

Discussion Board 5C

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GEN 310: Advanced Oral Communication

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The topic I chose for this week's speech is Children on the Autism Spectrum. I chose this topic because I have worked with young children on the spectrum as a teacher and as a behavioral health professional.

According to the Centers for Disease Controls Autism and Developmental Disabilities approximately, one and fifty-nine children are born with Autism. In order to talk about Autism and my experience of working with children, the audience should have a clear definition of what Autism is. Some may hear Autism and think that the diagnosis makes a child less capable or less intelligent, and honestly, in my opinion, I do not believe that to be fact. With that being said, the literal definition of Autism is "a complex developmental condition that involves persistent challenges in social interaction, speech, and nonverbal communication and restricted/repetitive behaviors. The effects of ASD and the severity of symptoms are different in each person." according to physcatry.org.

Now that the audience has a literal definition, I would like to take a few minutes to talk about my experience as a teacher and as a Behavioral Health Professional. In 2018 I worked for an organization in Bangor Called UCP of Maine. This program took children on the autism spectrum and gave them an opportunity to work on behaviors, speech, following structure, and routine before they moved on to the public schools for kindergarten. This program was fascinating for a couple of reasons; this was not your typical school. It was set up in a real school environment and what I mean by that is there were classrooms. The most significant differences were that instead of one teacher having upwards of twenty students in a classroom, we had eight, and there was one headteacher, which at the time was me, and each child was assigned a BHP to work with them to follow the routine of the classroom from eight am right up until roughly three in the afternoon. Each staff member was placed with the clients based on personality and trial

and error. If a BHP did not work well with a client, we would switch staff members to suit the clients' needs better. Now when we hear Autism, one may think, slow, impulsive may be, and when I hear it, the word sensory comes to mind. Let's take a look at the literal definition I gave earlier. From the description, we know that Autism is a developmental condition that involves persistent challenges in social interaction, speech and nonverbal communication, and restricted/repetitive behaviors. Here are some examples for you to be able to picture that a little better. In a classroom, each client has a different set of goals tailored to them individually that address the things they struggle with, whether it be communication, behaviors, and or social interaction. A client may have a goal to have a back and forth interaction with a peer for a total of three minutes. That could be completed by clients talking back and forth, or maybe they are playing with a toy car, and they push it back and forth. I saw two behaviors fairly regularly covering and or pulling on the ears when there was a sound a client did not like or like most children that get upset dropping to the floor and refusing to participate. I saw both of these behaviors often. Every now and then, kiddo might get a little aggressive and go at their worker or walk around the room and throw things off shelves. These were all things that we worked on. Lastly, communication or lack thereof, some clients would have difficulty with verbal communication, and the sad reality is some of the children will never be able to communicate verbally. The agency partnered with a local speech therapist in order to work on communication, and for each client, this looked different. For the clients who could not communicate verbally, the speech therapist would show them how to communicate using a tool called a pecs board, and what this board did was put words into picture form. Let's say the client was hungry and wanted a cracker. The client would go through the book to find the first phrase I want, and then they would find the picture of a cracker, and the last peck would be, please. In a classroom setting, the

child will have to get the attention of a worker or a teacher to communicate their needs, so what we would have the clients do is tap their worker on the shoulder to get their attention. The client would lay out the sentence in order, and the worker would read the sentence out loud to promote or encourage the client to attempt to say it. Then they would more often than not get what they had requested. Not every day went as smoothly as one would hope though a client would occasionally have a rough day. We had documentation to measure the client's growth over a period of time, and on any given day, they may have a not so great day. In the case of behavior happening, we would document the antecedent or the things that took place leading up to the behavior, what happened during the action. Then we would debrief with the client. If they had verbal communication, we would ask something like, why did you push your friend, and sometimes the response was kind of surprising. I had a client tell me they wanted to hurt their peer before, and that is why he did what he did. You document that, and that note goes two places to your supervisor, and a copy goes home for the parents to sign.

Having the experience and looking at the literal definition of Autism has opened my eyes a little bit more. Through research and personal experience, I have gained a little bit of a better understanding of this topic. I loved my experience working with the kids, and I am grateful to have had that opportunity. If nothing else, I hope you learned something new from the speech this week.

Thank you.