30 a.m.</strong> SCLARC Main Office Family Resource Center 2500 S. Western Ave., 3rd Floor Los Angeles, CA 90018 Contact: Crystal Smith FRC Specialist, 213-744-8878 FRC Main Number, 213-744-8882</td>
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<tr>
<th>SCLARC Early Start Transition Training</th>
<th>SCLARC English-Language 3 and Above Caregiver/Parent Support Group</th>
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<tr>
<td>What is transition? How should I prepare for transition? Questions and answers about the transition process. Presented four times each year. Contact the FRC for dates/times. SCLARC Family Resource Center 2500 S. Western Ave., 3rd Floor Los Angeles, CA 90018 Contact: Crystal Smith FRC Specialist, 213-744-8878 FRC Main Number, 213-744-8882 Education and Support for SCLARC Families (3 and over)</td>
<td>An education and support group for parents and caregivers of SCLARC consumers 3 years and older. Topics vary month to month but include issues related to Government Benefits, IEP Basics, Advocacy, Behavior Management, and much more. Held once a month, 9:30 a.m. to 11:30 a.m. – Check FRC Calendar for dates and topics. SCLARC 2500 S. Western Ave., 3rd Floor Los Angeles, CA 90018 Contact: Crystal Smith FRC Specialist, 213-744-8878 FRC Main Number, 213-744-8882</td>
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<tr>
<th>Literacy Lab</th>
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</tr>
</thead>
<tbody>
<tr>
<td>The purpose of this program is to help you advance your child’s receptive, verbal and non-verbal language skills. The goal is to give parents new and interesting words to use in natural conversations, teach gestures and facial expressions to help children make sense of new words, demonstrate how singing, rhyming and reciting poetry can playfully introduce vocabulary and making learning language skills fun. Fourth Wednesday of every month, 10:00 am to 11:00 am SCLARC 2500 S. Western Ave., 3rd Floor Los Angeles, CA 90018 Contact: Crystal Smith FRC Specialist, 213-744-8878 FRC Main Number, 213-744-8882</td>
<td></td>
</tr>
</tbody>
</table>
Disability Specific Groups

**Autism**

Asperger Syndrome Support Group
C/o Autism Society of Los Angeles
3975 Landmark Street
Culver City, CA 90232
Contact Fran Goldfarb at 310-543-5064
Meets monthly at Julia Ann singer Center in West Los Angeles.
[Website](#)

**Autism Society – LA Chapter**
P.O. Box 8600
Long Beach, CA 90808
Contact Caroline Wilson at 562-804-5556

**Early Intervention**

Good Beginnings
Cedars Sinai Medical Center
8700 Beverly Blvd., #4310
Los Angeles, CA 90048
310-423-6389

Susan A. Moyer
Executive Director
susan@goodbeginnings-csmc.org

Linda Rosenberg
Parent Liaison
Linda.Rosenberg@cshs.org

Dorothy Williams
Director, Forever in Our Hearts
dorothy@goodbeginnings-csmc.org

Anna Fox
Director, Volunteers
anna@goodbeginnings-csmc.org

For families with infants in NICU or graduate of NICU

Bereavement Groups

**South Central Los Angeles Regional Center**
2225 W. Adams Blvd.
LA, CA 90018
Contact Deidre Loewe and Vanessa Hirsi
323-730-2279
310-376-0479

**Bereavement Outreach Program**
Brotman Medical Center
LA, CA
310-390-4711

**Compassionate Friends of Los Angeles**
310-474-3407

**Growing Through Grieving**
P.O. Box 779
Glendora, CA 91740
Contact Kathy Rogers at 818-963-2930
For families throughout Southern California going through the grieving process.

Cultural or Language Specific Groups

**Chinese Parents Association for the Disabled (CPAD)**
23905 Benhill Ave.
Lomita, CA 90717
Contact Lina Yuan at 310-539-5852
(Mandarin and Cantonese)

Educational Support Groups

**IEP Support Group (Informed Education Partners)**
C/o Westside Regional Center
Contact Barbara Marbach at 310-258-4024

**Etta Israel Center**
8846 W. Pico Blvd.
| Filipino Autism Group | Los Angeles, CA 90035  
|----------------------|---------------------------  
| 4879 Townsend Ave.  
| Los Angeles, CA 90041  
| Contact R. Martinez  
| Japanese Speaking Parents Association of Children with Challenges (JSPACC)  
| C/o Little Tokyo Service Center  
| 231 E. 3rd Street  
| Los Angeles, CA 90013  
| Contact Mariko Magmait at 818-249-1726 or Michiko Wilkins 818-557-0728  
| Membership is $25.00/year  
| Salvin School Parent Group  
| 1925 Budlong  
| Los Angeles, CA 90007  
| Contact Sharla Reuben at 323-731-0703  
| For parents of students attending Salvin School  
| Korean Parent Group for the Developmentally Disabled  
| 3030 West 6th Street, Suite #222  
| Los Angeles, CA 90020  
| Contact Kyung Huan Lee at 213-386-0977 or 818-993-7755  
| Southern California Indian Center, Inc.  
| 3440 Wilshire Blvd., Suite #904  
| Los Angeles, CA 90010  
| Contact Kathleen Bridgeland at 213-387-5772 or 818-782-1191  
| Vietnamese Parents with Disabled Children Assn., Inc (VPDCA)  
| 314 Gina Drive  
| Carson, CA 90745-3615  
| Contact Thu-Luyen Chu at 310-370-6704  
| Other Groups | Other Groups  
| Community Advocacy and Developmental Disability (CADD)  
| C/o Protection and Advocacy, Inc.  
| 3580 Wilshire Blvd., #902  
| Los Angeles, CA 90010  
| Contact: Bette Shaw  
| (323) 930-1717  
| Eve Alba Marquez  
| (213) 387-3617  
| Parents networking and training other parents to become advocate for their children in the developmental disability services system  
| Da Da Fathers Regional Support Network  
| 6118 Del Valle Drive  
| Los Angeles, CA 90048  
| Contact: Marty Sweeney  
| (323) 933-1406  
| (323) 933-2983  
| National Father's Network  
| C/o Kindering Center  
| 16120 NE 8th St.  
| Bellevue, WA 98008-3937  
| Contact: James May  
| (425) 747-4004  
| (206) 284-2859  
| A national Father's network newsletter is available. Support and resource for fathers and other family members. 65 programs in 36 states have been developed. Outreach and train-the-train staff development is available. Father-to-father mentoring to assist fathers in providing 1:1 support and resource.  
| NICHCY (National Information Center for Children and Youth with Disabilities)  
| P.O.Box 1492  
| Washington, D.C. 20013-1492  
| (800) 695-1285  
| Additional Resources, 8
Regional support network for father of children with special need. Meets at Shrine’s Hospital in Los Angeles.

**Exceptional Children’s Foundation Parent Group**
3750 Martin Luther King Blvd.
Los Angeles, CA 9008
Contact: Richard Webb
(323) 290-2000

**Jewish Family Services of Los Angeles**
3750 Martin Luther King Blvd.
Los Angeles, CA 9008
Contact: Richard Webb
(323) 290-2000
Primarily serves family of separation and divorce

**Loving Your Disabled Child**
A Christian Support Group
4715 Crenshaw Blvd.
Los Angeles, CA 90043
Contact: Teresa Cooper
(323) 299-2925
For parents and families who have children with disabilities. Group sharing meeting. Childcare provided free of charge.

**March of Dimes**
502 South Verdugo Drive
Burbank, CA 91502
(818) 972-9449 or (562) 901-4807

**More Opportunities for the Developmentally Disables (M.O.D.D)**
P.O.Box 13924
Torrance, CA 90503
Contact: Alice Bryson
(310) 547-3980
Kea Carney
(310) 540-1711
For parents and young adults with developmental disability over the age of 16, and for professionals and other concerned individuals. Promotes growth opportunities and independence by participation in the arts.

**MUMS National Parent-to-Parent Network**
150 Custer Count
Green Bay, WI 54301-1243
Contact: Julie Gordon
(920) 336-5333
Support ad Matching Organization for families of children with rare disorders of special needs and professionals who work with these families.

**NORD (National Organization of Rare Disorders)**
100 Route 37
P.O.Box 8923
New Fairfield, CT 06812-8923
(800) 447-6677
(213) 746-6517

**Parent Resource Training Center**
3737 Martin Luther King Jr. Blvd.
Suite #335
Lynwood, CA 90262
Contact: Betty Jackson
(310) 638-0460
(310) 537-7718
For at-risk parents and teen moms. An 8-10 week course in parent training. Trains moms to train other moms. Fees: None if training is done on site. Small fee is consultant travels to another site. Available in a variety of languages.

**Parent Training Network**
449 Hoefner Ave.
Los Angeles, CA 90022
(323) 636-6296
For parents and siblings of children with Down Syndrome, Cerebral Palsy, Autism. Spanish is available.

**Pediatric Projects, Inc.**
P.O.Box 57155
Tarzana, CA 91357
Contact: Pat Azarnoff
(818) 705-3660

**More Opportunities for the Developmentally Disables (M.O.D.D)**
P.O.Box 13924
Torrance, CA 90503
Contact: Alice Bryson
(310) 547-3980
Kea Carney
(310) 540-1711
For parents and young adults with developmental disability over the age of 16, and for professionals and other concerned individuals. Promotes growth opportunities and independence by participation in the arts.

**Stephen Wise Temple**
15500 Stephen S. Weiss Drive
Los Angeles, CA 90077
Contact: Norman Fogel
(310) 475-8561
(818) 788-4778
For parents of children with varied disabilities and age groups.
SUPPORT GROUPS
NLACRC & FAMILY FOCUS RESOURCE CENTER SUPPORT GROUPS

Parents of Adult Consumers (PAC) Support Group
Meets last Wednesday of the month, 6:30 to 8:30 p.m. at NLACRC Van Nuys
This is a support group for parents and caregivers of adults who are NLACRC consumers. Meet other parents, get resources, learn about issues concerning adults with developmental disabilities. For more information, call (818) 677-7063 or by e-mail at family.focus@csun.edu. RSVPs are appreciated.

Parent Support Group
Meets Mondays from 6:00 to 7:30 p.m.
Support for parents who are experiencing challenging behaviors with their children/teens. Do you notice that your child has difficulty regulating emotions, difficulty communicating or acting out? Learn tools to better understand, clarify and process challenges. This group meets with a minimum of 8 parents. To reserve your spot, please call 888-353-8285. Meetings will be held at CARE, Inc. 15315 Magnolia Blvd., Suite 306, Sherman Oaks.

Teen Support Group
Meets Mondays from 6:00 to 7:00 p.m.
Support for teens experiencing anxiety, stress, challenges or confusion. Do you feel like no one understands you? Is life overwhelming? Learn tools to cope and express your problems with other teens with similar challenges. This group meets with a minimum of 8 student participants. To reserve, call 888-353-8285. Meetings will be held at CARE, Inc. 15315 Magnolia Blvd., Suite 306, Sherman Oaks.

Armenian Autism Parent Support Group
Connect and network with other parents. Hosted by Dr. Agnesa Papazyan.
First meeting will be held July 8th from 6:00 to 8:00 p.m.at We Rock the Spectrum Kids Gym Northridge, 19520 Nordhoff Street, Northridge 91324. Your kids can play at the gym for $10. Please reserve your spot at 818-341-3818 or by e-mail at info@werockthespectrumnorthridge.com.
>> View the flyer

AV Autism Support Group
For families, relatives, caregivers & professionals involved with children with Autism Spectrum Disorder. Sorry, no childcare available. Meets 3rd Thursday of each month, 5:30 to 7:30 p.m. and 4th Thursday of each month, 10 a.m. to 12 noon at NLACRC, 43210 Gingham Ave., Lancaster.

Cultivar Y Crecer Parent Support Group
A group for Spanish-speaking family members of NLACRC consumers. Meetings are held once a month at NLACRC’s San Fernando Valley office. For more information, please call (818) 778-1900.
>> View the flyer

Familias Unidas
A Spanish support group for families in the Antelope Valley. Meetings are held every 1st and 3rd Thursday of each month from 10 a.m. to 12 noon at the NLACRC, 43210 Gingham Ave., Lancaster. Please call 661-945-9598 for more information.

**Filipino Support Group**
A group for Filipino family members of NLACRC consumers. Meetings are held once a month at NLACRC's San Fernando Valley office. Contact: Sarah Yap at (818) 756-6108.

**Santa Clarita Valley Support Group (Autism)**
Autism support group for parents that meets on the 3rd Wednesday of each month at 9 a.m. at NLACRC, 25360 Magic Mountain Parkway, Suite 150, Santa Clarita. For more information, call 661-775-8450 or visit their web site at www.santaclaritaautism.org.

**Self-Advocacy Group**
A social support group run by and for adults with developmental disabilities. Meetings are held once a month at North Los Angeles County Regional Center's Van Nuys office. Contact: Jose at (818) 756-6289.
Lanterman Regional Center’s Support Groups

Support groups create a comfortable environment where people can meet, share information and resources with peers, and offer each other emotional support.

The support groups directly affiliated with the Koch • Young Resource Center (KYRC) at Frank D. Lanterman Regional Center are co-led by families and Lanterman staff as part of a family-professional partnership. Groups are held in various languages, and many focus on a specific developmental disability and/or age range.

The Resource Center can also make referrals to other local, state and national groups in the event there is not a group listed here that meets your needs. If you see an unmet need, the Resource Center can also provide technical assistance for the development of new support groups.

The following is a listing of all existing support groups in our community. Call or e-mail the indicated contacts for more information about their group. This information is also available on Lanterman’s Web site at www.lanterman.org/index.php/training/support_groups/C152.

### LANTERMAN SUPPORT GROUPS

Lanterman reserves the right to only list support groups in this section that meet the following criteria:
- Leadership must have a relationship with and be trained by KYRC
- Must have a Lanterman service coordinator (SC) liaison
- Must be open to receiving technical assistance from the KYRC
- Must be located within Lanterman’s catchment area

<table>
<thead>
<tr>
<th>Support Group</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Armenian Parent Support Group&lt;br&gt;&lt;i&gt;(in Armenian)&lt;/i&gt;</td>
<td>Arpi Khanjian (SC), 213.252.6690&lt;br&gt;a <a href="mailto:Khanjian@lanterman.org">Khanjian@lanterman.org</a>&lt;br&gt;Talin Davidian (SC), 213.252.6668&lt;br&gt;t <a href="mailto:davidian@lanterman.org">davidian@lanterman.org</a></td>
</tr>
<tr>
<td>California Sibling Leadership Network&lt;br&gt;&lt;i&gt;(in English)&lt;/i&gt;</td>
<td>Jackie Moreno, 626.318.9267&lt;br&gt;<a href="mailto:jacquelinevictoria90@gmail.com">jacquelinevictoria90@gmail.com</a></td>
</tr>
<tr>
<td>Chinese Parent Support Group&lt;br&gt;&lt;i&gt;(in Chinese)&lt;/i&gt;</td>
<td>Christine Wong (SC), 213.252.6612&lt;br&gt;<a href="mailto:cwong@lanterman.org">cwong@lanterman.org</a></td>
</tr>
<tr>
<td>daDA Fathers Regional Support Network&lt;br&gt;&lt;i&gt;(in English)&lt;/i&gt;</td>
<td>Eduardo Solis, 323.578.5154&lt;br&gt;<a href="mailto:edsolis@yahoo.com">edsolis@yahoo.com</a>&lt;br&gt;Hector Gravina (SC), 213.252.5676&lt;br&gt;h <a href="mailto:gravina@lanterman.org">gravina@lanterman.org</a></td>
</tr>
</tbody>
</table>

Contact Koch • Young Resource Center at Lanterman Regional Center

3303 Wilshire Blvd., Ste. 700<br>Los Angeles, CA 90010

Phone: 213.383.1300, Ext. 5600 or 213.252.5600<br>800.546.3676

Contact: Joe Perales, Family Support Specialist<br>213.252.4986, jperales@lanterman.org

E-mail: kyrc@lanterman.org<br>Web site: www.lanterman.org<br>Library: http://library.lanterman.org<br>Network of Care: http://networkofcare.lanterman.org<br>Peer Support Partner Program: www.lanterman.org/psm
<table>
<thead>
<tr>
<th>De Mi Familia A Su Familia</th>
<th>For families of children with Autism of all ages. (in Spanish)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grupo de Apoyo Para Familias de Intervención Temprana</td>
<td>For families of children with special needs younger than 5 years old. (in Spanish)</td>
</tr>
<tr>
<td>Lanterman Regional Center</td>
<td>Lanterman Regional Center</td>
</tr>
<tr>
<td>3303 Wilshire Blvd., 1st Floor - KYRC Conference Room</td>
<td>3303 Wilshire Blvd., 1st Floor - KYRC Conference Room</td>
</tr>
<tr>
<td>Los Angeles, CA 90010</td>
<td>Los Angeles, CA 90010</td>
</tr>
<tr>
<td>Monthly – First Wednesday - 10 a.m. to 11:30 a.m.</td>
<td>Monthly – Second Wednesday - 9 a.m. to 11 a.m.</td>
</tr>
<tr>
<td><strong>Contacts:</strong></td>
<td><strong>Contacts:</strong></td>
</tr>
<tr>
<td>Bertha Suazo, 213.413.4280</td>
<td>Agustina Mellin, 213.427.6298</td>
</tr>
<tr>
<td>Zulma Mena, 213.215.9121</td>
<td>Monica Mauriz (SC), 213.252.5686</td>
</tr>
<tr>
<td>Anabel Vasquez (SC), 213.252.6092</td>
<td><a href="mailto:mmauriz@lanterman.org">mmauriz@lanterman.org</a></td>
</tr>
<tr>
<td><a href="mailto:avasquez@lanterman.org">avasquez@lanterman.org</a></td>
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<tr>
<th>Japanese-Speaking Parents Association of Children with Challenges</th>
<th>For families of children with special needs of all ages. (in Japanese)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Korean Parent Support Group</td>
<td>For families of children with special needs of all ages. (in Korean)</td>
</tr>
<tr>
<td>Monthly – Third Saturday - 9:30 a.m.</td>
<td>Monthly – First Friday - 10 a.m. to 12 p.m.</td>
</tr>
<tr>
<td>For more information visit Web site: <a href="http://www.jspacc.org">www.jspacc.org</a></td>
<td><strong>Contacts:</strong></td>
</tr>
<tr>
<td>Mariko Magami, 818.625.5115</td>
<td>Linda An</td>
</tr>
<tr>
<td>Mami Noguchi, 818.282.0317</td>
<td><a href="mailto:lindalimhere@gmail.com">lindalimhere@gmail.com</a></td>
</tr>
<tr>
<td><a href="mailto:info@jspacc.org">info@jspacc.org</a></td>
<td>Jaime Cha-McGrath, 213.252.8350</td>
</tr>
<tr>
<td><a href="mailto:jmcgrath@lanterman.org">jmcgrath@lanterman.org</a></td>
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<thead>
<tr>
<th>La Esperanza</th>
<th>For families of children with developmental disabilities 15 years and older. (in Spanish)</th>
</tr>
</thead>
<tbody>
<tr>
<td>LGBT Support Group</td>
<td>(Lesbian, Gay, Bisexual, Transgender) For clients with special needs. (in English)</td>
</tr>
<tr>
<td>Monthly – Second Monday - 9:30 a.m. to 11:30 a.m.</td>
<td>Monthly – Second Wednesday – 6 p.m. to 8 p.m.</td>
</tr>
<tr>
<td><strong>Contacts:</strong></td>
<td><strong>Contact:</strong></td>
</tr>
<tr>
<td>Maria Sanchez, 213.926.1865</td>
<td>Jenny Arellano (SC), 213.252.6004</td>
</tr>
<tr>
<td>Maria Celedon, 213.618.2753</td>
<td><a href="mailto:jsarellano@lanterman.org">jsarellano@lanterman.org</a></td>
</tr>
<tr>
<td>Anita Castillo-Pafford (SC), 213.252.6642</td>
<td></td>
</tr>
<tr>
<td><a href="mailto:acastillo@lanterman.org">acastillo@lanterman.org</a></td>
<td></td>
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</tbody>
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<thead>
<tr>
<th>Padres Unidos Lanterman</th>
<th>For families of children with developmental disabilities of all ages. (in Spanish)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents Collaborate Support Group</td>
<td>For families of individuals with developmental disabilities of all ages. (in English)</td>
</tr>
<tr>
<td>Monthly – Second Tuesday - 7 p.m. to 9 p.m.</td>
<td>Monthly - Last Friday – 9 a.m. to 10:30 a.m.</td>
</tr>
<tr>
<td><strong>Contact:</strong></td>
<td><strong>Contacts:</strong></td>
</tr>
<tr>
<td>Mario Zelaya, (SC) 213.252.8316</td>
<td>Elizabeth Beltran, 213.748.3999</td>
</tr>
<tr>
<td><a href="mailto:mzelaya@lanterman.org">mzelaya@lanterman.org</a></td>
<td>Brigitte Sroujieh, 818.606.7028</td>
</tr>
<tr>
<td></td>
<td>Dana Sunderland (SC), 213.252.8374</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:dsutherland@lanterman.org">dsutherland@lanterman.org</a></td>
</tr>
<tr>
<td><strong>Sibling Saturdays</strong></td>
<td><strong>Teatro Ilusión</strong></td>
</tr>
<tr>
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</tr>
<tr>
<td>Recreational support group for siblings ages 5 to 12 of individuals with developmental disabilities. (in English)</td>
<td>A theatrical group for children with developmental disabilities and their families. (in Spanish)</td>
</tr>
<tr>
<td>Pasadena Child Development Associates 620 N. Lake Ave. Pasadena, CA 91101</td>
<td>Shriners Hospital 3160 Geneva St. Los Angeles, CA 90020 (Virgil Avenue and Third Street)</td>
</tr>
<tr>
<td>Weekly – Saturdays - 1 p.m. to 2:30 p.m.</td>
<td>Weekly – Thursday - 6 p.m. to 8 p.m.</td>
</tr>
<tr>
<td><strong>Contact:</strong> Jessica Moya, 626.793.7350, x. 287 <a href="mailto:jessicav@pcdateam.org">jessicav@pcdateam.org</a></td>
<td><strong>Contact:</strong> Yolanda Hernandez, 562.453.6695</td>
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</tbody>
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<thead>
<tr>
<th><strong>COMMUNITY GROUPS</strong></th>
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</thead>
<tbody>
<tr>
<td>Lanterman reserves the right to only list community organizations in this section that meet the following criteria:</td>
</tr>
<tr>
<td>- Group leadership must have a relationship with Lanterman</td>
</tr>
<tr>
<td>- Events must be inclusive to all community members</td>
</tr>
<tr>
<td>- Meetings must be conducted within Lanterman’s catchment area</td>
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<tr>
<th><strong>Armenian Autism Outreach Project ~ AAOP</strong></th>
<th><strong>Club 21</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>For families of children with developmental disabilities of all ages. (in Armenian)</strong></td>
<td>Learning, social and support programs for families with children of all ages with Down Syndrome. (in English)</td>
</tr>
<tr>
<td>Armenian Outreach Project 320 Arden Ave., Suite 240 Glendale, CA 91203</td>
<td>Pasadena Covenant Church 539 N. Lake Ave. Pasadena, CA 91101</td>
</tr>
<tr>
<td><strong>Contact:</strong> 818.542.AAOP, <a href="mailto:info@armenianautismoutreach.org">info@armenianautismoutreach.org</a>, <a href="http://www.armenianautismoutreach.org">www.armenianautismoutreach.org</a></td>
<td><strong>Contact:</strong> 626.844.1821, <a href="mailto:info@clubtwentyone.org">info@clubtwentyone.org</a>, <a href="http://www.clubtwentyone.org">www.clubtwentyone.org</a></td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th><strong>Down Syndrome Parent Resource Network ~ San Gabriel Valley Sub-group of the Down Syndrome Association of Los Angeles (DSALA)</strong></th>
<th><strong>Epilepsy Foundation</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>For families of children with Down syndrome. (in English)</strong></td>
<td>For families of children with epilepsy of all ages. (English and Spanish)</td>
</tr>
<tr>
<td>Cornerstone Speech and Language 711 Mission St., Suite B Pasadena, CA 91030</td>
<td>5777 W. Century Blvd., Suite 820 Los Angeles, CA 90045</td>
</tr>
<tr>
<td>Monthly – Second Thursday - 7 p.m. to 9 p.m.</td>
<td>Monthly groups</td>
</tr>
<tr>
<td><strong>Contact:</strong> 818.786.0001, <a href="mailto:info@dsala.org">info@dsala.org</a>, <a href="http://www.dsala.org">www.dsala.org</a></td>
<td><strong>Contact:</strong> 310.670.2870 800.564.0445 <a href="http://www.end-epilepsy.org">www.end-epilepsy.org</a></td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th><strong>Foothill Autism Alliance ~ Network Resource Meetings</strong></th>
<th><strong>TACA ~ Talk About Curing Autism</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Educational group for families of children with autism. (in English)</strong></td>
<td>Parent meetings that feature educational speakers and peer support for parents of children with autism. (in English)</td>
</tr>
<tr>
<td>Westmoreland Academy 6 Westmoreland Pl. Pasadena, CA 91103</td>
<td>Burbank First United Methodist Church 700 N. Glenoaks Ave. Burbank, CA 91502</td>
</tr>
<tr>
<td>Monthly – Second Wednesday - 7 p.m. to 9:30 p.m.</td>
<td>Monthly – Third Saturday - 1 p.m. to 3:30 p.m.</td>
</tr>
<tr>
<td><strong>Contact:</strong> 818.66.AUTISM (818.662.8847), <a href="mailto:info@foothillautism.org">info@foothillautism.org</a>, <a href="http://www.foothillautism.org">www.foothillautism.org</a></td>
<td><strong>Contacts:</strong> Holly Riley and Moira Giammatteo, <a href="mailto:holly_riley@tacanow.org">holly_riley@tacanow.org</a>, <a href="http://www.tacanow.org">www.tacanow.org</a></td>
</tr>
</tbody>
</table>
East Los Angeles Regional Center (ELACR)  
Support Groups

**Special Moments Playgroup**  
Eastern Los Angeles Family Resource Center  
1000 S. Fremont Ave.  
Suite 5051, Bldg. A5, lower level  
Alhambra, CA 91803  
To RSVP contact Martha Ornelas  
(626)300-9171  
mornelas@elafrc.net  
First meeting April 7, 2017  
Monthly, every 1st Fri.  
10:00-11:30am

**Parents who have children with challenging behaviors**  
Eastern Los Angeles Family Resource Center  
1000 S. Fremont Ave.  
Suite 5051, Bldg. A5, lower level  
Alhambra, CA 91803  
To RSVP contact Martha Ornelas  
(626)300-9171  
mornelas@elafrc.net  
First meeting Oct. 12, 2016  
Monthly, every 2nd Wed.  
9:30- 11:00am

**For parents of School Age Children with Special Needs**  
Chinese Parents Association for the Disabled Community Parent Resource Center, (CPRC)  
Asian Youth Center (AYC)  
100 Clary Ave, San Gabriel 91776  
Contact: Mei Ye (626)226-9955  
Rose Wang: (562)903-1030  
First Meeting April 16, 2016  
Monthly, every 3rd Saturday
LGBT Support Group for Clients with Special Needs
Koch-Young Resource Center
Lanterman Regional Center
3303 Wilshire Blvd., Suite 700
Los Angeles, CA 90010
Contact: Jenny Arellano
(213)252-6004
jsarellano@lanterman.org
Monthly, every 2nd Wed.
6:00pm-7:30pm

Chinese Support Group for Parents of Children with Special Needs, in Mandarin
Eastern Los Angeles Family Resource Center
1000 S. Fremont Ave.
Suite 5051, Bldg. A6,
Conference Room, lower level
Alhambra, CA 91803
Contact: Mei Ye
(626)300-9171 Ext. 104
Monthly, every 3rd Tue.
First Meeting July 21, 2015
10:00-11:30

Parents Facing Challenging Behavior
CARE, INC
15315 Magnolia Blvd., Suite 306
Sherman Oaks, CA 91403
Mondays 6:00-7:30pm
www.careautism.org
(888)353-8285

Teen Support Group (Ages 12-18)
CARE, INC
15315 Magnolia Blvd., Suite 306
Sherman Oaks, CA 91403
Mondays 6:00-7:00pm
www.careautism.org
(888)353-8285

Special Needs Parenting Community Group
The Thaddeus Foundation
133 E. Bonita Ave., Suite #200
San Dimas, CA 91773
(909) 599-2111
info@thethaddeusfoundation.org
bhlh@thethaddeusfoundation.org
Thursdays 5:00-7:00pm
Habor Regional Center Support Groups

Parent and Family Support Groups Offered by HRC

At HRC, Parent and Family Support Groups offer informative presentations, lively discussions, and of course the opportunity to get to know other parents and families. The following groups are offered at HRC and facilitated by HRC staff members.

NEW Special Connections Parent Support Group

For parents of HRC clients looking to meet other parents who have a son or daughter of any age with a developmental disability. Second Tuesday of the month, 6-8pm, HRC Torrance. No meetings in July or August. Childcare available by reservation for children 12 years and under. Brenda Sanchez (310) 543-0136

Early Years Down Syndrome Support Group

For parents raising a child ages birth - five years with Down syndrome. Second Monday of the month, 9:30 - 11:30am. Karina Duran (310) 543-7980

(310) 543-0136.

Japanese Parent Support Group

For parents of HRC clients who speak Japanese. Please call for information (310) 543-0691.

Korean Parent Group

This group meets the fourth Thursday, 6:30 pm - 8:30 pm, at HRC Long Beach. Contact Taejong Min at (310) 792-4542 or Jamie Lee (310) 792-4742

Spanish Speaking Parent Support Group

For parents of HRC clients who speak Spanish. Meetings at HRC Torrance and HRC Long Beach. Childcare available by reservation for children 12 years and under. Isabel Cueva (310) 792-4586 or Maria Rivas (310) 543-0616.

Sibling Club

Groups for siblings age 6-16 of HRC clients. Days and times vary by the age of the participants. For more information please contact your HRC Counselor.

Other Groups in Los Angeles Area

The HRC Resource Center also maintains information on support groups available in the community in the HRC and surrounding areas, as well as state and national organizations.
<table>
<thead>
<tr>
<th>Group Name</th>
<th>Address</th>
<th>Telephone</th>
<th>For</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ashley Children's Psychology Center</td>
<td>9036 Reseda Blvd. #204</td>
<td>818-886-3531</td>
<td>Support for families with Attention Deficit Disorder</td>
</tr>
<tr>
<td>Autism Society of Los Angeles</td>
<td>8939 S. Sepulveda Blvd., Ste. 110-788 Los Angeles, CA 90045</td>
<td>562-804-5556</td>
<td>Info &amp; referral services, advocacy</td>
</tr>
<tr>
<td>Armenian Autism Outreach Project (AAOP)</td>
<td>320 Arden Avenue, Ste. 240 Glendale, CA 91203</td>
<td>818-542-2267</td>
<td>Support/Info for Armenian families who have a loved one with ASD or a Dev. Disability</td>
</tr>
<tr>
<td>Bridge Focus</td>
<td>16360 Roscoe Blvd. # 120 Van Nuys, CA 91406</td>
<td>818-895-5132</td>
<td>Drug/alcohol dependent parents Span. spk. 0-12yrs</td>
</tr>
<tr>
<td>CHADD-Children and Adults with Attention Deficit Disorder – San Fernando Valley chapter</td>
<td>P.O.Box 571072 Tarzana, CA 91356</td>
<td>772-242-3301</td>
<td>Help families cope with ADD</td>
</tr>
<tr>
<td>Chinese Services Center</td>
<td>767 N. Hill St. #400 Los Angeles, CA 90012</td>
<td>213-253-0880</td>
<td>Cantonese &amp; Mandarin support groups</td>
</tr>
<tr>
<td>Chinese Parents Assoc. for the Disabled (CPAD)</td>
<td>P.O. Box 2884 San Gabriel, CA 91778-2884</td>
<td>626-307-3837</td>
<td>Resources and Support</td>
</tr>
<tr>
<td>Community Advocacy and Developmental Disabilities (CADD)</td>
<td>c/o PAI #902 3580 Wilshire Blvd. Los Angeles, CA 90010</td>
<td>323/930-1717</td>
<td>Advocacy and training for parents, Span. Spk. 213/387-3617</td>
</tr>
</tbody>
</table>

Do you have suggested changes to this list? Contact us at family.focus@csun.edu.
<table>
<thead>
<tr>
<th>Group Name</th>
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<th>For</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cultivar Y Crecer</td>
<td>15600 Sherman Way Van Nuys, CA 91406</td>
<td>818/756-6423</td>
<td>Support group for Spanish speaking families</td>
</tr>
<tr>
<td>daDA Fathers Support Network</td>
<td>Meeting locations may vary</td>
<td>213-687-8903</td>
<td>Support group for fathers of children with disabilities</td>
</tr>
<tr>
<td>Down Syndrome Assoc. of Los Angeles</td>
<td>16461 Sherman Way, Suite 180 Van Nuys, CA 91406</td>
<td>818-786-0001</td>
<td>Educ. Speakers, peer counseling, recreation, support groups</td>
</tr>
<tr>
<td>Dyslexia Association Los Angeles</td>
<td>Providence Tarzana Medical Center 18321 Clark Street Tarzana, CA 91356</td>
<td>818-506-8866</td>
<td>Support group meets the 2nd Saturday of every month from 10:00 a.m. - 12:00 p.m.</td>
</tr>
<tr>
<td>Epilepsy Found. of LA</td>
<td>3600 Wilshire Blvd. #920 Los Angeles, CA 90010</td>
<td>310-670-2870 ext 108</td>
<td>Support &amp; resources for people with seizure disorders, Spanish speaking also</td>
</tr>
<tr>
<td>Etta Israel Center</td>
<td>12722 Riverside Drive, Suite 105 North Hollywood CA 91607</td>
<td>818-985-3882</td>
<td>Supports inclusion in private Jewish schools</td>
</tr>
<tr>
<td>Epilepsy Foundation of Greater Los Angeles</td>
<td>5777 W. Century Blvd Los Angeles CA 90045</td>
<td>310-670-2870 ext 102</td>
<td>Groups for teens, adults and parents. Social and family events.</td>
</tr>
<tr>
<td>Familias Unidas</td>
<td>Meets monthly at NLACRC Lancaster 43210 Gingham Ave Lancaster, CA 93535</td>
<td>661-945-9598</td>
<td>For Spanish speaking families in the Antelope Valley of children with special needs.</td>
</tr>
<tr>
<td>Fragile X Assoc. of So. California</td>
<td>1528 N. Pepper St. Burbank, CA 91505</td>
<td>800-688-8765 818-754-4227</td>
<td>Promote awareness of Fragile X. Spanish speaking also.</td>
</tr>
</tbody>
</table>

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<tr>
<th>Group Name</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Greater LA Council on Deaf</td>
<td>2222 Laverna Ave. Los Angeles, CA 90041</td>
<td>323/478-8000</td>
<td>Interpreters, peer counseling for Deaf</td>
</tr>
<tr>
<td>HaMercaz</td>
<td></td>
<td>866/287-8030</td>
<td>Support, workshops and referrals for individuals with special needs in the Jewish community</td>
</tr>
<tr>
<td>Japanese Speaking Parents Assoc.</td>
<td>c/o Little Tokyo Service Center, 231 E. 3rd Str. Los Angeles CA 90013</td>
<td>626-447-6286</td>
<td>Japanese Support groups</td>
</tr>
<tr>
<td>Jewish Family Services Central Access</td>
<td></td>
<td>877-275-4537</td>
<td>Family counseling</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Group Name</th>
<th>Address</th>
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<th>For</th>
</tr>
</thead>
</table>
| John Tracy Clinic  
Los Angeles, CA 90007                                                  | 213-748-5481     | Hearing impaired programs and support                                                                                                                                                              |
| Just 4 Us  
Social Support Group                                                                                                                                                                             | North Los Angeles County Regional Ctr  
15400 Sherman Way  
| Korean Parents Support Group                                                                                                                                                                             | NLACRC  
15400 Sherman Way  
Van Nuys, CA 91406                                                   | 818-756-6221     | For Korean families                                                                                                                                                                                |
| National Alliance on Mental Illness of San Fernando Valley  
www.namisfv.org                                                                                                                                                                                      | Various locations in San Fernando Valley and Santa Clarita              | 818-994-6747     | Support groups for family members of people with depression or mental illness, parent education and advocacy                                                                                       |
| Prader-Willi California Foundation  
www.pwcf.org                                                                                                                                                                                                 |                                                                        | 310-316-8243     | Support, information, social and fundraising events                                                                                                                                             |
| Santa Clarita Autism Asperger Network  
www.santaClaritaAutism.org                                                                                                                                                                                  |                                                                        | 661-294-9750     | Support, information, and special events                                                                                                                                                           |
| Special Families Support Group                                                                                                                                                                             | 28470 Avenue Stanford, # 105  
Santa Clarita CA 91355                                                   | 661-294-9715     | Support group for parents or caregivers of children with special needs.                                                                                                                           |
| Twice Exceptional Network LA  
http://groups.yahoo.com/group/2E_Network_LA/                                                                                                                                                    | Online only                                                               |                  | Support and resources for twice exceptional kids (gifted and learning disabled)                                                                                                                  |
**Family Focus Resource Center**

<table>
<thead>
<tr>
<th>Group Name</th>
<th>Address</th>
<th>Telephone</th>
<th>For</th>
</tr>
</thead>
<tbody>
<tr>
<td>United Cerebral Palsy (UCP) LA</td>
<td>6430 Independence Av Woodland Hills, CA 91367</td>
<td>818/782-2211</td>
<td>Support and services for individuals with CP. Support group and advocacy instruction.</td>
</tr>
<tr>
<td><a href="http://www.ucpla.org">www.ucpla.org</a> and <a href="http://www.kenproject.com">www.kenproject.com</a> (for support groups)</td>
<td>9849 Glade Avenue Chatsworth, CA 91311</td>
<td>818-998-4461</td>
<td>Support for foster parents &amp; Education</td>
</tr>
</tbody>
</table>

Do you have suggested changes to this list? Contact us at family.focus@csun.edu.
## State or National Associations

<table>
<thead>
<tr>
<th>Association Name</th>
<th>Website</th>
<th>Telephone</th>
<th>For</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism Society of America</td>
<td><a href="http://www.autism-society.org">www.autism-society.org</a></td>
<td>800-328-8476</td>
<td>Info &amp; referral services, advocacy; Living with Autism articles</td>
</tr>
<tr>
<td>Autism Speaks</td>
<td><a href="http://www.autismspeaks.org">www.autismspeaks.org</a></td>
<td>888-AUTISM2</td>
<td>Info &amp; referral services, family guides</td>
</tr>
<tr>
<td>Family Connect</td>
<td><a href="http://www.familyconnect.org">www.familyconnect.org</a></td>
<td></td>
<td>Support and resources for children with visual impairments</td>
</tr>
<tr>
<td>National Fragile X Association</td>
<td><a href="http://www.fragilex.org">www.fragilex.org</a></td>
<td>800-688-8765</td>
<td>Awareness, advocacy, resources</td>
</tr>
<tr>
<td>MUMS (National Parent to Parent Matching)</td>
<td><a href="http://www.netnet.net/mums">www.netnet.net/mums</a></td>
<td>877-336-5333</td>
<td>National parent to parent org. for care givers of children with disabilities</td>
</tr>
<tr>
<td>National Down Syndrome Society</td>
<td><a href="http://www.ndss.org">www.ndss.org</a></td>
<td>800-221-4602</td>
<td>Educ. Speakers, peer counseling, recreation, support groups</td>
</tr>
<tr>
<td>National Parents Anonymous</td>
<td>675 W. Foothill Blvd.#200</td>
<td>909-621-6184</td>
<td>Provides info on support groups for parents, state referral services</td>
</tr>
<tr>
<td>National Organization of Rare Disorders (NORD)</td>
<td><a href="http://www.rarediseases.org">www.rarediseases.org</a></td>
<td>800-447-6673</td>
<td>Organization of rare disorders to hook up parents throughout states</td>
</tr>
<tr>
<td>Prader-Willi Syndrome Association</td>
<td><a href="http://www.pwsausa.org">www.pwsausa.org</a></td>
<td>800- 926-4797</td>
<td>Support, awareness, resources, fundraising</td>
</tr>
</tbody>
</table>

Do you have suggested changes to this list? Contact us at family.focus@csun.edu.
Early Intervention Programs (CLASSROOM SETTING)
(Each of the following programs also offers a variety of one-on-one intervention therapies separately, as needed)

McRory Pediatric Services (http://www.mcrorypediatrics.com)
19019 Ventura Blvd. Tarzana, 91316 Phone: (818) 501-8352 Email: info@mcrorypediatrics.com
28212 Kelly Johnson Parkway, Suite 200, Valencia 91355 Phone: (818) 501-8352
Services provided: The “Beautiful Beginning Jump Start” program is an intensive early intervention program (12 months-3 years) with individualized curriculum goals in the areas of communication, gross/fine motor, cognition, etc. using a multidisciplinary approach (speech therapy, physical therapy, occupational therapy, etc.) as well as parent training/education sessions weekly.

Child Development Institute (http://www.cdikids.org/)
Woodland Hills, CA Phone: (818) 888-4559 Email: info@cdikids.org
Services provided: CDI’s developmental support services are for children birth to 8 years old. These services include assessment and evaluation, Floortime, speech & language therapy, occupational therapy as well as parent education and counseling services.

Center for Developing Kids (http://www.centerfordevelopingkids.com)
200 E. Del Mar Blvd. Pasadena, CA 91105 Phone: (626) 564-2700 Email: info@centerfordevelopingkids.com
Services provided: The “Good to Grow Developmental Play Group” is a comprehensive program designed for 18-36 month olds within a semi-structured classroom setting to enhance the social, emotional and communication abilities of children; parents receive education through weekly parent meetings. The center also provides other therapies in a 1:1 context (speech therapy, occupational therapy, physical therapy, etc.).

Los Angeles Speech & Language Therapy Center, Inc. (http://www.speakla.com)
5761 Buckingham Pkwy Culver City, CA 90230 Phone: (310) 649-6199 Email: info@speakla.com
Services provided: They provide a “Mommy & Me” program for infants 12-36 months with speech and language delays three days per week at their main center in Culver City. They also provide early intervention in a classroom setting for children 18-36 months at sites in South Gate, Culver City & Lawndale three days per week led by early intervention specialists. All services are vendored by regional center.

The Whole Child (http://www.intercommunity.org)
10155 Colima Rd. Whittier, CA 90603 Phone: (562) 692-0383
Services provided: The Early Intervention & Prevention program offers assessments to determine your child’s targets/goals. They target developmental goals in a classroom setting as well as providing training sessions for parents throughout the year. They also offer individual and family treatment focused on parent/child attachment as a home-based program as well.

Step-By-Step Edu-Play Programs (http://www.stepbystepeduplay.com)
1412 14th St. Santa Monica, CA 90404 Phone: (310) 587-0050 Email: info@stepbystepeduplay.com
Services provided: Step-By-Step offers a variety of services for children (infants-3 years), including BOTH home based programs & center based (classroom) programs. Classrooms are determined based on age, and parent involvement varies across stages, slowly and individually working on transitioning your child into the classroom setting independently; parent education groups are also available. Speech, occupational and behavioral therapy & consultation as well as psycho/social developmental assessments & screenings to serve children with special needs are also available. (** This program provides early learning services to children of all abilities & isn’t ONLY for kids with special needs)

Kids in Motion (http://www.mykidsinmotion.com/index.html)
21615 Hawthorne Blvd., Suite 200 Torrance CA 90053 Phone: (310) 371-8555
Services Provided: Kids in Motion offers center-based, small group classes with emphases on feeding (Eat N’ Play), motor and sensory development (Play N’ Learn and Tots in Motion), early speech and language development (Say N’Play and Talking with Tots), and high risk prevention for infants and toddlers at “high risk” of developmental delays.

Pediatric Therapy Network – Leaps & Bounds Program (http://www.pediatrictherapynetwork.org/)
1815 W. 213th Street, Suite 100 Torrance, CA 90501 Phone: (310) 328-0276
Services Provided: The Leaps & Bounds program combines therapeutic and educational approaches to foster the overall
developmental and growth of children ages 18 months to 3 years old who have been identified to be at-risk for developmental delays.
The classroom is staffed with a team of occupational therapists, speech therapists, teachers, and teacher’s assistants.

Pediatric Minds – Early Childhood Treatment Center  (http://www.pediatricminds.com/)
3524 Torrance Blvd., Torrance, CA 90503 Phone: (310) 540-1630 Email: jenae.w@pediatricminds.com
Services Provided: A short-term integrated intensive day treatment program for young children ages 2 to 6 years who have autism,
developmental disabilities, and behavioral disorders. This is a unique multi-disciplinary early intervention program that provides
cognitive and developmental assessments for each child, an individualized intensive treatment program that is provided one on one,
speech therapy and occupational therapy consults, psychological and medical evaluations and medication treatment if necessary. This
is all provided in a family friendly setting. The program is daily for 3hrs per day, 5days per week for an average of 12 weeks (pending
insurance coverage). The program is contracted with and funded through medical insurance.

Early Childhood Partial Hospitalization Program (ECPHP) at UCLA  (http://www.semel.ucla.edu/ecphp)
760 Westwood Plaza Los Angeles, CA 90024 Phone: (310) 206-2695 Email: ayokota@mednet.ucla.edu
Services provided: ECPHP is a structured classroom setting that runs five days a week, six-hours a day and offers an intensive,
individualized, comprehensive therapeutic program targeting cognitive development, speech and language skills, occupational skills,
recreational skills, self-help, social skills, emotional skills & behavioral support. (*Must be 2 years old)

UCLA Intervention Program  (http://www.uclainterventionprogram.org)
1000 Veteran Ave. Los Angeles, CA 90095 Phone: 310-825-4821
Services Provided: This program provides a variety of intervention services within a group/classroom setting using play-based
activities, focused on cognitive & language, sensory-motor skills & social/ emotional learning competencies. They also offer individual
physical therapy, parent-and-me movement group programs.

Carousel School
7899 La Tijera Blvd., Los Angeles 90045 Phone: 310-645-9222
Preschool and Infant Center includes: Speech therapy, occupational therapy, behavioral management

Smart Start Developmental Learning Center
2505 Lincoln Blvd. Santa Monica, CA 90405 Phone: 310-452-5437 Email: sharon@smartstartschool.com
Full inclusion school open for early intervention children who have some delays in their development. 16 months to 3 years old.

Early Intervention Programs (PROVIDED IN-HOME)

Pasadena Child Development Associates, Inc. - Building Blocks Infant Development Program
(http://www.pasadenachilddevelopment.org/services/BuildBlocks)
620 North Lake Ave. Pasadena, CA 91101 Phone: (626) 793-7350
Services provided: This is an individualized in-home program offering a variety of services including occupational therapy, physical
therapy, speech & language therapy, nutritional counseling, music therapy, feeding services, psychological counseling, etc.

Footprints Behavioral Interventions  (http://www.autismfootprints.com/programs)
18000 Studebaker, Ste. 700 Cerritos, CA 90703 Phone: 800-ASD-4292 Email: info@autismfootprints.com
Services provided: Family-based intervention targeting communication, social, motor and cognitive delays through meaningful play
interactions & parent training in your home.

Inizio Interventions  (http://www.iniziointerventions.com)
1313 Foothill Blvd. La Canada, CA 91011 Phone: 818-937-0882 Email: caraentz@iniziointerventions.com
Services Provided: At the initial entry into the program, your child will be evaluated to determine targets for treatment. All of the
intervention (done in your home) will include the parent(s) through play and other activities individualized based on your child’s
specific targets/goals.

Additional Resources, 25
CHIME Institute – Infant/Toddler Program (http://www.chimeinstitute.org/infanttoddler.php)
18330 Halsted St. Northridge, CA 91330 Phone: (818) 677-2922 or (818) 677-3866
Services Provided: The CHIME Institute offers both in-home and center-based programs to families with young children (birth to 3 years old) who are at-risk or who have existing developmental delays. The program focuses on developmentally appropriate intervention activities with an emphasis on play and positive social interactions, which are provided by a transdisciplinary team.

Behavioral Therapy

Behavioral Education for Children with Autism (BECA) (www.beca-aba.com)
(Multiple locations) Phone SoCal: 310-787-9334 NorCal: 916-443-2479

Behavioral Frontiers
18726 Western Ave Suite 408, Los Angeles, CA 90024
Phone: 310-856-0800 www.behavioralfrontiers.com

Occupational & Physical Therapy

Therapy in Action (http://www.therapyinaction.com)
18522 Oxnard St. Tarzana, CA 91356 Phone: (818) 708-2292 Services Provided: Services include assessment, treatment, and home consultation. Individual therapy is provided for both physical therapy & occupational (including feeding) therapy.

Every Child Achieves – Pediatric Therapy Services (http://www.everychildachieves.com/)
6400 Laurel Canyon Blvd, #560 North Hollywood, CA 91606 Phone: (800) ECA – 8860 Email: info@everychildachieves.com
Services provided: Each child’s program is individualized specifically to his/her needs and within the context of his/her family. The team make use of a myriad of specific activities to enhance progress in each of the developmental domains, including physical motor abilities, cognition, communication, and social-emotional skills.

Kid Abilities Pediatric Therapy Center (http://www.kidabilitiestherapycenter.com)
11110 Ohio Ave. Los Angeles, CA Phone: (310) 444-8812
Services Provided: Kid Abilities takes a child-directed & family-centered approach to intervention with a team of experienced occupational therapists who specialize in working with infants & children with a variety of needs (including autism, developmental delays, sensory processing disorder & motor delays).

Pediatric Therapy Network (http://www.pediatrictherapynetwork.org/)
1815 W. 213th Street, Suite 100 Torrance, CA 90501 Phone: (310) 328-0276
Services Provided: Pediatric Therapy Network offers physical, occupational, and speech-language therapies.

Kids in Motion (http://www.mykidsinmotion.com/index.html)
21615 Hawthorne Blvd., Suite 200 Torrance CA 90053 Phone: (310) 371-8555
Services Provided: Kids in Motion offers physical, occupational, and speech-language therapies as well as center-based programs for infants and toddlers.

Speech Language Therapy

Los Angeles Speech & Language Therapy Center, Inc. (http://www.speakla.com)
5761 Buckingham Pkwy Culver City, CA 90230 Phone: (310) 649- 6199 Email: info@speakla.com
Services Provided: LA Speech & Language Therapy Center provides one-on-one speech and language therapy for infants and toddlers in a clinic-based setting. Parent involvement and weekly parent training is also included in each session.

Elliott Institute (http://www.draliciaelliott.com/early-intervention)
2506 Foothill Blvd. La Crescenta, CA 91214 Phone: (818) 236- 3603 Email: info@elliottinstitute.com
Services Provided: The Elliott clinic provides early intervention speech & language therapy services to infants & toddlers both in the clinic setting and in the family’s home setting. Parent involvement and parent training are an essential part of every therapy session.

Rothstein Speech Pathology
Services Provided: Typically, sessions occur 1-3 times per week of direct & individualized one-on-one speech therapy in the families’ home, and include parent education and participation. Progress reports are provided periodically to monitor progress & consultation with teachers and other professionals is available.

Pathways Speech & Language  (http://www.pathwayssl.com)
3205 Ocean Park Blvd. Santa Monica, CA 90405 Phone: (310) 581-6430
Services Provided: “Toddler Time” is a 6-week program for children 22-42 months that integrates language and learning in a structured classroom setting with 4 to 6 other children, led by two speech & language pathologists and two assistants. Pathways also provides parent training on the “Hanen program” that includes informative & personalized classes for small groups of parents and a guidebook.

Speech Me
3637 Motor Ave. Los Angeles, CA 90230 Email: hmarendaspeech@gmail.com
Services Provided: Heather Marenda, MS, CCC-SLP provides one-on-one speech and language therapy services for children ranging from infancy through 6 years old and has experience working with toddlers who have various developmental disabilities, specifically those with ASD and similar language delays.

Kids in Motion  (http://www.mykidsinmotion.com/index.html)
21615 Hawthorne Blvd., Suite 200 Torrance CA 90053 Phone: (310) 371-8555
Services Provided: Kids in Motion offers speech-language therapies addressing a variety of speech and language disorders such as receptive/expressive language delay, childhood apraxia of speech, communication impairments related to autism spectrum disorders and social skills/pragmatic language impairments. Kids in Motion also offers center-based, small group classes (Say N’ Play and Talking with Tots) for young children 18 months – 3 years of age to support early speech and language development.

Speech 4 Kids
1932 14th Street Santa Monica, CA 90404 Phone: (310) 839-1974 Email: andreejames@speech-4-kids.com
Services Provided: Speech 4 Kids offers diagnostic & therapy services for kids with speech/language delays; sessions are individualized and utilizes comprehensive services to best meet the needs of the child.

Pediatric Therapy Playhouse
10642 Santa Monica Blvd., Suite 101 Los Angeles Phone: (310) 571-5726 Email: Jessie@pediatrictherapyplayhouse.com Services Provided: Pediatric Therapy Playhouse offers a variety of services for children with delayed language development, language disorders, speech sound disorders, cerebral palsy, down syndrome, and autism spectrum disorders.

Scheflen Speech-Language Pathology, Inc.
530 Wilshire Blvd, Suite 105 Santa Monica 90401 Phone: (310) 461-8100
Services include individual and group speech-language pathology therapy as well as social skills groups, behavior therapy, and play therapy. Specializing in treating children with a variety of communication and related disorders, including childhood apraxia of speech (CAS), phonological disorders, articulation disorders, receptive and expressive language disorders, auditory processing disorders, social communication disorders, autism spectrum disorders or other developmental delays, pragmatic and social cognition challenges, behavior disorders, fluency disorders (stuttering), and literacy disorders.

Children’s Speech Care Center, Lynne Alba
3521 Lomita Blvd., Suite 201, Torrance, CA 90505 Phone: 310-856-8528

CSUN Speech and Language Clinic
18111 Nordhoff St., Northridge CA 91330
http://www.csun.edu/hhd/cd/cdshc.html
Financial Assistance Programs

Utilities

Electric

Our local service provider is Southern California Edison (SCE). The California Alternate Rates for Energy (CARE) program offers income-qualified customers a discount of 20% or more off their monthly electric bill.

If the CARE program is not right for your family, you may qualify for the Family Electric Rate Assistance program (FERA). This plan offers a discounted rate on your monthly Southern California Edison bill for families of 3 or more who fall within the income guidelines and exceed their baseline usage by 30% or more.

<table>
<thead>
<tr>
<th>Size of household</th>
<th>CARE Income Limits</th>
<th>FERA Income Limits</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 -2 family members</td>
<td>Up to $31,800</td>
<td>Not eligible</td>
</tr>
<tr>
<td>3</td>
<td>Up to $37,400</td>
<td>$37,401-$46,800</td>
</tr>
<tr>
<td>4</td>
<td>Up to $45,100</td>
<td>$45,101-$56,400</td>
</tr>
<tr>
<td>5</td>
<td>Up to $52,800</td>
<td>$52,801-$66,000</td>
</tr>
<tr>
<td>6</td>
<td>Up to $60,500</td>
<td>$60,501-$75,600</td>
</tr>
<tr>
<td>Each additional person</td>
<td>$7,700</td>
<td>$7,700-$9,600</td>
</tr>
</tbody>
</table>

To enroll in either program, contact SCE at the phone number on your bill, or you can apply online at www.sce.com. Search for “CARE”.

Low Income Home Energy Assistance Program (LIHEAP)

Qualified low income homeowners and renters can receive a range of energy-saving and safety services, from attic insulation, refrigerator replacement, and carbon monoxide testing, to installation of energy-saving devices, minor home repairs, furnace repair/replacement and information packets about energy conservation. For more information, contact the Maravilla Foundation at 323-721-4162.

Home Energy Assistance Program (HEAP)

Eligible clients who can’t always afford to pay their utility bills can have their bills paid for them once a year by the Maravilla Foundation. Eligibility is determined by ZIP codes. Priority clients are senior citizens, the disabled and families with small children. For more information, contact the Maravilla Foundation at 323-721-4162.
Financial Assistance Programs

Gas

Our local service provider is the Southern California Gas Company. Low income customers may qualify for a 20% discount on the monthly gas bill for eligible households under the CARE program. In addition, those who qualify—and are approved within 90 days of starting new gas service—will also receive a $15 discount on the Service Establishment Charge. You will receive your discount once your completed application is approved by Southern California Gas Company (SoCalGas).

There are two ways to qualify:

**Method 1 Program Based:** You qualify for CARE if you or another person in your household is enrolled in any one of the following public assistance programs:

- Medi-Cal
- Supplemental Security Income (SSI)
- CalFresh (formerly known as Food Stamps)
- CalWorks
- Federal Public Housing Assistance (Section 8)
- Healthy Families Category A
- Low Income Home Energy Assistance Program
- National School Lunch Free Lunch Program (NSL)
- WIC (Women, Infants & Children)

**Method 2:** Total income for all persons in your household meets the following income guidelines:

<table>
<thead>
<tr>
<th>Number of persons in household</th>
<th>1 or 2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total yearly household income* no more than</td>
<td>$31,800</td>
<td>$37,400</td>
<td>$45,100</td>
<td>$52,800</td>
<td>$60,500</td>
</tr>
<tr>
<td>For each additional person in your household add $7,700.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Includes current household income from all sources before deductions. Effective June 1, 2011-May 31, 2012.

Medical Baseline Allowance Program

If someone in your household has a life-threatening illness, is seriously disabled, or requires more heat in winter due to a serious health condition, you may qualify for an additional allowance of gas at a lower rate. For more information, call 800-427-2200 or see www.socalgas.com/residential/assistance.
Financial Assistance Programs

**Telephone**
All telephone carriers must have Lifeline services for low income and/or disabled customers.

California LifeLine is a program sponsored by the California Public Utilities Commission (CPUC) that provides discounts on connection and monthly residential basic telephone service charges to eligible low-income households. Additional discounts are available to qualifying customers who live on federally recognized Tribal Lands or have a deaf or hearing impaired member in the household.

Eligibility varies by carrier. Here is information on AT&T Lifeline program.

Other benefits include the availability of free toll blocking and no charge for the monthly Federal Subscriber Line Charge and the Federal Universal Service Fee. However, any other AT&T California features such as Call Waiting will be charged at the regular rate.

Basic flat fee Life Line service is $6.84 per month.

**How to Qualify for California LifeLine**

To qualify for California LifeLine service, you need to meet the following three requirements:

You may qualify for California LifeLine under either the **Method 1 Program-Based** OR **Method 2 Income-Based** described below.

- The household in which you are applying for California LifeLine must be your primary residence and you do not currently receive the LifeLine discounts.
- You cannot be claimed as a dependent on someone else’s income tax return.

**Method 1 Program Based:** You qualify for California LifeLine if you or another person in your household is enrolled in any one of the following public assistance programs:

- Medi-Cal
- Supplemental Security Income (SSI)
- CalFresh (formerly known as Food Stamps)
- CalWorks
- Federal Public Housing Assistance (Section 8)
- Healthy Families Category A
- Low Income Home Energy Assistance Program
- National School Lunch Free Lunch Program (NSL)
- WIC (Women, Infants & Children)

**Method 2 Income-Based:** You qualify for California LifeLine if your total household income is at or less than the California LifeLine income maximums.
# Financial Assistance Programs

<table>
<thead>
<tr>
<th>Size of Household</th>
<th>Annual Gross Income (Eff. 6/1/11-5/31/12)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-2 members</td>
<td>$24,000</td>
</tr>
<tr>
<td>3 members</td>
<td>$28,200</td>
</tr>
<tr>
<td>4 members</td>
<td>$34,000</td>
</tr>
<tr>
<td>5 members</td>
<td>$39,800</td>
</tr>
<tr>
<td>Each additional member, add</td>
<td>$5,800</td>
</tr>
</tbody>
</table>

Proof of income is required.

**How to Apply for California Lifeline**

**New AT&T California Customers**

If you are a new applicant, you must be approved for California LifeLine before discounted rates are received. Until you are approved, you will pay regular rates for basic phone service and connection charge. Interest-free payment plans are available for any applicable service-connection charges.

**Existing AT&T California Customers**

If you are an existing AT&T customer and would like to change your service to Lifeline, you will be billed a one-time conversion charge of $10.00 when approved for Lifeline. Please call us at 1.800.288.2020 to modify. There is no charge to change from California LifeLine to basic residential Flat or Measured Rate service.

**Lifeline Approval**

If you are approved for LifeLine by the California LifeLine Administrator, you will receive a bill credit with the California LifeLine discount retroactive to the date your service began or the date you requested to be enrolled, whichever is later. If your bill has a credit balance of $10.00 or more, you may request a refund check.

**Maintaining Lifeline Service**

LifeLine eligibility is valid for one year. To remain on LifeLine, you will be required to undergo the annual LifeLine renewal process. A renewal form, sent by the California LifeLine Administrator, must be completed online or returned by mail by the due date on the form. The California Public Utilities Commission (CPUC) or the California LifeLine Administrator may require supporting documents to prove your eligibility at anytime. You will be removed from California LifeLine and will be changed to regular residential service if you are found ineligible.

Note: there is no LifeLine service for wireless phones.
Financial Assistance Programs

Internet

Comcast Internet Essentials offers low cost internet service to qualifying families. If you have a child that qualifies for the National School Lunch Free Lunch program, you can get internet service for $9.95 per month, and have the option of purchasing a new laptop for $149.95 at the time of initial enrollment.

To qualify for $9.95 a month Internet service and a low-cost computer, your household must meet all these criteria:

- Be located where Comcast offers Internet service
- Have at least one child receiving free school lunches through the National School Lunch Program
- Have not subscribed to Comcast Internet service within the last 90 days
- Not have an overdue Comcast bill or unreturned equipment

Call 1-855-8-INTERNET (1-855-846-8376) to request an application. Complete and return it, along with lunch program documents from your child’s school. Comcast will notify you by mail about the status of your application. Allow 7-10 days for a response.

For more information, see www.internetessentials.com.

Note: there are no low income or assistance programs for cable TV or satellite TV services.
What is SSI?

SSI, or Supplemental Security Income, is a federal program that provides monthly cash payments to people in need. SSI is for people who are 65 or older, as well as blind or disabled people of any age, including children.

To qualify for SSI, you must also have little or no income and few resources. The value of the things you own must be less than $2,000 if you’re single or less than $3,000 for married couples living together. We don’t count the value of your home if you live in it, and, usually, we don’t count the value of your car. We may not count the value of certain other resources either, such as a burial plot.

To get SSI, you must also apply for any other government benefits for which you may be eligible. You must live in the United States or the Northern Mariana Islands to get SSI. If you’re not a U.S. citizen, but you lawfully reside in the United States, you may still be able to get SSI. For more information, read Supplemental Security Income (SSI) for Noncitizens (Publication No. 05-11051).

The state of California adds money to the federal payment. The single payment you get at the beginning of each month includes both the federal SSI payment and your supplement from California.

Medical assistance

If you get SSI, you can usually get medical assistance (Medi-Cal) automatically. A separate Medi-Cal application isn’t necessary. If you have questions about Medi-Cal, contact your local county health or human services office.

Supplemental Nutrition Assistance Program (SNAP)

People who get SSI in California cannot get SNAP benefits, formerly known as food stamps, because the state adds money to the federal SSI payment instead.

However, you may be able to get SNAP benefits:

- While you’re waiting for a decision on your SSI application;
- If your application for SSI is denied; or
- If you move to another state.

For more information, contact your local county health or human services office.

Other social services

Other services you may be able to get through your local county health or human services office include:

- A special allowance for assistance dogs for people who are blind or who have a disability;
- Certain domestic and personal care services provided to eligible people who are elderly, blind, or who can’t perform the services themselves, and who can’t safely remain in their own homes unless such services are provided; and
- Protective services.

For more information, contact your local county health or human services office.
Monthly SSI payment amounts

The table below lists the combined federal and state payment amounts. Not all SSI recipients get the maximum amount. Your payment may be lower if you have other income.

<table>
<thead>
<tr>
<th>Category</th>
<th>2016 total monthly payment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Single people</td>
</tr>
<tr>
<td></td>
<td>Aged</td>
</tr>
<tr>
<td>Independent living status</td>
<td>$889.40</td>
</tr>
<tr>
<td>Non-medical out-of-home care</td>
<td>$1,145.00</td>
</tr>
<tr>
<td>Independent living status, no cooking facilities</td>
<td>$973.40</td>
</tr>
<tr>
<td>Living in the household of someone else</td>
<td>$648.50</td>
</tr>
<tr>
<td>Disabled minor child</td>
<td>$796.40</td>
</tr>
<tr>
<td>Disabled minor child in the household of another</td>
<td>$555.50</td>
</tr>
<tr>
<td></td>
<td>Disabled</td>
</tr>
<tr>
<td></td>
<td>Aged</td>
</tr>
<tr>
<td>Non-medical out-of-home care</td>
<td>$1,145.00</td>
</tr>
<tr>
<td>Independent living status, no cooking facilities</td>
<td>$973.40</td>
</tr>
<tr>
<td>Living in the household of someone else</td>
<td>$648.50</td>
</tr>
<tr>
<td>Disabled minor child</td>
<td>$796.40</td>
</tr>
<tr>
<td>Disabled minor child in the household of another</td>
<td>$555.50</td>
</tr>
<tr>
<td></td>
<td>Blind</td>
</tr>
<tr>
<td>Independent living status</td>
<td>$944.40</td>
</tr>
<tr>
<td>Non-medical out-of-home care</td>
<td>$1,145.00</td>
</tr>
<tr>
<td>Independent living status, no cooking facilities</td>
<td>N/A</td>
</tr>
<tr>
<td>Living in the household of someone else</td>
<td>$703.50</td>
</tr>
<tr>
<td>Disabled minor child</td>
<td>$796.40</td>
</tr>
<tr>
<td>Disabled minor child in the household of another</td>
<td>$555.50</td>
</tr>
</tbody>
</table>

Aged or disabled couples

<table>
<thead>
<tr>
<th>Category</th>
<th>2016 total monthly payment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Independent living status</td>
</tr>
<tr>
<td>Non-medical out-of-home care</td>
<td>$1,496.20</td>
</tr>
<tr>
<td>Independent living status, no cooking facilities</td>
<td>$1,664.20</td>
</tr>
<tr>
<td>Living in the household of someone else</td>
<td>$1,134.67</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Blind couples</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Independent living status</td>
</tr>
<tr>
<td></td>
<td>$1,643.20</td>
</tr>
<tr>
<td></td>
<td>Living in the household of someone else</td>
</tr>
<tr>
<td></td>
<td>$1,281.67</td>
</tr>
</tbody>
</table>

Blind person with an aged or disabled spouse

<table>
<thead>
<tr>
<th>Category</th>
<th>2016 total monthly payment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Independent living status</td>
</tr>
<tr>
<td></td>
<td>$1,587.20</td>
</tr>
<tr>
<td></td>
<td>Living in the household of someone else</td>
</tr>
<tr>
<td></td>
<td>$1,225.67</td>
</tr>
</tbody>
</table>

Contacting Social Security

Visit [www.socialsecurity.gov](http://www.socialsecurity.gov) anytime to apply for benefits, open a my Social Security account, find publications, and get answers to frequently asked questions. Or, call us toll-free at [1-800-772-1213](tel:1-800-772-1213) (for the deaf or hard of hearing, call our TTY number, [1-800-325-0778](tel:1-800-325-0778)). We can answer case-specific questions from 7 a.m. to 7 p.m., Monday through Friday. Generally, you’ll have a shorter wait time if you call after Tuesday. We treat all calls confidentially. We also want to make sure you receive accurate and courteous service, so a second Social Security representative monitors some telephone calls. We can provide general information by automated phone service 24 hours a day. And, remember, our website, [www.socialsecurity.gov](http://www.socialsecurity.gov), is available to you anytime and anywhere!
Notes to Take to the Doctor

Date of Visit:

Provider’s Name:

Phone:

Address:

Notes before the visit:

1.) Why am I seeing the doctor today?

2.) What are my symptoms?

3.) How long has this concern been going on?

4.) What have I tried so far?

5.) What makes it better?

6.) What makes it worse?

7.) What made you decide to make an appointment with the doctor now?

8.) What do you hope will happen at this visit?
<table>
<thead>
<tr>
<th>Notes from the exam:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.) What did the doctor and I talk about?</td>
</tr>
<tr>
<td>2.) When should I start feeling better?</td>
</tr>
<tr>
<td>3.) What is the treatment plan?</td>
</tr>
<tr>
<td>A. What will I do?</td>
</tr>
<tr>
<td>B. What will the doctor (or doctor’s office) do?</td>
</tr>
<tr>
<td>4.) Can I do my regular activities (work, school, see friends)?</td>
</tr>
<tr>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>A. If I can’t do them now, when can I start doing them?</td>
</tr>
<tr>
<td>☐ Hours ☐ Day ☐ Week ☐ Other ________________</td>
</tr>
<tr>
<td>5.) How will I receive my test results?</td>
</tr>
<tr>
<td>☐ Someone will call me</td>
</tr>
<tr>
<td>☐ I will get something in the mail</td>
</tr>
<tr>
<td>☐ I should call the office</td>
</tr>
<tr>
<td>A. When should I call? ____________</td>
</tr>
<tr>
<td>B. Who should I call? ____________</td>
</tr>
<tr>
<td>a. Name:</td>
</tr>
<tr>
<td>b. Phone Number:</td>
</tr>
<tr>
<td>6.) When should I come back or call the doctor?</td>
</tr>
<tr>
<td>7.) Who can I call if I have questions?</td>
</tr>
<tr>
<td>A. Name:</td>
</tr>
<tr>
<td>B: Phone number:</td>
</tr>
<tr>
<td>8.) Is there anything else I should do?</td>
</tr>
</tbody>
</table>
Cognoa is an evaluation tool that can help identify autism in kids and tracks a child’s behavior and milestones for doctors and teachers. Features include expert-recommended activities, which can help children with autism who may have issues with fine motor and sensory, socialization, tantrums and more.

https://www.cognoa.com/

Birdhouse gives you the tools to organize meds, supplements, and therapies, and easily keep track of things like food, behaviors, moods, sleeping habits, and more, so you're in control and your life's that much easier.

http://www.birdhousehq.com/autism/

First-Then visual schedule is an affordable user-friendly mobile application designed for caregivers to provide positive behavior support through the use of “visual schedules” to help with transitions and decrease anxiety. Includes daily events, routines, steps, transitions.

https://www.goodkarmaapplications.com/first-then-visual-schedule.html

Visual Schedule Planner is a completely customizable visual schedule iPad app that is designed to give an individual an audio/visual representation of the “events in their day”. In addition, events that require more support can be linked to an “activity schedule” or “video clip” to help model the task even further.


QuickCues is a social script app that helps teens and young adults on the autism spectrum handle new situations and learn new skills. Five modules available: Communication, Life Skills, Socialization, Coping, and On the Job.

https://www.fraser.org/

This for That series are a set of multiple apps that helps the lives of children with Autism; includes visual schedules, token board, and visual timer.

http://pixelationlabs.com/

ABA Flashcards: Emotions covers over 100 different emotions via 500+ gorgeous flash cards and interactive games. Users can also make their own flashcards and record your own voice over them to practice with as well.


Talking Mats is an evidence-based tool for helping people with communication difficulties to participate in conversations and communicate effectively about things that matter to them. It helps them understand and consider a range of topics and say what they feel in a visual way that can be easily recorded.

Based on extensive research and designed by Speech and Language Therapists, Talking Mats uses unique, specially designed symbols that are attractive to all ages and abilities.


Identifying, understanding, and responding appropriately to emotions is a very important skill for every child. This app covers over 100 different emotions via 500+ gorgeous flash cards and interactive games. Users can also make their own flashcards and record your own voice over them to practice with as well.


Questions and associated videos for the user to view and react to by answering multiple choice questions.

http://www.socialskillbuilder.com/
## Places with Accommodations

### Disneyland

Disneyland offers many accommodations for children with ASD. There are many features available such as the ability to purchase tickets in advance, check into a ride and return at a designated time to avoid queues, and do rider switch. Rider switch allows someone to experience an attraction while another person in the party waits with the guest who does not ride, and then they “swap” so the other person does not have to wait in line again. Companion restrooms, stroller and wheelchair rental, and break rooms are available as well.


### Legoland

Legoland offers quite a few opportunities for children with ASD to enjoy the park. Partnering up with AutismSpeaks, Legoland now provides quiet rooms, no wait passes, noise-cancelling headphones, weighted blankets, squishy toys and LEGO® building tables.


### Knott’s Berry Farm

Includes many programs such as the Boarding Pass program, which allows you to check into a ride and gives a time to come back to go straight to line to avoid queues, or Parent Swap, which allows an individual parent to enjoy the ride while the other one waits with the children, and then they swap positions.

[https://www.knotts.com/help/accessibility](https://www.knotts.com/help/accessibility)

### Universal Studios

Universal Studios has many rides, shows, attractions, escalators and parking structures that are designed to comfortably accommodate guests in wheelchairs and other disabilities. There are designated guests-with-disabilities entrances for all the attractions in the Park.


### MLB Autism Awareness “Nights”

Major League Baseball has partnered up with Autism Speaks for Autism Awareness Nights which are evening baseball games with options for more sensory-sensitive individuals. For a more sensory friendly experience, speaker volume is lowered, quiet rooms are made available, activities are provided, and tickets are given away to individuals with autism.

[http://m.mlb.com/tickets/theme-tickets/autism-awareness](http://m.mlb.com/tickets/theme-tickets/autism-awareness)

### AMC

Once a month AMC Theaters offers sensory-friendly screenings of a kid-friendly movie. Lights are brighter, previews are gone, and volume is turned down. Families can also bring outside food for dietary restrictions.


### Sky Zone

Since Autism Awareness Month in April, every month, Sky Zone, the trampoline park, holds a sensory-friendly jump session for children. Music is turned off, families jump for half the price of admissions, and everything is toned down for children with special needs.

[https://www.skyzone.com/programs/sensory-hours](https://www.skyzone.com/programs/sensory-hours)

### Theater Development Fund

The Theater Development Fund aspires to make Broadway shows more accessible to children with autism by providing sensory-friendly performances. Noises are reduced, less strobe lights, quiet areas, and activity areas are made available throughout the performances, and social stories with pictures of the theater are available prior to the show.

[https://www.tdf.org/?id=128](https://www.tdf.org/?id=128)

### Sesame Street Live!

Sesame Street Live puts on autism friendly performances across the country which includes extra spacing, production notes for special noises, and quiet areas.

[https://www.sesamestreetlive.com/](https://www.sesamestreetlive.com/)

### San Diego Zoo

San Diego Zoo provides options for greater accessibility around the zoo including easy access pass for certain areas, free admission for caregiver if needed, tour buses, and accessibility maps.

[http://zoo.sandiegozoo.org/content/guests-disabilities](http://zoo.sandiegozoo.org/content/guests-disabilities)

### Sea World

Sea World provides its own accessibility option for those with autism, such as allowing you to check into a ride and gives a time to come back to go straight to line to avoid queues.


### Chuck E. Cheese

Sensory Sensitive Sundays: The first Sunday of every month from 9:00am-1:00am at Chuck E. Cheese’s. Sensory Sensitive Sundays occur two hours before the restaurant opens to the general public.


### Danny’s Farm

Danny’s Farm is a safe and nurturing petting farm and social environment for children and adults with autism. Additionally, Danny’s Farm also provides employment opportunities for adults with disabilities.

[http://www.dannysfarm.org/about/](http://www.dannysfarm.org/about/)

### Sesame Place

Sesame Place provides a Ride Accessibility Program (RAP) for those with disabilities to help find rides and programs fit for individuals’ needs. Additionally, it provides a Special Access Pass for those who are unable to wait in queue lines.