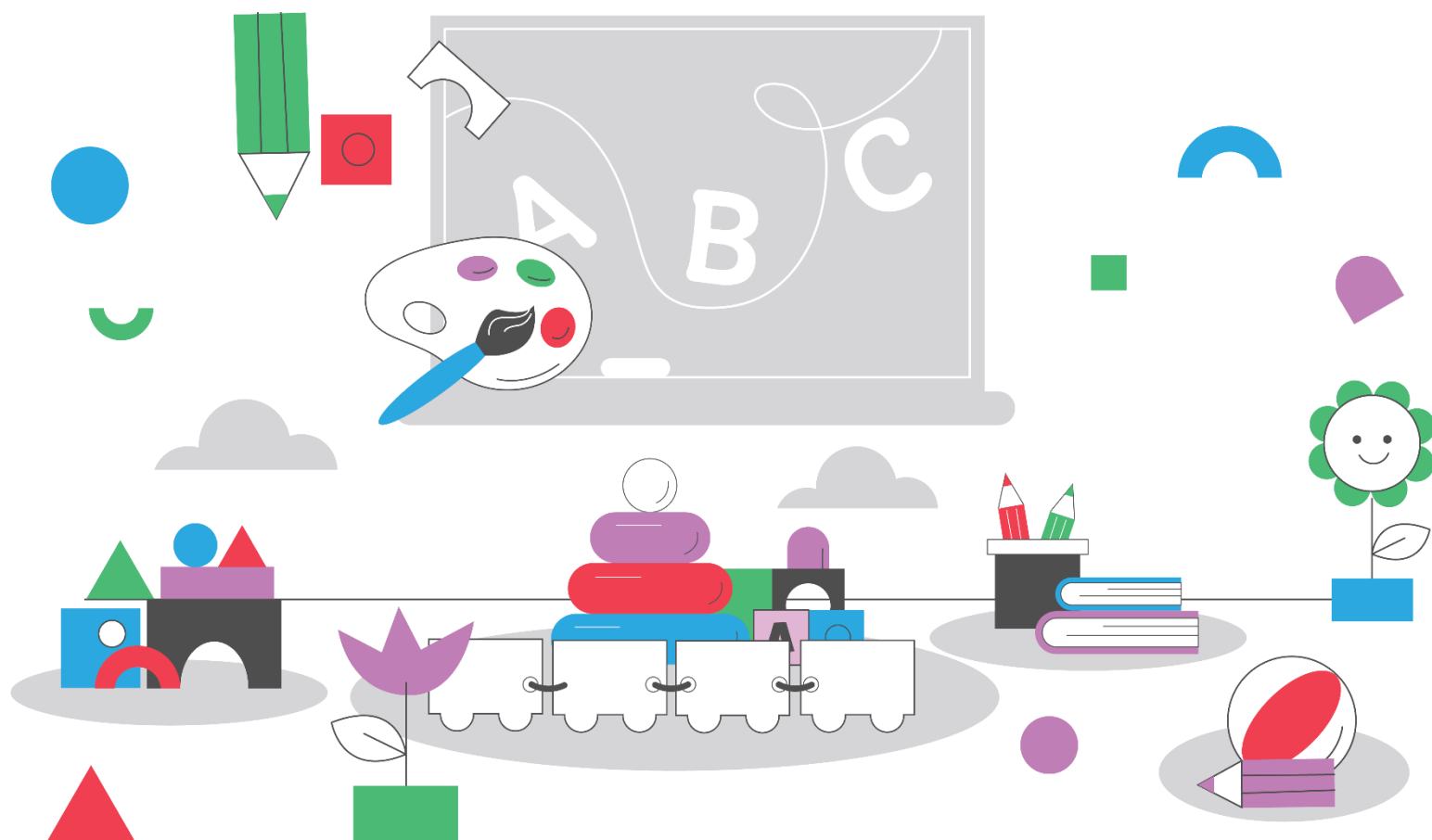




ASD in Preschool Educators' Curriculum



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About this document

This document is a comprehensive professional development curriculum designed to prepare preschool educators to effectively support young children with Autism Spectrum Disorder (ASD) in inclusive early childhood settings. The curriculum adopts a strengths-based, relationship-centered approach grounded in the support paradigm, emphasizing that autism is a neurodevelopmental difference rather than a deficit to be fixed. It provides educators with evidence-based theoretical knowledge alongside practical strategies for creating accessible, predictable, and emotionally supportive learning environments that enable all children to participate meaningfully in classroom life.

The curriculum is structured around six interconnected modules that build from foundational understanding to practical implementation. Module 1 introduces the support model and explores ASD from neurobiological and diagnostic perspectives, emphasizing individual variability and early identification. Module 2 focuses on structuring physical environments using principles from the TEACCH approach, addressing sensory needs, visual supports, and inclusive classroom design. Module 3 addresses communication and social interaction strategies, including the use of visual supports, gestures, and social stories. Module 4 examines positive behavior support and classroom management, teaching educators to understand behavior as communication and respond proactively rather than punitively. Module 5 emphasizes collaboration with families and external professionals through culturally sensitive, partnership-based practices. Finally, Module 6 equips educators with observation techniques, individualized planning tools, and progress monitoring systems using frameworks like SMART goals and developmental checklists.

Module 1:

Autism Spectrum Disorder: understanding from the paradigm of supports

This Module 1, entitled "Autism Spectrum Disorder: understanding from the support paradigm", is part of the training curriculum for early care educators. Throughout this block, a theoretical-practical journey is offered that combines the focus on significant relationships with the planning of individualized supports, so that future teachers acquire tools to detect early signs of ASD, understand its neurobiological and diagnostic bases, and address the great variability of profiles from a perspective of inclusion and strengths. Integrated activities encourage reflective observation, critical analysis, and interdisciplinary collaboration, ensuring that each child actively participates in accessible and caring educational environments.

Learning outcomes:

By the end of this module, you will be able to:

1. Explain the principles of the supports and relationships paradigm, identifying its philosophical and normative foundations in the European context for early care for ASD.
2. Recognize and describe the developmental and neurobiological bases of autism spectrum disorder, as well as the current diagnostic criteria (DSM5TR and ICD11).
3. Critically analyze the variability and heterogeneity of profiles within the autism spectrum, pointing out strengths and areas of support based on the sensory, communicative and social characteristics of each child.
4. Design and evaluate proposals for inclusive educational intervention – activities, classroom adaptations and peer mediation strategies – based on natural and collaborative supports.

1. What is the support model? How to support ASD and early signs

Theory:

Philosophy of this Curriculum: Introduction to the Support Paradigm

In modern early childhood education, care for students with autism spectrum disorder (ASD) is based on quality of life and inclusion. This approach, promoted at the European level, emphasizes a change of model from the traditional clinical vision to a perspective centered on the person and their interactions in natural contexts. European education policies and programmes such as Erasmus+ encourage evidence-based practices aligned with the principles of the social model of disability and the UN Convention on the Rights of Persons with Disabilities. In this paradigm, diagnosis is no longer the sole focus, but a starting point for planning individualized supports that promote the child's active participation in ordinary settings.

The literature highlights that early interventions applied in the child's natural environments (family, school, community) significantly improve their cognitive, social, and adaptive development, reinforcing the importance of inclusive environments and evidence-based practices.

Definition of autism: Developmental and neurobiological bases. Diagnostic criteria.

Autism spectrum disorder (ASD) is a neurodevelopmental disorder with a neurobiological basis, with onset in early childhood. Its key features include difficulties in several domains that may vary in intensity:

- **Social communication and interaction**, such as limited reciprocity, trouble understanding gestures or emotions, or challenges building relationships.
- **Restricted and repetitive behaviors**, including stereotyped movements, rigid routines, and highly focused interests.
- **Sensory processing differences**, such as hyper- or hyposensitivity to sounds, lights, textures, or other stimuli.
- Autism is **not an acquired mental illness**, but a developmental profile that lasts throughout life.

Current diagnostic criteria: currently, both the *DSM-5-TR* (APA 2022) and the *ICD-11* (WHO 2019) define ASD under a unified spectrum approach. Both systems highlight two core domains:

1. **Deficits in communication and social interaction** (e.g., difficulties with social-emotional reciprocity, understanding and using nonverbal communication, and developing developmentally appropriate relationships).
2. **Restricted and repetitive patterns of behavior, interests, or activities** (e.g., stereotyped movements, insistence on routine, highly focused interests, or unusual sensory reactions).

Additionally, several considerations are important to refine diagnosis:

- Symptoms appear in the **initial stages of development**.
- They must significantly **limit or alter the child's daily functioning**.
- Language delay is not a diagnostic criterion by itself, but often present.
- Sensory atypicalities are explicitly included.

Moreover, specifiers provide a more detailed description of individual profiles within the spectrum:

- **DSM-5:** three levels of severity, based on the amount of support required (from “requires support” to “requires very substantial support”) for each of the two major symptom domains.
- **ICD-11:** specifies whether there is an intellectual disability or not, and notes regression of skills when present.

In this regard, diagnosis continues to be a clinical process guided by specialist evaluation:

- No biomedical test exists; diagnosis is based on observation and history.
- Best practice involves a **multidisciplinary team** and an **early assessment**.
- Early and rigorous diagnosis allows individualized educational support and improves long-term outcomes.

From an educational perspective, the **educator's role** is essential in early identification and support: (1) recognizing early signs of ASD, (2) collaborating with diagnostic teams and families, and (3) adjusting educational strategies from the first suspicions, always respecting regulations and family rights.

Variability and individual profiles

Within the autism spectrum there is enormous variability; no two children with autism are alike. ASD covers a wide spectrum of presentations, from children who require a very high level of support in their daily activities to children with greater autonomy. Some may also have intellectual disabilities or associated learning difficulties, while others have average cognitive abilities or outstanding in certain areas. Similarly, about half of ASD cases in childhood show *varying degrees of language development*: some children are nonverbal or have very limited language, while others develop functional language but perhaps with peculiar communicative uses (e.g., echolalia or very literal language). Diverse sensory profiles are also observed: some children have hypersensitivity to sounds or textures, reacting with

distress to stimuli that go unnoticed by others, while others may seek intense stimuli or show atypical pain thresholds. This internal diversity of the spectrum reflects the complexity of autism and forces us to avoid simplifying stereotypes.

The developmental profiles in ASD combine different strengths and needs. For example, a 4-year-old child with autism might show great puzzle skills and remarkable visual memory, but at the same time have difficulty playing interactive with peers. Another child may enjoy social interaction and seek to play with others, but their verbal communication is limited and requires augmentative or alternative systems to express themselves. Recognizing these individual differences is essential: each child with ASD has a unique profile of abilities (e.g., visual-spatial skills, music, memory) and particular challenges (e.g., tolerance to change, functional communication, emotional self-regulation).

Consequently, inclusive early childhood education must be based on a careful and comprehensive observation of each student with ASD, to identify their characteristics and adjust support strategies. The person-centred paradigm emphasises the need for an individualised approach, drawing on each child's strengths as a pathway to learning. For example, if a child shows an intense interest in trains, teachers can integrate that topic into class activities to motivate their participation and connection with curricular content. At the same time, specific supports will have to be designed according to needs: a student with low understanding of figurative language can benefit from clear visual supports; another with hearing sensitivity may require wearing ear protectors in noisy environments; A child with interaction difficulties might improve with peer-mediated interventions (e.g., structured play with a peer tutor).

Individual educational planning (often concretized in an Individualized Support Plan) is the tool to respond to this variability. This plan should consider the child's areas of development (communication, social, cognitive, motor, autonomy) and establish personalized goals and intervention strategies in each. It is critical that accommodations are implemented within the mainstream classroom whenever possible, leveraging shared routines and activities as inclusive learning opportunities. Research and European guidelines underline that starting from the learner's strengths and providing tailored supports enhances their development to their fullest potential. Likewise, involving the family in the understanding of the child's profile and in the generalization of strategies between home and school is key to the consistency of support.

In summary, addressing variability within the autism spectrum implies seeing the child beyond the diagnostic label, understanding their individual developmental profile. For the pre-service early childhood education teacher, this means cultivating a flexible and empathetic gaze: observing, documenting and responding proactively and creatively to differences. By doing so, it ensures that each child with ASD receives the supports needed to flourish in an educational environment that values their uniqueness and provides them with the necessary opportunities to engage, learn, and engage with their peers from the earliest years.

Sources and conceptual frameworks: This curriculum is based on recent frameworks of inclusive education and attention to diversity in Europe, including the recommendations of Autism Europe on a rights-based approach and evidence, the Quality of Life and Person-Centred Planning model (Verdugo et al., AAIDD) implicit in the supports paradigm, as well as current clinical and educational guidelines (DSM-5-TR, ICD-11) for the understanding of autism. It also includes principles of good practice validated in early intervention (family participation, natural environments, play-based interventions, peer support, among others) and aligned with the European Union's inclusion agenda. This theoretical-practical framework provides future early childhood education teachers with the fundamental knowledge to identify, understand and effectively support students with ASD from an inclusive, scientific and human perspective.

Activities:

Activity 1: Case study: Identifying early indicators

Objective: Train the early childhood educator to recognize warning signs and plan support from the paradigm of relationships, prioritizing the participation of the family and natural contexts.

Duration: 30–40 minutes

Materials:

- Case study handout (Noa's profile)
- Chart paper or whiteboard
- Markers

Situation. Noa, an 18-month-old girl, has been attending nursery school since she was 10 months old. Their educator observes: (a) they do not systematically respond to their name, (b) they maintain brief eye contact, (c) they show intense interest in turning toy wheels, (d) they are startled by everyday noises and seek the pressure of cushions to calm themselves. The family reports that Noa babbled at 9 months, but she has stopped doing so and that she prefers to play alone.

Instructions: Based on the observations of the educator and the information provided by the family, we can identify in Noa the following **early indicators** suggestive of ASD:

1. **Lack of response to name**
 - By 18 months, a typical child responds to his or her name almost systematically. In Noa's case, she does not react when she is called, even after several attempts. This sign appears as early as 9–12 months of age.
2. **Limited eye contact**
 - Noa maintains brief and reluctant eye contact during classroom and play interactions. At this age, you would expect them to hold their gaze more often to share joint attention. Poor joint attention is one of the first indicators identifiable from 6–9 months.
3. **Regression or stopping babbling**
 - The family reports that Noa babbled at 9 months, but has stopped; by 18 months she should be producing consonant-vowel combinations (e.g., "mama," "dada"). The loss or arrest of communication skills (communicative regression) is a critical sign that is usually observed between 12 and 18 months.
4. **Repetitive interests and stereotyped play**
 - Their intense fixation on turning the wheels of toys and not alternating with other activities responds to the restrictive/repetitive pattern of ASD. At 18 months, more varied play (imitation of roles or exploration of different objects) is expected.
5. **Sensory hypersensitivity**
 - Their startle at everyday noises and the search for deep pressure (cushions) for self-regulation indicate difficulties in sensory processing. These sensory differences can influence their participation in group activities and interaction with educational materials.
6. **Solitary play and lack of shared gestures**
 - Prefers to play alone and hardly uses gestures (pointing or showing), which contrasts with the expectation of sharing interests from 12–15 months. The absence of social gestures is another key marker before 18 months

Activity 2: Procedures for systematic observation in natural contexts

Objective:

That early care educators identify and record significant behaviors in children from 0 to 6 years of age in a structured way, applying the paradigm of relationships and supports to design interventions based on the observation of natural environments.

Duration: 90 minutes

Materials:

- Observation sheet template (see Annex: Observation sheet in natural contexts)
- Clipboards or tablets
- Pens or styluses

1. Introduction and theoretical framework (20 minutes)

- Brief presentation on the approach focused on quality of life, the person and their environments). Observation is emphasized as a tool to identify support needs in natural contexts (classroom, playground, dining room) and promote responsive relationships between educators and children.

2. Subgroup formation and context selection (5 minutes)

- Each team of 2-3 educators chooses a simulated natural context (e.g., symbolic play corner, snack time, or diaper change) to focus observation on

3. Observation card design (15 minutes)

- Provide template (**see Annex: Observation sheet in natural contexts at the end of this curriculum**) including:
 - *Identification data*: date, time, context.
 - *Areas of observation*: social communication, affective interaction, joint attention, sensory behaviors and play.
 - *Frequency or intensity scale* (e.g., "0 = never"; "1 = occasional"; "2 = frequent").
- Explain the importance of recording specific facts ("objective description" criterion) to avoid bias.

4. Simulated observation and recording (25 minutes)

- Each team chooses a routine as a natural situation experienced during their day
- There is a spokesperson who notes the team's decisions as relevant behaviors: initiation of interaction, use of gestures, response to the name, sensory reactions (loud noises), turns of play.
- Prioritize the detection of risk indicators (fine motor coordination, joint attention) and strengths (curiosity, imitation).

5. Group Analysis and Support Planning (20 minutes)

- Each team presents their records, highlighting possible support needs (for example, use of pictograms if there is a lack of gestures).

- Together, adjustments in the environment (sensory space, visual routines) and relational strategies (responsive language, positive reinforcement) are discussed.

Closing (5 minutes)

Reflection on how systematic observation, framed in a relational and supportive approach, facilitates the early detection of needs and the co-creation of inclusive environments.

2. Implications for learning and the development of personal competences.

Theory:

Introduction to Personal Competencies and Collaborative Learning

Educators in the early childhood stage must cultivate their own *personal skills* (empathy, self-regulation, assertive communication) and promote collaborative learning among children, since the affective bond between educator-student and between peers constitutes the base environment for learning.

As Bisquerra et al. (2012) point out, in today's education "it is no longer enough to know; it is crucial to know how to be and to know how to live together". Skills such as stress regulation, constructive conflict resolution or empathy are now as essential skills as reading or calculating. In this sense, teamwork in class involves group activities where active collaboration not only pursues academic objectives, but also "has an impact on the socio-affective relationships" of children.

In addition, collaborative learning promotes mutual respect, communication, and shared leadership: each child takes responsibility for the common task, which develops their communication skills and ability to work in a team. Thus, the educator must provide an orderly and emotionally safe context, modeling empathic attitudes, encouraging autonomy and organizing cooperative dynamics that reflect the importance of human relationships as an educational engine.

Impact on social-emotional learning and classroom behavior

In early childhood, the emotional climate of the classroom and relational experiences largely determine social-emotional and behavioral development. Everyday experiences – for example, managing frustration in the face of a challenge or resolving a conflict together – generate lasting learning about emotions and relationships. As experts indicate, what students learn and experience in the classroom "has a direct and lasting impact on their personal, social and future professional lives". In this sense, it has been stressed that emotional education "is not an optional complement, but a fundamental educational need" to form competent, responsible and happy children. In teaching practice, this involves promoting a positive school environment where children feel heard and supported. A predictable routine, individualized attention, and peaceful conflict resolution encourage self-regulation and empathy. Likewise, strengthening affective interactions (e.g., morning greetings, affectionate assemblies, peer support) improves coexistence and reduces disruptive behaviors. In short, by cultivating children's personal skills and promoting collaborative work, their socio-emotional learning is reinforced: they learn to recognize and express their emotions, to tolerate frustration and to cooperate with respect, which has a positive impact on their adaptation and behavior in the classroom.

Understanding ASD from a strengths-based perspective

From the relational and support approach, Autism Spectrum Disorder (ASD) is addressed by recognizing the unique abilities of each child. Current theories of neurodiversity promote viewing

autism as a natural neurodevelopmental variability. According to recent studies, new ideas of neurodiversity show autistic people as "different, with capacities and strengths that society should be able to value and take advantage of". Therefore, this curriculum urges a shift from a deficit approach to a diversity approach: as Ashton Fogle (2021) observes, by adopting a "diversity perspective", students with ASD can learn according to their strengths and not just be singled out for their weaknesses. In practice, the teacher should identify the special interests and talents of each child with ASD (e.g., affinity for the arts, visual memory, or logic skills) and use them as a bridge to teach new competencies. At the same time, it must provide supports (structured environments, visual supports, augmentative communication, peer-mediators, etc.) that allow the child to apply their skills in group contexts. The literature suggests that offering "social supports" to students with ASD makes it easier for their strengths to be perceived by others, thus building their self-esteem and replacing perceptions of "deficit" with those of their potential. In this sense, the curriculum is inspired by the principles of **Person-Centred Planning** and Quality of Life, which guide actions towards improving the well-being of children with ASD, giving them an active role in achieving their personal goals. Thus, the paradigm of relationships and support is materialized: through affectionate bonds and individualized support, the integral development and inclusion of all children in the infant stage is promoted.

Activities:

Activity 3: Tailoring Lessons to Diverse Support Needs

1. Objectives

- **Understand** curriculum principles as applied to lesson planning.
- **Identify** different support needs (sensory, communicative, social, motor).
- **Collaborate** as a team to develop specific adaptations of the same children's activity.
- **Encourage** critical reflection on the effectiveness of such adjustments.

Duration: 60 minutes

Materials:

- Sample lesson plan
- Chart paper or digital collaboration tool
- Markers or sticky notes
- Handout on support needs categories

2. Development of the activity (60 min)

- Group formation (5 min):**
Divide the team into teams of 3–5 people.
- Brainstorming (15 min):**
Teams review the lesson and generate ideas to adapt the lesson:
 - Adjustments to the environment (lighting, furniture, visual signage).
 - Relational strategies (roles of fellow mediators, patterns of affective interaction).

- Support resources (pictograms, alternative communication systems, visual routines).
- c) **Design of the adaptation (20 min):**
On a sheet of paper are written:
- Specific objectives for each child.
 - Relational methodology (cooperative activities, interaction turns).
 - Detail of natural supports (classroom staff and classmates) and necessary materials.
- d) **Sharing and discussion (10 min):**
Each group presents its adaptation (5 min) and receives feedback from the rest (5 min), focusing on the intensity of each child's supports, the creativity and feasibility of the proposed adaptations.

2. Expected results

- All children actively participate from their strengths. They collaborate and respect the different forms of communication.
- Group cohesion is reinforced through positive affective relationships and an adapted environment.

References:

American Association on Intellectual and Developmental Disabilities. (2021). Intellectual disability: Definition, classification, and systems of supports (12th ed.). American Association on Intellectual and Developmental Disabilities.

American Psychiatric Association. (2022). Diagnostic and statistical manual of mental disorders (5th ed., text rev.; DSM-5-TR). American Psychiatric Publishing.

Bisquerra, R., & Pérez Escoda, N. (2012). Emotional competencies. *Education XX1*, 10(1).
<https://doi.org/10.5944/educxx1.1.10.297>

Gómez, L. E., Schalock, R. L., & Verdugo, M. Á. (2021). A new paradigm in the field of intellectual and developmental disabilities: Characteristics and evaluation. *Intellectual and Developmental Disabilities*, 59(5), 393–404. <https://doi.org/10.1352/1934-9556-59.5.393>

World Health Organization. (2019). International classification of diseases for mortality and morbidity statistics (11th ed.). <https://icd.who.int/>

Glossary of key terms:

- **Meaningful relationships:**
Affective and trusting bonds between children, families and professionals. They are the engine of child development, promoting emotional security, participation and learning in natural contexts.
- **Natural environments:**
Everyday environments of the child, such as the family, nursery school or park, in which he learns through spontaneous interactions. Early care interventions are designed to be carried out preferably in these settings.
- **Natural supports:**
Resources available in the child's immediate environment (family, educators, peers) that

facilitate participation and learning without requiring artificial or specialized adaptations. They are sustainable, meaningful, and based on real relationships.

- **Strengths:**
Individual abilities, abilities, interests, or talents that each child possesses. A strengths-based approach orients observation and planning toward what the child can do and enjoys, rather than focusing on their limitations.
- **Early social interaction:**
A set of behaviors and responses (verbal and nonverbal) that young children use to relate to others. It includes aspects such as eye contact, the use of gestures, shared play and emotional reciprocity.

Module 2:

Creating Inclusive and Supportive Preschool Environments

Preschool as the first learning environment

Preschool is often the first shared learning environment in a child's life, a space where they begin to explore independence, develop routines, and engage with peers in a structured setting. For children on the autism spectrum, the preschool environment can offer either a foundation for participation and growth, or, if poorly designed, a source of stress, confusion, and exclusion. Small changes in how the physical space is structured can make a profound difference in how children experience their day.

This module is built on the belief that the environment itself is a teaching tool, not a passive backdrop, but an active source of support. For many children with Autism Spectrum Disorder (ASD), clear routines, predictable spaces, and visual cues are not optional add-ons; they are essential supports that enable access to learning, reduce anxiety, and foster meaningful engagement.

Rather than proposing expensive renovations or specialist-only interventions, this module focuses on realistic, cost-effective adaptations that educators can implement using the materials, layouts, and resources they already have. Drawing on principles from inclusive design, sensory-aware pedagogy, and the TEACCH approach, the module offers both a conceptual foundation and a practical guide to transforming everyday environments into spaces where all children, including those with ASD, can thrive.

The content is grounded in real classroom experiences and designed to support reflection, not prescription. Whether you are teaching in a large preschool center or a small local setting, these strategies are adaptable to your context. As you explore each section, you are encouraged to view your environment with fresh eyes, not just asking, "What do we teach here?" but also, "What does the space itself teach?"

By the end of this module, you will be equipped with concrete strategies to observe, design, and refine your classroom environment in ways that promote inclusion, reduce stress, and increase opportunities for participation and learning. Most importantly, you will begin to see the environment not as something fixed, but as something flexible, a tool you can shape intentionally, in response to the diverse needs of the children you support.

Learning Outcomes:

Upon completion of this module, you will be able to:

1. **Understand** how the physical, sensory, and visual elements of a preschool environment **influence the behaviour**, participation, and emotional regulation of children with ASD.
2. **Apply core principles** of structured teaching and inclusive design to organize space in a way that supports predictability, independence, and safety.
3. **Identify effective strategies** to reduce sensory overload and offer children access to calming, comfortable, and clearly defined zones.
4. **Design and use visual supports**, such as schedules, labels, and routine cards, as proactive tools to guide participation and transitions.
5. **Create an environment that fosters inclusive participation**, enabling children with diverse communication styles, learning profiles, and sensory needs to access materials, activities, and social experiences.
6. **Observe how children interact with space** and make targeted adaptations based on patterns of engagement, withdrawal, or distress.

1. Structured Teaching and the TEACCH Approach

This module is informed by many elements of the **TEACCH approach** (Treatment and Education of Autistic and related Communication-handicapped Children), a well-established framework developed at the University of North Carolina to support individuals on the autism spectrum. A core element of TEACCH is Structured Teaching, which provides practical strategies for organizing physical space, tasks, time, and materials in ways that increase independence, reduce anxiety, and enhance participation. Structured Teaching is built on the understanding that many individuals with ASD benefit from environments that are:

- Visually organized and easy to navigate
- Predictable and consistent in layout and routines
- Designed to communicate expectations clearly through non-verbal means
- Supportive of independent work and transitions

In early childhood settings, these principles are expressed through **zoned classroom layouts, visual schedules, clearly labeled materials, and structured routines** that make use of both space and time. Instead of expecting children to conform to an unpredictable or overwhelming setting, TEACCH emphasizes adapting the environment to the child, a philosophy that aligns directly with inclusive practice.

Throughout this module, you will encounter TEACCH-informed strategies integrated into each section, from organizing classroom zones and creating visual sequences, to fostering autonomous participation and emotional regulation. You do not need to be formally trained in TEACCH to use these methods effectively, they are practical, adaptable tools that can benefit all children in inclusive preschool environments.

The TEACCH approach

The TEACCH approach promotes independence and participation by helping children make sense of their environment. In practice, Structured Teaching includes five key elements that can be easily adapted to preschool classrooms:

1. Physical Structure

Clearly defined zones (e.g., play, calm, snack) help children understand what happens where. Boundaries can be created with shelves, rugs, or floor markings.

2. Visual Schedules

Daily routines are displayed using symbols, photos, or drawings, helping children anticipate what will happen next and transition more easily.

3. Work Systems

Children are shown what to do, how much to do, when it is finished, and what comes next through visual task setups. Even simple “First–Then” boards are effective at this age.

4. Visual Structure of Materials

Tasks and play areas are organized with cues like labeled bins, color-coding, and matching symbols. This supports independent access and clean-up.

5. Predictable Routines

Routines follow a consistent structure that is supported visually. Repetition builds trust and reduces anxiety.

Structuring the Physical Environment

Why physical structure matters

Children with ASD often experience the world in ways that are different from their peers. Changes in routine, unpredictable spaces, and unstructured environments can lead to disorientation, distress, or withdrawal. For young children in particular, the design of the room itself becomes a silent teacher, it communicates what is expected, where things happen, and how to navigate the day.

A physically structured environment provides a sense of order, safety, and clarity. For children with ASD, it reduces cognitive load, supports independence, and helps them understand their surroundings without relying solely on verbal instructions. Rather than needing to ask where to go or what to do next, children can learn to “read the room.”

Important Note: Structuring the environment does not mean limiting freedom. Rather, it gives children the secure framework they need to explore, play, and participate meaningfully.

Core principles of environmental structuring

A thoughtfully structured classroom supports children with ASD by making the environment easier to understand and predict. These five core principles form the foundation for adapting preschool spaces to be more inclusive, not through expensive redesign, but through small, purposeful changes that shape a more accessible and calming daily experience.

A well-structured preschool classroom for children with ASD integrates the following principles:

1. **Zoning** – Divide the room into clearly defined areas (e.g., play, reading, art, quiet space).
2. **Predictability** – Use physical cues (furniture, visual signage, consistent layout) to communicate function.
3. **Visual clarity** – Reduce visual clutter and ensure objects are visible and logically placed.
4. **Accessible orientation** – Create pathways and transitions that make spatial navigation easy and safe.
5. **Embedded support** – Integrate visual aids and routine cues into the environment itself.

Zoning – Clear areas with defined purposes

Young children on the autism spectrum often find it easier to understand and engage with their environment when it is divided into recognizable “zones.” Each area should serve a single, consistent purpose: for example, a block area for construction, a cozy corner for resting, or a table for art activities. These zones help the child know what type of activity is expected in each part of the room, reducing uncertainty and the need for verbal instructions.

Zoning can be achieved with simple, cost-effective means:

- Using existing shelves or storage units as barriers
- Placing rugs or floor mats to signal distinct areas
- Choosing consistent visual markers for each zone

The key is consistency. Zones should stay in the same place each day and be introduced to children explicitly, so they learn to associate location with activity.



Image 1: Example of an autism-supportive classroom layout

This visual illustrates a preschool classroom structured to support children with ASD. Key features include clearly defined zones (e.g., play, work, quiet), visual schedules, and a calm retreat area with soft lighting. Such layouts promote independence, reduce anxiety, and help children navigate daily routines with confidence. Source: <https://leafwingcenter.org/strategies-for-autism-in-classroom/>

Predictability – Repetition builds trust

For many children with ASD, the predictability of their physical environment has a direct impact on their emotional regulation. When classrooms are organized in a consistent way, where materials “live” in the same places, where daily routines follow similar sequences, and where the layout doesn’t change suddenly, **children are better able to anticipate what will happen next.**

Predictability is not about rigidity but about giving structure that fosters confidence. Educators can support predictability by:

- Using furniture and layout to anchor routines (e.g., always gathering in the same carpet area for morning circle)
- Keeping core materials visible and within reach
- Avoiding sudden rearrangements of furniture or zones without preparation

This sense of “knowing what comes next” lowers anxiety and enables greater independence.

Visual clarity – What you see is what you understand

Many preschool classrooms are filled with visual stimuli: posters, artwork, supplies, toys. For some children, this may be exciting or engaging, but for children with ASD, it can easily become overwhelming. Visual clarity means reducing distractions and presenting information in a way that is easy to understand at a glance. This can include:

- Using pictograms or photos to label shelves and bins
- Keeping wall space mostly clear, reserving it for essential visual schedules or calming visuals
- Ensuring that key areas and tools (e.g., communication aids, headphones, timers) are clearly visible and not hidden away

When children can visually scan the environment and recognize where they are and what to do, their cognitive load decreases, freeing up more energy for learning and engagement.

Accessible orientation – Navigating space with ease

Children with ASD may have difficulties with spatial awareness or with changes in direction, transitions between activities, or moving through crowded areas. An accessible layout minimizes these challenges

by guiding children gently through space using cues from furniture placement, floor markings, and visual landmarks. For example:

- Arrange pathways that avoid bottlenecks or confusing cross-traffic
- Use arrows, footprints, or colored lines on the floor to guide transitions (e.g., to the toilet, to snack area)
- Consider the height and positioning of signs and visuals to match the child's perspective

Orientation is not only about physical movement. It's about **feeling confident** moving through one's environment. Small layout choices can help avoid meltdowns during transitions or make routines like clean-up more intuitive.

Embedded support – The room itself offers cues and guidance

An inclusive environment doesn't rely solely on adult instruction. Instead, it allows the physical setup of the room to prompt behaviour and support children's autonomy. This is especially powerful for children with ASD who may struggle with spoken language or rapidly changing instructions. For example:

- A "first-then" visual board placed near the door prepares a child for transition
- A clearly labelled shelf helps the child find or return toys independently
- A color-coded snack station signals steps like handwashing, eating, and cleaning up

When support strategies are embedded into the space itself, they become part of the child's everyday experience, increasing confidence, reducing dependence, and making participation easier.

Practical applications in the preschool context

Creating an ASD-supportive classroom is not about perfection or starting from scratch. It's about gradually shaping the space to help all children, especially those with sensory or communication needs, feel safe, seen, and supported. The core principles outlined earlier come to life through small decisions about layout, lighting, access, and materials.

Let's look at how these adaptations can work in practice.

Classroom scenario: From cluttered to structured

Before:

The classroom is open plan with no defined activity areas. Toys and materials are in open bins, wall space is filled with posters, and transitions between activities are signaled only verbally. A child with ASD becomes overwhelmed during free play and resists clean-up, often hiding or leaving the area.

After:

The room is divided into zones using low furniture and rugs. Each zone is labeled with simple symbols. A calm corner is created in a quiet area using a cushion and dim lighting. Toys are rotated and stored in labeled, closed bins. Transitions are supported with a Now-Next board near the carpet area. The same child now uses the calm corner when overwhelmed, checks the routine card before moving on, and participates more consistently in group play.

Cost-effective adaptations: Room-by-room checklist

Area	What to check or change	Ideas
Entry point	Is arrival calm and predictable?	Add a welcome mat, a symbol board, or seat
Play areas	Are zones clearly defined and uncluttered?	Rugs, shelf dividers, photo labels

Reading/quiet area	Is there a space to retreat from stimulation?	Tent, canopy, pillows, blackout fabric
Snack area	Are routines visible? Is seating predictable?	Picture cards for steps; floor markers
Toileting/transition	Are directions and steps clearly shown?	Visual sequence cards, footprints on floor
Wall space	Is visual noise minimized?	Keep 30–40% of wall space neutral
Storage	Is access intuitive? Is clutter hidden?	Covered boxes, consistent pictogram labels
Lighting & sound	Are harsh stimuli reduced?	Curtains, floor cushions, use of soft lamps

Reflection

Use these questions as a starting point for reviewing your own classroom:

- Are there areas of the room that consistently lead to distress, chaos, or conflict?
- Is it always clear to children what is expected in each part of the classroom?
- Which parts of the space allow children with ASD to feel independent? Which might be confusing or overstimulating?
- What small change could make the biggest difference right now?

Creating a Sensory-Responsive Setting

Understanding sensory processing in early childhood

For many children with Autism Spectrum Disorder (ASD), everyday sensory experiences can be confusing, overwhelming, or even painful. Sounds, lights, smells, and textures that neurotypical children may barely notice can lead to distress or sensory overload. At the same time, some children may seek intense sensory input, touching objects repeatedly, spinning, or making vocal sounds, to regulate themselves.

Sensory processing differences are not the same for every child. One child may avoid bright lights, another may crave deep pressure; one may cover their ears in noisy environments, another may seek loud sounds. Educators should not try to eliminate sensory behaviors but instead design spaces that acknowledge and respond to them in respectful, supportive ways.

Important Note: A child's sensory responses are not "misbehavior." **They are attempting to cope with how their brain is processing the environment.** The classroom should offer tools, choices, and spaces to support this process. not punish or suppress it.

Principles of a sensory-responsive environment

A sensory-responsive classroom is not a silent or sterile space, it is one that offers balance, choice, and the ability to adapt. In early childhood education, this means providing a foundation that supports attention, emotional regulation, and participation. The following principles are essential:

Reduce unnecessary sensory load

Classrooms are often busy places. While some stimulation is necessary for learning, too much input, especially from competing sources, can create stress. Reducing this "background noise" helps children focus on meaningful activities and cues. This includes:

- Using soft, natural or muted lighting instead of harsh fluorescent lights
- Minimizing overlapping sounds by placing noisy activities away from quiet zones
- Keeping displays and wall decorations purposeful and limited

Offer sensory-friendly materials and furnishings

Some materials are soothing; others can be overstimulating. Choosing materials thoughtfully helps all children, not just those with identified sensory needs, feel more at ease in the classroom. Suggestions include:

- Soft textures for rugs, cushions, or beanbags
- Weighted items (blankets, lap pads) for grounding and calming
- Natural materials such as wood, felt, or fabric rather than shiny plastic or metal
- Cushioned seating options for children who need movement (e.g., wobble stools or therapy cushions)

These elements can be introduced gradually, depending on what the child responds to.

Create a safe and calming retreat space

Even in the most inclusive and well-structured environments, some children will need time away. A calm space, sometimes called a “cozy corner,” “safe space,” or “quiet zone”, is a designated area where children can go voluntarily to regulate emotions or take a sensory break. Key features:

- Soft furnishings (pillows, blanket, stuffed toy)
- Low light or dimmable lighting
- A small collection of calming tools (e.g., fidgets, visual timers, soft music via headphones)
- A clear rule that the space is never used as a punishment and that the child may choose how long to stay

The goal is not isolation, but **comfort and re-entry into the learning environment** when ready.

Provide options for sensory input

While some children need less stimulation, others need more. A sensory-responsive classroom offers opportunities to seek out sensory experiences in ways that are safe, purposeful, and non-disruptive. Examples include:

- A tactile table with sand, rice, or water beads
- Movement areas with crash mats or balance paths
- Visual stimulation through spinning tops, bubble lamps, or glitter jars
- Access to headphones or ear defenders for auditory filtering

The classroom should offer a menu of sensory support. These can rotate or be personalized depending on individual needs.

Observe and adapt continually

There is no one-size-fits-all solution. The effectiveness of a sensory strategy depends on the child, the activity, and the context. What calms one child may agitate another. Therefore, ongoing observation is essential. Teachers should watch for signs of sensory discomfort:

- Covering ears or eyes
- Avoiding certain areas
- Meltdowns during transitions or group time

They should also watch for positive responses:

- Choosing a calm space independently
- Engaging more fully in a preferred sensory activity
- Using tools (e.g., headphones, fidgets) appropriately

These observations can guide small adjustments in layout, materials, or routines.



Figure 2: Structured Teaching in Practice – TEACCH-Inspired Classroom Supports

This photo summarizes five core components of the Structured Teaching model from the TEACCH approach: physical structure, visual schedules, work systems, visual organization of materials, and predictable routines. These elements help create environments where children with ASD can understand expectations, navigate tasks independently, and engage more meaningfully in everyday preschool activities. Source: <https://problembasedlearningmtsu.weebly.com/classroom-design.html>

Sensory adaptations: What you can do today

Need or trigger	Classroom adaptation
Bright light sensitivity	Use curtains, lamp lighting, or dimmable LED bulbs
Auditory overload	Add soft surfaces (rugs, curtains), provide headphones
Need for deep pressure	Introduce a weighted blanket, compression vest, or lap pad
Tactile exploration	Offer sensory bins with safe textures (rice, fabric scraps)
Escalation in group settings	Provide a quiet retreat space in a consistent location
Fidgeting or restlessness	Use wobble seats, move-and-sit cushions, or hand fidgets

Reflection

Use these questions as a starting point for reviewing your own classroom:

- Which sensory factors in your classroom might be helping or hindering participation?
- Do children have a space to “breathe” when the classroom becomes overwhelming?
- Can every child choose whether to seek or avoid sensory input in at least one part of the day?

Embedding Visual and Predictable Structures

Making the day visible, manageable, and reassuring

For children with ASD, unpredictability can be a major source of stress. Not knowing what will happen next, what is expected, or how long something will last can lead to anxiety, dysregulation, or

withdrawal. This is especially true in preschool environments, where routines shift frequently and much information is communicated verbally, a mode that may not be accessible to every child.

Visual and predictable structures support children in navigating time, routines, and tasks independently. These tools reduce dependence on verbal instructions, clarify expectations, and empower children to engage in the classroom on their own terms.

Important Note: Visual supports are not a compensatory strategy used only when “something goes wrong.” When embedded into the environment from the start, they form the foundation for inclusive practice and foster autonomy for all learners.

Making time and routine visible

Young children, especially those with ASD, benefit greatly from being able to see what’s happening and what comes next. A predictable daily structure builds trust and reduces anxiety by helping children anticipate changes and transitions. Ways to make time visible include:

- Linear daily schedules, where icons or photos represent each main part of the day (e.g., arrival, playtime, snack, circle time, outside, lunch). These are typically mounted on a wall in the same place every day.
- First–Then or Now–Next–Later boards, which focus on shorter, immediate sequences and can be portable or personalized.
- Individual schedule strips, where children move icons or cards from “To Do” to “Done,” reinforcing a sense of progress and closure.

These tools are not static decorations, **they are meant to be used interactively:** pointed to, moved, reviewed together. Children should be encouraged to consult the schedule independently, and educators should model their use consistently.

Clarifying routines and task sequences

Many everyday preschool routines, putting on a coat, washing hands, getting ready for lunch, involve multiple steps that may not be obvious to a child with ASD. When such routines are unclear, children may appear disobedient, disengaged, or dependent, when in reality they are unsure what to do next. Visual task sequences break down routines into concrete, sequential steps:

- Handwashing routine: Images showing water on, soap, scrub, rinse, dry.
- Snack preparation: Picture cards showing each step, pick plate, choose food, sit at table, eat, clean up.
- Toileting sequence: Discreet visuals (or photo icons) showing each stage of the routine, placed near the toilet.

These visuals can be printed and laminated, stuck to mirrors, placed inside cubbies, or attached with Velcro near relevant activity zones. They reduce cognitive load and support executive functioning.

Labeling spaces and materials for independence

When materials are visible, labeled, and logically arranged, children can engage in activities and complete clean-up with minimal adult guidance. This boosts confidence, reinforces routine, and fosters ownership of the learning space. Effective labeling includes:

- Pictorial labels on shelves, bins, and drawers, ideally with both a symbol/photo and printed word.
- Matching labels on both the storage container and the shelf, so children learn to “match” items and return them correctly.
- Color-coding (e.g., all puzzle boxes in blue bins, all sensory toys in green) to support sorting and memory.

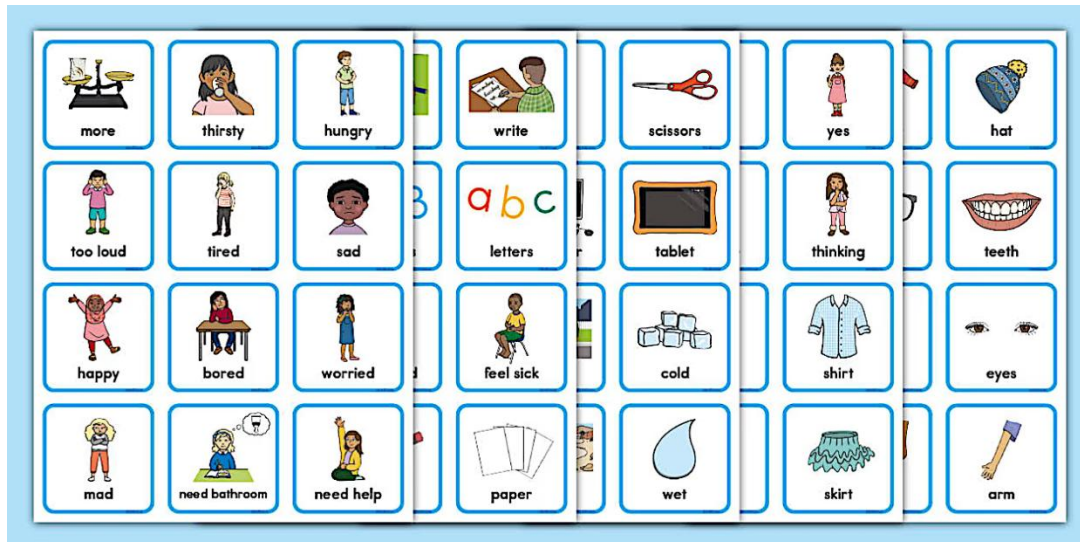


Image 3: Nonverbal Communication Cards and Labels

Labels should be positioned at the child's eye level and remain consistent over time. Involving children in creating labels (e.g., photographing each toy, placing the symbol) can enhance their understanding and ownership. **Labelling is not just an organizational strategy; it is a visual language system that supports autonomy.**

Supporting transitions and expectations with visual logic

Transitions are particularly difficult for many children with ASD. These moments require children to stop one activity, shift their attention, and begin another, often with little visual cue for what's coming. Visual tools such as "first-then" structures and countdown systems can help soften these shifts. Examples:

- First-Then cards: "First clean up, then story time" (with matching symbols). These cards can be fixed to a small board or held on a ring.
- Countdown strips: Velcro symbols or dots that are removed as time passes (e.g., "5 minutes left – 4 – 3 – 2 – 1 – Done").
- Transition choice boards: Offer limited, structured choices for the next step ("Would you like to go to the book area or the block area?"), supported by visuals.

These systems are most effective when they are simple, consistent, and physically present in the classroom, not stored away or used only for "problem behaviours."

Embedding supports into the learning space

A core principle of inclusive design is that supports should not live on clipboards or inside adult hands, they should be integrated into the learning environment itself. This means visual aids are:

- Mounted on walls, cubbies, or shelves where they are needed
- Designed to be child-accessible, low, tactile, and portable
- Normalized as part of classroom culture, not singled out for specific children

For instance, all children may use the visual schedule in the morning circle, or all may refer to clean-up cards before tidying their materials. This reduces stigma, builds classroom coherence, and reinforces shared routines. When supports are embedded, children do not need to ask "What now?", **the room answers the question.**

Practical adaptations and tools

Goal	Visual Support Strategy
Anticipate daily activities	Wall-mounted linear visual schedule
Follow routines independently	Step-by-step sequences posted near sinks, snack tables, etc.
Transition between tasks smoothly	Now–Next or First–Then boards
Engage in activities autonomously	Labeled bins and matching shelf icons
Reduce verbal dependency	Icons and routine visuals used proactively throughout the day

Most materials can be made with:

- Laminated printed symbols or photos (e.g., ARASAAC, Picto-Selector)
- Velcro, magnets, or sticky tack for flexible use
- Ring binders, folders, or foam board for portable versions

Reflection

- Where in your classroom do children most often appear confused or disengaged? Could visual cues help clarify expectations?
- Do your current visual supports support independence , or are they mostly reminders used in moments of dysregulation?
- What would it look like if your room itself acted as a communication tool?

Designing for Inclusive Participation

Inclusion starts with access and continues with agency

Inclusive education is not simply about placing children with diverse abilities in the same room. It is about creating the conditions where all children can actively participate, connect, and learn , each in their own way. For young children on the autism spectrum, this means having access to an environment that recognizes their strengths, removes barriers, and offers genuine opportunities for engagement. Participation involves more than presence. It includes being able to:

- Choose how and when to engage
- Understand and navigate materials and routines
- Form relationships with peers
- Contribute meaningfully to classroom life

When thoughtfully designed, the learning environment becomes an enabler of inclusion , not just a backdrop.

Important Note: Participation for children with ASD may not always look like speaking in group discussions or playing in large groups. Inclusion values a wide range of interactions, including observation, parallel play, visual communication, and flexible routines.

Ensuring physical accessibility for all children

Classroom layout directly affects who can participate. Some children on the autism spectrum may experience challenges with motor coordination, spatial orientation, or fine motor skills. Others may need extra time or prefer to avoid crowded areas. To support full participation, classrooms should:

- Provide clear paths between zones, free of obstacles and visual clutter.
- Use low, open shelves so materials are visible and within reach.
- Ensure that learning materials are easy to grasp, open, and manipulate.
- Offer adjustable workspaces, including floor seating, child-sized tables, beanbags, or sensory-friendly alternatives to chairs.

For example, a child who avoids the art area due to bright lighting and tightly packed seating might re-engage if that zone includes a dim corner space, separate materials tray, and a flexible seating option such as a kneeling mat or stool.

Designing the environment to support social interaction

Children with ASD often face barriers to peer interaction, not due to lack of interest, but because of communication differences, sensory sensitivities, or difficulties reading social cues. The classroom can help reduce this pressure and offer entry points into shared experiences. Strategies to encourage social participation include:

- Creating small-group zones (e.g., a table for two) to make interaction more manageable.
- Using visual supports to structure peer routines, such as play scripts, shared storyboards, or communication cards (“Want to play?” / “Can I have a turn?”).
- Including shared-interest stations (e.g., trains, sensory bins, animal figurines) that encourage parallel play or side-by-side engagement.
- Designing quiet conversation corners where children can engage one-on-one without the distractions of the larger group.

In these spaces, educators can act as facilitators, modelling turn-taking, interpreting gestures, and gently guiding interaction without taking control. Inclusive participation does not require verbal speech; it requires a structure that makes interaction possible and comfortable.

Providing multiple ways to engage with materials and routines

Rigid expectations about how a child should participate, whether in a circle time song or a sorting task, can unintentionally exclude those who communicate, move, or think differently. Inclusive classrooms offer multiple modes of access, allowing children to show their understanding and creativity in diverse ways. To do this, educators can:

- Provide visual alternatives to oral instructions (e.g., song cards, gesture prompts, or symbolic choice boards).
- Allow movement-based engagement (e.g., a child stands or sways during story time, uses a sensory fidget while listening).
- Accept different forms of expression (e.g., pointing to pictures, miming an action, arranging images) rather than relying only on speech.
- Build flexibility into routines, such as offering a short break before group work or letting a child rejoin when ready.

For instance, during a group activity where children sort animal cards by habitat, one child might verbally name each animal, another might point to matching bins, and another might use a color code or symbol chart to participate nonverbally. All three are equally valid participants.

Embedding roles, rituals, and shared responsibilities

Feeling included often begins with feeling needed. Giving children meaningful roles in classroom life, and displaying those roles visually, promotes belonging, responsibility, and pride. Roles also structure participation for children who may otherwise remain on the margins. Ways to promote shared roles:

- Use a visual job board with rotating classroom roles (e.g., calendar helper, line leader, plant caretaker) and photos or icons.
- Offer predictable, simple roles for children who thrive on routine (e.g., always distributing napkins or turning off the light).
- Recognize nontraditional contributions, such as comforting a peer, independently using a visual aid, or helping clean a sensory bin.

These tasks can be reinforced through classroom rituals, for example, ending the day with a short circle where children share something they enjoyed, or showing appreciation for each other's help.

Reducing barriers, not expectations

An inclusive classroom maintains high expectations for participation, but works to remove the barriers that make participation difficult. Children with ASD can and do participate meaningfully when the structure of activities allows it. When exclusion happens, it's often the result of an inflexible system, not an unwilling child. Educators should reflect on:

- Task design: Are the steps too complex? Can the activity be broken down?
- Access options: Are there multiple entry points for participation?
- Social pressure: Is the child being asked to engage in a way that causes discomfort?
- Physical layout: Does the room allow for quiet re-engagement after a break?

By adjusting the task, educators make participation possible without lowering standards. For example, a child might use a choice board instead of speaking during morning greetings, or complete fewer but more focused steps in an art project.

Inclusion in action

Barrier	Environmental Support
Difficulty joining play	Shared-interest zones with clear visual choices
Avoids busy group activities	Parallel activity station or small-group corner
Nonverbal communication	Core vocabulary boards or picture-based "I want..." cards
Trouble following routines	Now-Next boards, visual timetables, or step-by-step sequences
Anxiety around participation	Defined quiet space + visual re-entry strategies (e.g., "Ready to Join" card)

Reflection

- Are there participation patterns in your classroom that suggest exclusion (e.g., always the same children leading or speaking)?
- Which activities offer natural points of access for children with varied communication and learning styles?
- Are your classroom roles and rituals visible and inclusive of all children?

2. Bringing It All Together: Reflecting on Your Environment

Throughout this module, we have examined the many ways in which the physical environment can either support or hinder the participation, regulation, and well-being of young children with Autism Spectrum Disorder (ASD). From room layout and sensory comfort to visual structure and inclusive routines, each section has shown how the classroom itself can become an active support for learning and inclusion, if designed with intention.

As educators, we often focus on how children behave in the space, how they interact with others, and how they respond to daily routines. But how often do we step back and look at the space itself as a source of influence, or as a silent partner in our teaching? The physical environment is never neutral. It sends signals, shapes behavior, and communicates expectations long before we speak a word. A poorly structured room can confuse or overwhelm; a well-considered one can calm, guide, and empower.

Now that you've explored different design principles and strategies, it's time to shift into reflection. This section is not about offering new tools or theories. Rather, it invites you to pause, observe, and synthesize what you've learned so far. The goal is not to make dramatic or sweeping changes, but to begin noticing, carefully and compassionately, what in your current space is already working, and where small, meaningful adjustments might open up new possibilities for your children.

A good place to start is by walking through your room slowly, ideally at a time when children are present and engaged in their usual routines. Pay attention to where children gather and where they hesitate, which zones foster connection and which ones lead to overstimulation. Ask yourself whether the materials are truly accessible, not just physically, but cognitively and emotionally. Are the expectations of each space clear? Can children transition independently from one area to the next, or do they rely on adult prompts and correction? Is the room offering enough cues and comfort to meet the needs of all learners, or are some children unintentionally excluded by the way the space is set up?

It may help to view the room from a child's perspective, literally and figuratively. Sit or kneel at child height. Look around. What is visible? What is confusing? What might be too loud, too bright, too stimulating, or simply too difficult to reach or understand? This embodied reflection often reveals elements that go unnoticed during the busyness of the day.

Of course, observation is not limited to individuals. Reflection becomes more powerful when shared. Consider setting aside time with your team to discuss how the room is functioning. What patterns do you see in children's use of space? Are there routines or areas that consistently cause tension or disengagement? What has changed over time? These shared insights can guide more targeted decisions and avoid unnecessary trial and error.

At the same time, it's important to remember that consistency matters. For many children with ASD, sudden or frequent changes to the classroom can be disorienting. Adaptation should be gradual and transparent. If you decide to move a calm corner, adjust lighting, or reorganize activity zones, communicate these changes to children in advance, using visuals, stories, or shared walkthroughs, so they feel included and prepared. After making a change, observe how it affects engagement, behavior, and overall classroom dynamics. What improves? What remains challenging? Responsive practice is a process, not a product.

To support this process, you will find in the annex a simple self-reflection tool: the Classroom Environment Reflection Sheet. This tool is designed to help you assess your environment through the lens of the five themes presented in this module, structure, sensory support, visual cues, participation, and adaptability. It offers guiding questions and space to note observations, strengths, and areas to revisit. Whether you complete it individually or as a team, the aim is to support thoughtful, evidence-informed adjustments that make your classroom more inclusive, not more complex.

In the end, the most inclusive spaces are not the most expensive or innovative ones. They are the spaces where educators reflect regularly, adapt thoughtfully, and design with children, not just for them, in mind. By making time to observe and reflect, you are already taking a meaningful step toward creating an environment where every child can feel safe, competent, and truly included.

Module 3:

Strategies for Communication and Social Interaction

The development of communication and social interaction is a fundamental axis in the early care of children with Autism Spectrum Disorder (ASD). This module provides inclusive, person-centered strategies that promote caring and accessible environments to enhance participation and understanding of the environment. Common communication differences in ASD are addressed, such as literal use of language, difficulties following implicit social norms, and preference for visual supports. The pedagogical proposals include the use of gestures, pictograms, visual routines and cooperative play, allowing the educator to adapt his or her intervention to individual needs.

Learning Outcomes:

By the end of this module, you will be able to:

1. Recognize communication differences in children with ASD. Understand verbal and non-verbal particularities and diverse communication styles in the early childhood classroom.
2. Apply visual and gestural supports. Use visual strategies such as agendas, pictograms and sign language to facilitate understanding, anticipation and expression of needs.
3. Design inclusive social interaction activities. Create cooperative games, social stories, and structured environments that promote the participation of all children, including those with ASD.
4. Foster affectionate and predictable environments. Establish clear routines and safe spaces that reinforce communication and social integration for preschool children.

1.Support for Communication in the Classroom

Early intervention acknowledges that the development of communication and social interaction is fundamental in early childhood. Recent studies indicate that addressing these aspects at an early age significantly improves the outcomes for children with Autism Spectrum Disorder (ASD). Within this framework, a **relational and person-centered support paradigm** is adopted: individual communicative diversity is valued, reinforcing accessible, affective, and responsive environments for each child. This curriculum proposes strategies grounded in an understanding of the communicative characteristics of Autism Spectrum Disorder (ASD) and the functional use of visual and gestural supports as facilitators of communicative development.

Understanding Communication Differences in Children with ASD

ASD involves **qualitative and persistent differences** in reciprocal social interaction and social communication. In practical terms, many children with ASD experience difficulties initiating or maintaining dialogue, sharing interests, or following the “tacit rules” of conversation. Other common traits include a very literal use of language (challenges with metaphors, sarcasm, intonation) and atypical language usage (repetition of phrases or unexpected responses). Generally, they may exhibit limited eye contact, unusual or minimal gestures, and a marked attachment to predictable routines.

Key traits include:

- **Communicative heterogeneity:** Ranges from nonverbal children (who rely mainly on gestures, facial expressions, or alternative systems) to verbal children with extensive but socially ineffective verbal skills.

- **Pragmatic difficulties:** Literal interpretation of language (struggles with double meanings or jokes) and limited reciprocity (interrupting or responding out of context).
- **Reduced social interaction:** Limited eye gaze and turn-taking; may not point to share attention or show interest.
- **Atypical nonverbal communication:** Unconventional gestures (e.g., hand-flapping) or absence of intentional gestures; rigid facial expressions and postures.
- **Preference for visual and structured environments:** They generally learn better with clear visual supports; graphic aids are very helpful in understanding their environment.

Educators must approach these differences with an empathetic and inclusive mindset. Instead of viewing these characteristics as “deficits,” **neurodiversity is embraced**, valuing each child’s unique abilities. The goal is to establish affective, trusting relationships and adapt to each child’s communicative style. For example, educators are encouraged to **model and respond** to the child’s signals: imitate their gestures, clearly applaud or wave, and respond positively when the child points or looks at an object of interest. This approach reinforces nonverbal communication as a foundation for language. Ultimately, intervention must be **individualized**, with curricula tailored to each child’s needs and pace, actively involving families to maximize the child’s adaptation and integration into their environment.

Use of Visual Elements and Gestures

Visual supports are essential in inclusive early childhood education. Most children with ASD are visual learners: they process information presented in images more effectively than spoken language. Unlike spoken words (which are ephemeral), graphic information remains visible, reducing cognitive load and anxiety in the face of change. Research indicates that visual aids enhance the child’s ability to understand their environment and communicate; they provide autonomy to plan the day, make choices, and express basic needs. (See Annex: Visual agenda and Pictograms of daily routines for printable templates)

In daily practice, the following visual and gestural supports are recommended:

- **Visual schedules and agendas:** Organize routines through calendars or sequences of pictograms representing each daily activity. For instance, a board with images such as “breakfast – getting dressed – going to school – playtime” improves task anticipation. This explicit support (depicting places, times, and activities) helps the child understand and follow the sequence of the day, reducing distress from unexpected transitions.
- **Pictograms and communication boards:** Use static images the child can point to in order to express needs (e.g., drink, play, pain). A **Picture Exchange Communication System (PECS)** allows the child to point to or exchange pictograms with the educator to convey basic desires. Simple visual representations (photos, drawings) are also useful for labeling the environment

(bathroom, classroom, cafeteria), making it more understandable and predictable.



- **Illustrated books and referential objects:** Use picture books and real objects to connect language with tangible references. Pointing out and naming parts of a story or everyday life consistently enriches the child's vocabulary.
- **Structured and predictable environment:** Maintain stable visual routines (e.g., display a pictogram for “story time” in a visible location) and warn of changes in advance (e.g., place a “finished” sign or cross out images on the schedule). This helps the child know what to expect at each moment. These supports should be used **consistently**, not only during crises, to avoid overdependence on verbal instructions and foster independence.
- **Gestures and gestural communication:** Teach and reinforce simple gestures (e.g., pointing to request something, clapping to affirm or say “yes,” shaking head for “no”) as effective

nonverbal communication. Educators should **model** each gesture and initially provide physical assistance (e.g., gently guiding the child's hand) until the child can do it independently. Similarly, the use of **basic sign language adapted to the context** (e.g., signs for food, toilet, "hello," "goodbye") can complement verbal communication. These augmentative systems (basic sign language, exchangeable pictograms, or voice-output devices) are used **in conjunction** with speech to reinforce messages and **do not hinder oral language development**; on the contrary, they support the development of linguistic skills.

- **Joint attention reinforcement:** Before presenting any visual support, the child's attention should be secured (e.g., through eye contact or gentle pointing). When showing a pictogram or object, accompany it with amplified gestures (e.g., pointing at the image, holding gaze) and clear words. Then pause briefly to allow the child to respond. This gradually teaches the meaning of each symbol, reinforcing the connection between word, image, and real object.

In all these strategies, the **educational tone must be affectionate and consistent**. Environmental distractions should be minimized, speech should be short and literal, and the child should be encouraged to participate (e.g., by leaving pauses for them to complete phrases using pictograms). Moreover, **collaboration with families is essential**, ensuring that similar guidelines are applied at home and at school. By following these inclusive and relational recommendations, educators can foster accessible environments where each child is understood in their unique communicative style and can reach their full communicative potential.

Activities

Task: Practicing Sign-Based Instructions

Objective:

Promote the use of functional signs and gestures to support communication in children with or without verbal language, from an inclusive and affective approach.

Annex: "Practicing Sign-Based Instructions" activity materials."

Duration:

15-20 minutes (can be repeated daily at different times of the routine)

Materials:

- Illustrated cards with basic gestures (pointing, greeting, asking, denying, affirming, handing over).
- Visual checklist for the teacher with the gestures to be modelled

Development of the activity:

1. Presentation of the gesture: The teacher introduces a specific gesture (for example, 'greet' by waving the hand) and models it in front of the group while naming it clearly. This can be supported by a picture or pictogram of the gesture.
2. Group imitation: All children imitate the gesture together, promoting playful participation without pressure.
3. Practice in routine: During everyday activities (entering the classroom, breakfast, picking up toys), the teacher uses only the gesture to give instructions or communicate ('sit down', 'thank you', 'no', etc.) and reinforces any attempt to respond with a smile, applause or positive word.

4. Paired or small group play: In a play corner, children choose a card with a gesture and act it out while peers guess its meaning or perform the associated action (e.g. 'hand over an object').
5. Individual adaptations: For children with greater communication difficulties, the teacher can physically guide their hands at the beginning and celebrate each small progress.

Observations:

This activity can be integrated into different routines of the day (assembly, farewell, transitions) and adapted to the level of the group. Through repetition and play, non-verbal communication, understanding of instructions and the inclusion of all communication styles are strengthened.

Task: My day in pictures

Objective:

To facilitate understanding of daily routines and encourage autonomy through the use of visual aids accessible to all children, especially those with communication needs.

Duration:

20-25 minutes for presentation and continued use throughout the day.

Materials:

- Pictograms or real pictures (breakfast, playing, toileting, picking up, going out).
- Cardboard, Velcro or magnets, adhesive tape.
- Panel or cardboard as a visual support in the classroom.

Development of the activity:

1. Initial preparation (teacher): Before the activity, the teacher chooses 4-6 key moments of the day (e.g. welcome, free play, snack, toilet, farewell) and prepares pictures or pictograms to represent them.
2. Presentation to the group: The teacher shows the 'day in pictures' panel and pastes or points to each picture according to the order of the routine. Each step is verbalised: 'First we play, then we have lunch...'.
3. Children's participation: During the day, children are invited to place or move the pictures according to what they are doing. Example: after having a snack, the child removes the 'breakfast' picture and places the next one.
4. Creation of individual mini-kits (in small groups): In a workshop moment, each child creates their own 'visual kit' with 3 images of activities they do every day. They can stick these images on a small poster board to take home.
5. Ongoing functional use: Pictograms are encouraged to be used to ask for things, anticipate changes or express preferences ('I want water', 'I want to play'). The panel can include additional pictograms for basic needs.

Observations and adaptations:

- The teacher can adapt the visual vocabulary to the level and culture of the group. It is recommended to repeat and reinforce the images daily so that the children integrate them as a means of communication.
- Families can be involved by sending a reduced copy of the panel home.

Task: Guess the Action

Objective:

To favour the understanding of routines through the recognition and use of visual aids, promoting anticipation and autonomy in young children.

Duration:

30 minutes (can be divided into shorter sessions or repeated weekly).

Materials:

- Cards with real pictures, pictograms or simple drawings representing daily actions: washing hands, eating, picking up, playing, going to the toilet, going home.
- Cards with words or short phrases describing each action (optional depending on the level).
- Velcro or magnets to stick on a board or panel.

Development of the activity:

1. Group start: The teacher shows a picture (e.g. a pictogram of a child washing his or her hands) and asks the group: "What are we doing here? Participation and verbalisation (or gestures) are encouraged.
2. Matching game: In small groups or individually, children are given a set of pictures and a set of cards with written actions or another picture. They have to match each picture with its corresponding action.
3. Participatory routine board: The teacher puts together a board with pictures in an unorganised order and asks the children to organise it according to the actual course of the day (e.g. first breakfast, then play, then toilet...).
4. Active role play: A card is chosen at random and the child or group acts out the action with gestures or role play. The rest of the group guesses which image it corresponds to. The link between image, action and language is reinforced.
5. Closing and reinforcement: At the end of the day, some images are reviewed by placing them on the 'finished day' panel and talking about what they did, thus integrating visual language and narration.

Adaptations and suggestions:

- The images can be personalised with real photos of the children performing the actions.
- For non-verbal children, only gesture or pointing to the pictures can be used in response.
- This activity can become a weekly routine for anticipation and review.

2. Promoting Social Interaction

In early childhood (ages 0 to 6), social development is considered a foundational pillar within the paradigm of relationships and support. The literature notes that from a very early age, children with Autism Spectrum Disorder (ASD) exhibit both **communication challenges—verbal and non-verbal—and difficulties engaging in social interaction**. Characteristics such as limited eye contact, highly restrictive play patterns, or narrowly focused interests directly hinder interactions with peers.

Challenges in Peer Interaction in ASD

Children with autism typically demonstrate an atypical social profile that complicates everyday interactions. For instance, they may be **unable to initiate or maintain a conversation**, or do so only to make a request. They may also **struggle to express emotions or feelings** and refrain from pointing at objects to share their interests. It is common to observe them playing alone or absorbed in their own

world, with minimal interaction with other children. Additionally, they often show **difficulty recognizing non-verbal cues**, such as facial expressions or body language. These traits can cause the child with ASD to appear distant or disconnected from the group.

As Angel Rivière (1996) pointed out, the **inability to understand others' emotions** is frequently evident in these cases. However, such social isolation does **not indicate a lack of desire for connection**—many individuals with ASD do want to connect socially, but may do so in different ways.

In the preschool classroom, these challenges often manifest as an absence of spontaneous imitation games or difficulty sharing turns and materials. Every child with ASD has a **unique communicative style and pace of socialization**, making it essential to recognize this diversity of styles from the first educational encounter. The goal is to understand the child beyond apparent limitations and to view each interaction as a learning opportunity, as **relationships directly impact the child's overall development**.

Strategies for Fostering Social Inclusion

Within the relational paradigm, educators are responsible for designing safe and predictable environments that foster participation for all children. This includes implementing **clear routines**, **visual supports** (pictograms, visual agendas), and **calm areas** that help children anticipate activities and manage emotions more effectively.

Educators are encouraged to **integrate the child's personal interests** into play activities with peers. Structured play activities supported by an adult provide a **"common platform"** where children with ASD can engage in social experiences that may be difficult to access independently. It is important that these games allow for **varied levels of participation** and do not penalize mistakes, ensuring all children feel included and learn to value group diversity.

Another key strategy is **educational community awareness**. Training teaching staff and educating children about ASD helps promote an empathetic and respectful climate. In practice, **cooperative learning** is encouraged in small groups, where each student contributes according to their strengths. Assigning shared tasks helps children **develop social skills and share learning experiences**. Additionally, group activities that reinforce **empathy and solidarity** help peers recognize and appreciate individual differences.

Personalized supports focused on relationships and communication are also incorporated. Early intervention programs (such as the Denver Model) involve parents and educators in **adapted play sessions** that improve social reciprocity. Alternative communication systems (sign language, pictograms, digital communicators) are used with the awareness that **each child has their own style**. As the literature emphasizes, **"recognizing these diverse communicative styles is essential to forming meaningful connections."**

Positive reinforcement of social progress is also vital—**celebrating each small successful interaction** strengthens the child's self-esteem and fosters peer trust. In summary, these relational supports in early childhood **enhance comprehensive development and, as studies conclude, "promote their social inclusion."**

Activities

Task: Cooperative Play Activities

Objective:

To design and analyze cooperative play proposals adapted to early childhood, with particular attention to children with diverse communicative styles.

Duration: 30–40 minutes

Activity Description:

Participants will be organized into small groups to plan a cooperative play scenario that promotes social interaction, mutual respect, and equitable participation. Contexts may include turn-taking games, collaborative constructions, motor circuits, or symbolic games with simple roles.

Each group must consider the inclusion needs of a child with communication or interaction difficulties, incorporating visual supports, turn anticipation, affective accompaniment, or flexible rules. Later, the proposal will be shared with the full group, evaluating its inclusive potential and consistency with the relational support paradigm.

This activity invites educators to reflect on how **cooperative play can be transformed into a space of encounter, affection, and shared learning**, where all children—regardless of their abilities—can interact, express themselves, and build meaningful connections.

Task: Interaction Facilitators in Play

Objective:

To learn how to design concrete proposals that serve as facilitators of social interaction among young children, considering the various communicative styles present in early childhood, particularly in children with autism or other developmental conditions.

Duration: 30–40 minutes

Activity Description:

Each educator will select a type of play (sensory, symbolic, motor, or construction) and design a brief scenario in which a **clear opportunity for interaction** arises between two or more children. The scenario should include: the primary social intention (e.g., initiating contact, taking turns, collaborating), the materials acting as **“relational bridges”** (e.g., a surprise box or a shared shape-sorting toy), and the adult's actions to accompany, model, or enhance the interaction.

This activity encourages reflection on how educators can intentionally create **micro-scenarios for social connection**, where children learn to observe, wait, invite, or respond. Consistent with the relational and support paradigm, the focus is not on teaching isolated skills but on facilitating **real-life contexts where bonding and communication emerge meaningfully**.

Task: Creating Social Story Scripts

Objective:

To acquire tools for creating social stories as a strategy to support the understanding of social situations, basic coexistence norms, and emotional skills in early childhood, especially for children with communication difficulties or autism.

Duration: 30–40 minutes

Activity Description:

Each participant will individually write a short script for a **social story** adapted to a common situation

in the educational environment (e.g., waiting one's turn, greeting upon arrival, tidying up toys, participating in circle time, or asking for help). The script should be structured using **simple and positive sentences**, accompanied by suggested visual supports (images, pictograms, or illustrations), and tailored to the children's level of comprehension.

This activity encourages educators to reflect on the **importance of anticipating and explaining social situations from a compassionate, affective, and personalized approach**. Well-designed social stories enable children to understand the context in which they find themselves, reduce anxiety about the unexpected, and increase their active participation. This practice strengthens the educator's competence in creating **sensitive, accessible learning environments centered on the quality of everyday relationships**.

References

Pope, L., Light, J., & Laubscher, E. (2024). The effect of naturalistic developmental behavioral interventions and aided AAC on the language development of children on the autism spectrum with minimal speech: A systematic review and meta-analysis. *Journal of Autism and Developmental Disorders*, 55(9), 3078–3099. <https://doi.org/10.1007/s10803-024-06382-7>

Watkins, L., Ledbetter-Cho, K., O'Reilly, M., Barnard-Brak, L., & Garcia-Grau, P. (2019). Interventions for students with autism in inclusive settings: A best-evidence synthesis and meta-analysis. *Psychological Bulletin*, 145(5), 490–507. <https://doi.org/10.1037/bul0000190>

Yi, J., Kim, W., & Lee, J. (2022). Effectiveness of the SCERTS model-based interventions for autistic children: A systematic review. *Journal of Speech, Language, and Hearing Research*, 65(7), 2662–2676. https://doi.org/10.1044/2022_JSLHR-21-00518

Yu, Y., Ozonoff, S., & Miller, M. (2024). Assessment of autism spectrum disorder. *Assessment*, 31(1), 24–41. <https://doi.org/10.1177/10731911231173089>

Glossary of terms

- **ASD (Autism Spectrum Disorder):** A neurodevelopmental condition characterised by difficulties in communication and social interaction, and repetitive patterns of behaviour.
- **Visual supports:** Graphic tools such as pictograms or diaries that help to anticipate, structure and understand the environment.
- **Social stories:** Simple narratives with pictures designed to explain social situations and foster adaptive skills.
- **Pragmatic language:** Functional use of language in social contexts, often affected in children with ASD.
- **Neurodiversity:** An approach that recognises and values neurological diversity as a natural part of the human condition.

Module 4:

Positive Behaviour Support and Classroom Management

This module prepares early childhood professionals for effective support for children diagnosed with Autism Spectrum Disorder (ASD), based on positive behaviour support and classroom management. Since all behaviour is communication, effective support for children for whom communication is not their strength goes beyond waiting for behaviours to happen in order to respond. Effective support is about constructing individualized, anticipatory, and responsive education practices.

You will learn methods for analysing behaviour from an ASD perspective, and be able to differentiate between normal neurodevelopmental behaviours and challenging behaviours. Through systematic observation instruments like the ABC chart and the "Get to know My Student" journal, you will identify a child's individualized behavioural patterns and their functions. The module will educate you in translating these results in practical Positive Behaviour Support (PBS) strategies, and using the Arousal Curve (Green, Amber, Red, Blue phases) for predicting and effectively responding, and constructing an inclusive and positive classroom.

Learning Outcomes:

Upon completion of this module, you will be able to:

1. Differentiate between common neurodevelopmental behaviours and challenging behaviours in children with ASD in order to better help support classroom management needs for both student and educator.
2. Understand the four main functions of challenging behaviours and have the knowledge of tools to be able to recognize common antecedents that can lead to challenging behaviours.
3. Have knowledge of and understand the value and use of proactive Positive Behaviour Support (PBS) strategies in the classroom.
4. Utilize observational tools like the ABC chart and the "Get to Know My Student" journal to assess individual student needs, track behaviour patterns, and develop personalized behaviour response plans based on the "Arousal Curve" (Green, Amber, Red, Blue phases).
5. Professionals can learn strategies to help students regulate themselves sensorially and emotionally after challenging behaviour.

Understanding Behaviour through an ASD Lens

Behaviour can be defined as any observable action or a response to a situation; All behaviour serves a specific function regardless if that function is not obviously clear to the observer. In the case of children with communication difficulties, like those with ASD, behaviour is one of the ways they are able to express their likes, dislikes, preferences, discomfort and their needs. This could include trying to request something, avoid something, seeking stimulation or soothing, expressing fear of confusion. Children with ASD, often rely on expressions based on behaviour to communicate due to difficulties with language. Just like no child with ASD has the same symptoms, there are many factors that might influence such communication differences;

1. sensory sensitivities
2. emotional regulation skills
3. environmental context and demands
4. cognitive differences
5. past experiences

Behaviour may not always be intentional; in fact, often, the behaviours might be an automatic response to a specific situation, habitual or emotionally driven given the specific context and circumstances.

Two ways to think about behaviour for children with ASD

Common Behaviours

Children with ASD may exhibit some behaviours that are commonly observed within the population of children with ASD (although not all experience all or any of these behaviours) that differ from the typical neurodevelopmental expectations that educators may have from children.

These behaviours are not harmful and not necessarily disruptive in the classroom environment, but nevertheless may be misunderstood as students showing disinterest, defiance or inattentiveness. Such behaviours are often linked to neurological differences, self-regulation strategies, sensory processing or simply just differences in the ways children might behave. Some examples of such behaviours could include:

1. Avoiding eye contact
2. Echolalia (repetition of words)
3. Stimming (repetitive movements like rocking back and forth, hand flapping, spinning)
4. Strong preference and strict adherence to routines/schedules and things staying the same
5. Atypical play (using toys in different ways than their peers [such as lining up toys or organizing toys by categories], preferring to play alone)

Behaviours such as the above are not usually intended to disrupt the classroom, classmates or the flow of the class and as such do not always need to be stopped or corrected. Such behaviours often help the child self-soothe, help them process different sensory input or help maintain a sense of control in environments that are often unpredictable.

At present, there is an increasing emphasis on adapting the environment to the needs and characteristics of autistic individuals, rather than expecting only autistic people to adapt to their surroundings. In other words, the relationship should be bidirectional, involving efforts from both sides.

IMPORTANT NOTE:

Educators should not pathologize neurodivergent traits that may be harmless or helping the student function in the way that they need.

Educators should also not pathologize or assume diagnosis of ASD if a student shows any of these traits.

Challenging Behaviors

While many individuals with ASD will show such behaviors at some point, these behaviors are understood as a form of communication or adaptation to an environment that may not be meeting the person's needs. Children with ASD may occasionally exhibit behaviors that are challenging to understand and address. Behaviour arises from the interaction between the person and their environment, reinforcing the idea of shared responsibility and environmental adaptation

'Challenging behaviours' can be defined as behaviours that are harmful (put the safety of themselves or others at risk), are destructive, prevent access to learning and participation in community life and cause others to label or isolate the individual (Autism Speaks, 2012, p.1).

Before exploring specific examples, it is crucial to note that PBS emphasises prevention as a key strategy. This involves proactive environmental adjustments to reduce the likelihood of challenging behaviours occurring in the first place. By carefully adapting the setting, activities, and communication methods, we can help ensure the individual's needs are met effectively and prevent the need for them to resort to challenging behaviour to communicate or cope. The focus is on creating an environment where success and positive engagement are the norm.

Some examples of challenging behaviours include:

- Aggression (Verbal, threatening behaviour [such as physical actions that do not involve injury or contact], Physical aggression, hitting kicking, biting)
- Destruction (personal or school property destruction, breaking windows, throwing)
- Self-Injury (Head banging, biting self, skin picking)
- Elopement (running away)
- Obsessions/Compulsions/Rituals (strong often irresistible urges that can lead to challenging behaviours if disrupted)
- Sexualized behaviours (difficulties understanding social or sexual boundaries)
- Tantrums/Meltdowns (yelling/screaming coupled with other behaviours)
- Others (Incontinence, difficulty following instructions, eating inedible objects)

It is important that teachers should communicate with families to ensure that there are no underlying health or medical situations or needs that may be unmet. From a Positive Behaviour Support perspective, understanding behaviour means recognising it as communication and responding by adapting to the environment, teaching alternative skills, and supporting emotional regulation.

Understanding why: Why do challenging behaviours happen?

Very young children, including children as young as 2 begin exhibiting challenging behaviours; just like their peers, they have specific needs but lack the communication and social skills to be able to ask for and receive what they need. The child who does not have the communication strategies to be able to communicate their wants, then begin to use challenging behaviour as a way to communicate; once that method gives them what they need, over time they learn to exhibit those behaviours as a way to 'ask for' their needs.

The first step to beginning to address challenging behaviours is to understand them.; it's more effective to address the reasons rather than to stop the behaviour itself as without adequate understanding the choice of intervention might fail as it addresses the incorrect or misunderstood cause and/or unintentionally reinforce and worsen the behaviour.

IMPORTANT NOTE:

Educators should be mindful of assigning labels such as 'bad' or 'wrong' or 'misbehaving' to behaviours as this misinterpretation may lead to a response that is misaligned with the needs of the student, escalating the situation and cause unnecessary further distress, and even lead to a meltdown. Approaching the student with the understanding that all behaviour is communication is an important step in both better understanding the student, as well as refocus the relationship as one of support rather than control. The focus is not to 'fix' the child, but about meeting their needs and reducing the barriers to helping them get what they need. Ultimately, this person-centered approach, central to PBS, is about creating supportive environments that enhance the individual's quality of life and participation in all aspects of learning and community.

Four Main Functions of Behaviour

Four Main Functions of Behaviour

For challenging behaviours, we can consider the following four functions:

Attention

To gain positive or negative attention from peers or other adults (praise/support or scolding/restraint). Negative attention can also be reinforcing to some children. Keep in mind though that attention-seeking is a valid human need, not a manipulative act.

Example: Tony engages in a behaviour that guarantees 1:1 adult interaction

Escape or Avoidance

To allow the child to avoid a task, activity, person, situation or environment they might find unpleasant, overwhelming, overstimulating. Sometimes this shows up when activities are unstructured, unclear, lengthy or too difficult. If a child experiences sensory overload, anxiety or an unexpected transition this may also trigger this function. It is important to mention that teaching functional communication skills, e.g. asking for break or help is a PBS strategy that replaces escape behaviours with appropriate alternatives.

Example: Maria throws blocks around the room to avoid the current activity.

Tangible

To get the child something they want (food, activity, object, specific action). The aim from the professionals should be teaching functional requests to replace screaming behaviour (e.g. using visuals, gestures or words).

Example: George will scream to receive the tablet.

Automatic Reinforcement/ Sensory Regulation

Serves a sensory or internal need and is rewarding to the child. Can occur regardless of the environment and is not socially motivated. May include self-stimulatory behaviours, repetition or self-injury. Self-stimulation should only be addressed if it causes harm or significantly interferes with learning or daily life.

Example: A child is shaking their hands and vocalizing repetitively because it helps them stay regulated.

Some **possible causes for the antecedent** that have been consistent for children with ASD and can lead to behaviour escalation are the following:

1. Communication Difficulties: Limited language may cause frustration and child uses behaviour as replacement of verbal communication.
 - Recommendation: AAC (Augmentative and Alternative Communication) tools can reduce frustration.
2. Unmet sensory needs/ Sensory overload: Environmental elements such as light (too bright, too loud/chaotic).
 - Recommendation: Environmental adaptation such as lighting, noise and/or breaks are a primary PBS strategy.
3. Lack of predictability/ lack of transition: Staff changes, new staff, unstructured day, unpredictable changes to the schedule
 - Recommendation: Visual schedules and advance warnings offer effective support.
4. Unclear expectations/ Tasks too difficult
 - Recommendation: Differentiating tasks and increasing difficulty, once the basis has been consolidated, helps to ensure success and prevents and prevents avoidance or evasion behaviours.
5. Lack of necessary support: Absence of accommodations
 - Recommendation: Shared responsibility to adapt the environment to the needs of the individual, not the other way around.
6. Delayed or inconsistent responses by adults to behaviour

- Recommendation: Consistent, calm responses help the child learn predictability and reduce escalation.

Tools for Identifying Factors: ABC Chart

A simple and easy to use tool is the ABC (Antecedent-Behaviour-Consequence) chart. The main purpose is to collect observations about a student's behaviour and to help identify patterns that come up with their behaviours. By cataloguing exactly what happens before and after a challenging behaviour, this helps the teachers and school staff be better prepared and better able to predict and deal with challenging behaviours when they do occur. See Annex: ABC Chart template.

Date and Time	Antecedent	Behaviour	Consequence	Possible Reason
e.g.,	Teacher announces that the class should go play outside because it's such a nice day without prior warning this would be in the schedule for the day.	Child becomes anxious and begins to scream.	Teacher tries to encourage child to go play, that they love to play etc. Behaviour escalates into a meltdown.	Unexpected transition with no warning

Activities

Activity 1: Environmental Trigger Checklist

Objective: Assist educators in investigating/ auditing their environment and day-to-day classroom routines to reduce potential behavioural challenges and increase engagement and wellbeing for all students.

Duration: 20–30 minutes

Materials: Environmental Trigger Checklist (provided in activity)

- Clipboard or tablet

- Pen

Description: This checklist can be used at the beginning of the year, following any major breaks (Winter holidays/ Spring Holidays) and/or whenever deemed relevant by the educator. The purpose is to provide some relative information, not a causal analysis, of their classroom environment and day-to-day schedule and routine and provide information of identifying potential antecedent triggers based on common causes of antecedents related to challenging behaviour. As with most of the approaches and tools, it is framed in a proactive and positive manner.

Potential Antecedent Triggers			Check ✓
Classroom Physical Environment	Lighting: Is the lighting in the classroom comfortable? Am I able to use alternative lighting options to reduce the brightness?		
	Noise: Are there sources of loud noise in the room? (e.g., squeaky chairs). Have I made a plan to minimise unnecessary noise? Consider access to noise-cancelling headphones or quiet areas for students with sensory sensitivities.		
	Layout: Is there enough space to allow for uncluttered movement for all students? Have I accounted for different classroom layouts?		

	Calm Corner: Have I created a clearly defined cozy and semi-private space for students to use whenever necessary?	
	Organisation: Is the space organised enough so students can find what they need? Could I add even more visual clarity? (e.g., printed cards with the materials). Ensure that visuals are consistent with students' communication systems (e.g. PECS symbols, and real photos)	
Day-To-Day Routines and Structure	Schedule: Is there a visible visual schedule where all students can see and refer to?	
	Transitions: Have I made plans for executing predictable and clear cues to help students transition between activities? (e.g., timers, visual cues, countdowns)	
	Predictability: Have I set and adopted consistent routines in my day-to-day schedule and routines of the classroom?	
	Communication: Have I communicated with all relevant staff the importance of clarity and directness paired with visuals whenever possible when communicating with students?	
	Staff awareness: Have I informed all staff about individual student preferences, sensory sensitivities and effective strategies?	

Activity 2: Reflection Exercise- Why is this behaviour happening?

Objective: Provide a reflection protocol to help teachers identify triggers to challenging behaviours and to develop proactive strategies that meet students' needs through environmental and instructional adjustments.

Duration: 15–20 minutes per incident review

Materials:

- Reflection questions template (see Annex)
- Recent ABC charts or observation notes
- Quiet space for reflection

Description: This reflection can be used following challenging behaviours including meltdowns. The question can help guide teachers and/or other educator professionals in identifying the student specific antecedent behaviours that typically lead to challenging behaviours. Knowing the common patterns can help deescalate situations faster and alert teachers to take action before students exhibit challenging behaviours. Questions sheet in Annex 3.

IMPORTANT NOTE:

Reflection should remain non-judgmental and collaborative. It could be shared with families and multidisciplinary teams to ensure consistency in interpretation and support.

1. When and where does the behaviour occur?
2. Who is present?
3. What happens just before the behaviour? Include environmental, emotional or sensory factors (e.g. noise, frustration, task difficulty).
4. What does the child get or avoid by doing the behaviour?

5. How do professionals respond to these behaviours (extinction, redirection to another activity, repeat the demand)? Adult reactions can unintentionally reinforce certain behaviours.
6. What would the child be doing if they weren't engaging in the behaviour? This helps identify what replacement or alternative behaviour to teach (e.g. asking for help, requesting a break)

Positive Behaviour Support

What is PBS?

Positive Behaviour Support is an approach that has a goal to improve quality of life and also reduce challenging behaviours. It's a proactive, evidence informed and person centered approach and grounded in the understanding that all behaviour aims to communicate.

Especially for children with not yet fully developed language and speech communication, behaviour is one way to get their needs and wants understood and cope with difficult situations or overwhelming environments.

For all young children, but especially children with ASD, control over what happens in their day is limited – such little opportunity for choices and control over day-to-day life may contribute to the development of challenging behaviour as it can often be an effective way to control what happens to them/what they do.

PBS can help restore feelings of control by offering children choices whilst simultaneously teaching independence skills. Rather than focusing on controlling children often through punishment which can cause distress or worsen behaviour, PBS relies on proactive and person first approaches that increase autonomy. PBS replaces reactive measures with skill teaching and environmental design, ensuring that adults adapt as much as children do.

In its intended design, Positive Behaviour Supports (PBS) is a comprehensive approach involving multiple stakeholders like parents, teachers, and other professionals in all elements. A Functional Behaviour Assessment (FBA) is a key element of PBS (defined in the key terms). For this curriculum, which focuses on professional development for preschool teachers, it's important to note that even without a comprehensive approach or an FBA in place, teachers can still apply the core principles of PBS by implementing respectful, supportive, and preventative strategies.

Proactive and Respectful Behaviour Strategies

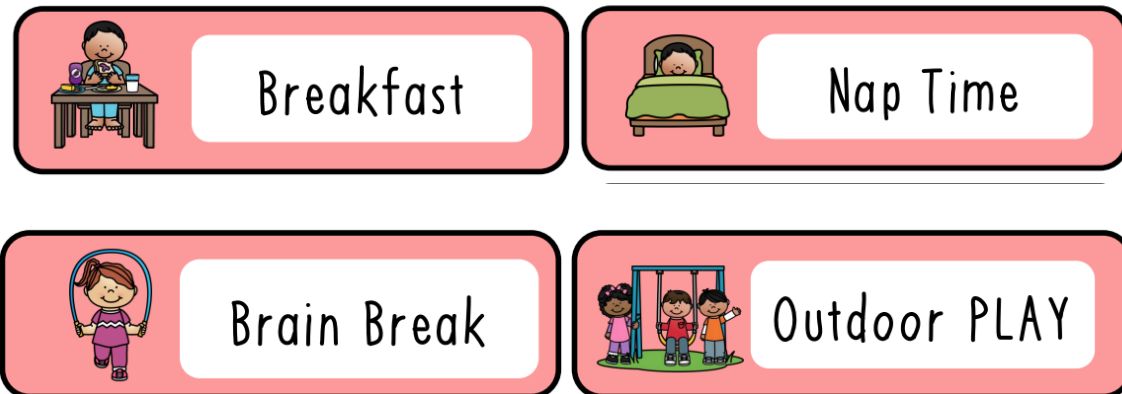
1. Invest time in getting to know student; Build meaningful trust

In order to create an effective proactive approach, it's vital to know your student with ASD extremely well; their likes, dislikes, interests, preferred communication patterns, sensory likes and dislikes, potential triggers and any other relevant information. This is not just done in the beginning of the year, rather continually throughout the entire time spent with the student. Additionally, it's important that the relationship is based on trust; that involves being a trusting adult who is predictable and consistent. A respectful trusting relationship is grounded on the understanding that behaviour reflects needs and not attitudes, avoiding making assumptions or labelling students in a negative light. The bond between the child and the professional themselves can act as a protective factor and can prevent escalation before it begins.

2. Create predictable environments with relevant visual and structural supports

As already established, clear predictable routines that are easily accessible through the use of flexible and individualised visual tools are a good way to help support students with ASD. Some examples for

visual tools could include: a) picture schedules or daily timetables, ideally using real images, b) First-Then boards to explain activity sequencing and c) a collection of visual cues that help explain norms, transitions and other social narratives.



Images: [Social Workers Tool Box](#)

Figure 1 Source: <https://spedsupport.tea.texas.gov/resource-library/autism-toolkit/firstthen-card>

Transitions: Focusing on transition strategies such as verbal countdowns (e.g., in 3 minutes we will go outside, in 2 minutes etc etc) visual timers, daily board with the activities that will be followed throughout the day from start to finish, timely alerts for changes in activity or staff changes can help reduce anxiety and prevent challenging behaviours.

Environment: It's important to understand the preferences and needs of each individual student as it relates to the environment. Some practices that seem to work with many students with ASD: 1) Create/Provide a special calm/low stimulation area to help with regulation and to provide a space for the student to retreat. 2) If possible, see in which areas in the classroom you can be able to reduce clutter, arrange activities that avoid crowding and create a management plan for reducing noise.

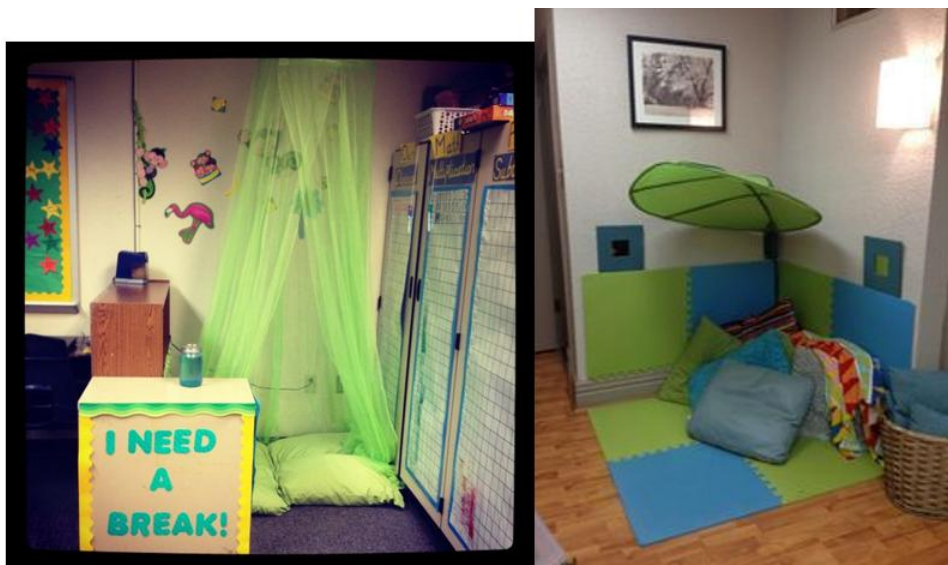


Figure 2 Source: <https://www.learninglinks.org.au/resources/autism-in-preschool-settings/>

Check out: How to create a calming area

3. Be mindful and deliberate in communication

When communicating with the student, ensure you communicate in a clear and concrete manner using language that is age and developmentally appropriate. Try to break down instruction into specific and clear steps. When giving instructions, pair with visual aids and allow for extra processing time for students to understand what you are asking of them. Do not rush for a response and patiently wait and check for understanding., especially during transitions.

4. Positive interactions and reinforcement

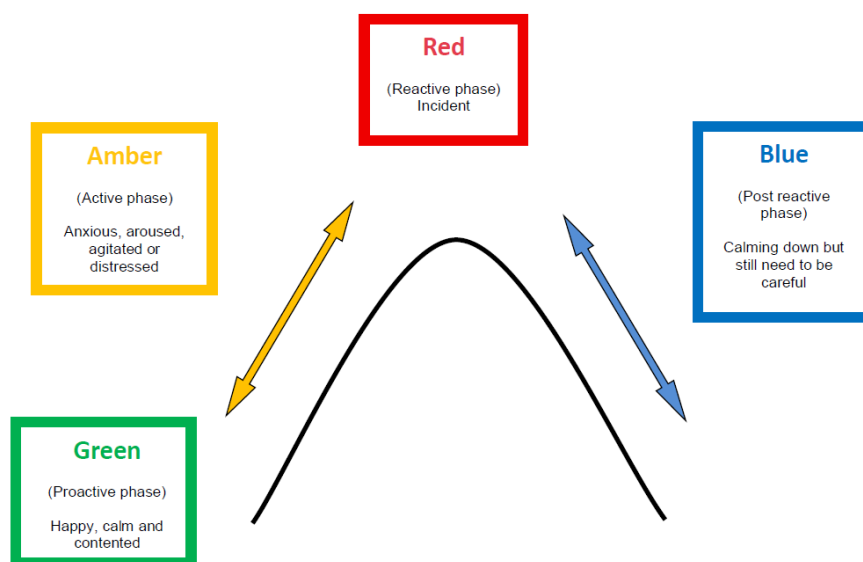
Overall, try to reinforce any attempts at positive behaviour to build momentum. When giving instructions, phrase them in a positive manner; Rather than 'Don't run' instruct 'We walk when we are inside'. When it is time for praise, use descriptions of behaviour that explicitly explain the action e.g., "You shared your blocks with Tina—that was helpful".

Depending on the student and agreements with family, you can also use reward systems (e.g., choices for activity, stickers, tokens etc); it's important that they are developmentally appropriate as well as meaningful to the student (e.g., using truck stickers for a child that does not enjoy trucks might not be as effective).

5. 'Arousal curve' behaviour diagram—Green, Amber, Red, Blue

To enhance a proactive strategy, it is important to recognise that behaviours often occur in different stages as indicated below. Most behaviours are unlikely to occur without any warning signs. Recognising these signs early can help teachers respond in a timely manner and prevent escalation. Depending on the specific behaviours and responses of each student, teachers can collect information on student behaviour and be able to track the progression of the child's behaviour to their action.

Green Phase: Student is most calm, relaxed and can engage in a positive meaningful way. Time to reinforce calm engagement and to teach any new skills.



Amber Phase: Student begins to feel anxious or distressed and there is a chance of the escalation of behaviour. The early warning signs will begin to become clear (e.g., becoming red in the face, pacing); Time to take action to help the student return to the green phase as quickly as possible.

Red Phase: Student begins to show challenging behaviour and action needs to be taken quickly to avoid injury or further distress.

Blue Phase: The challenging behaviour has passed and the student is starting to become calm; caution is warranted as behaviour may quickly return to red.

Self-regulation tools and sensory supports

All children, but especially those with ASD often have difficulty regulating their emotions and sensory needs throughout the day, and these may change multiple times throughout the day. As aforementioned, there are multiple possible reasons that might affect regulation. Outside of the strategies teachers can implement, there are also specific proactive support tools that can help students with ASD regulate and self-manage their behaviour. Teachers can use these tools proactively and offer them regularly through 'reset breaks' such as:

- a) before or after transitions,
- b) following sensory heavy activities and
- c) when the teacher notices early signs of distress (AMBER Phase).

IMPORTANT NOTE:

It will not be effective to introduce such tools during a red phase. Incorporate their use in daily classroom routines and reinforce the use of the tool, not just the result. Never force students to use a tool and ensure that the tool is meaningful and effective for the student; not all tools work well for all students.

Examples of proactive support: The use of tools should be coordinated with family support.

- Noise Cancelling Headphones
- Fidget tools (fidget spinners, sensory tools)
- Weighted tools for deep pressure
- Visual cards with emotions
- Break request cards
- Movement breaks (permission or choice for a different activity than the class)
- Calm corner
- Anything else that works for the student!

Activities:

Activity 3: 'Get to know my student' Observation Journal

Objective: Help teachers get to know their students well, proactively prepare for behaviour management inspired by the arousal curve.

Instructions: In the first few weeks or months, or when the student has newly joined the class, take time to fill out this journal individually, or alongside parents and other professionals. It is not meant to be a diagnostic tool, rather a living document to help guide you in providing positive, individualized support aligned with PBS.

The materials for this activity can be found in See Annex: 'Get to know my student' Observation Journal template.

Activity 4: Flowchart- My Behavior Response Plan

Objective: Provide educators with a flowchart and behavioural plan that will help them navigate challenging behaviours in the classroom.

Instructions: Ideally, following the completion of the 'Get to know my student' Observation journal educators can use this chart to help make a plan for dealing with challenging behaviours. Using the information they gathered, they can make a plan individually or with the staff of the school to ensure challenging behaviours are managed appropriately and effectively.

See Annex: My Behavior Response Plan flowchart

References:

Autism Speaks. (2018). Autism and challenging behaviours: Strategies and support. <https://www.autismspeaks.org/tool-kit/challenging-behaviors-tool-kit>

Autism Speaks. (n.d.). Autism classroom strategies. <https://www.autismspeaks.org/tool-kit-excerpt/autism-classroom-strategies>

The Challenging Behaviour Foundation. (2013a). Understanding challenging behaviour: Part 1. <https://www.challengingbehaviour.org.uk/wp-content/uploads/2025/06/001-Understanding-Challenging-Behaviour-Part-1.pdf>

The Challenging Behaviour Foundation. (2013b). Finding the reasons for challenging behaviour: Part 2. <https://www.challengingbehaviour.org.uk/wp-content/uploads/2025/06/002-Finding-the-Reasons-for-Challenging-Behaviour-Part-2.pdf>

The Challenging Behaviour Foundation. (2013c). Positive behaviour support planning: Part 3. <https://www.challengingbehaviour.org.uk/wp-content/uploads/2025/06/003-Positive-Behaviour-Support-Planning-Part-3.pdf>

Hastings, R. P., Allen, D., Baker, P., Gore, N. J., Hughes, J. C., McGill, P., Noone, S. J., & Toogood, S. (2013). A conceptual framework for understanding why challenging behaviours occur in people with developmental disabilities. *International Journal of Positive Behavioural Support*, 3(2), 5–13.

Maggin, D. M., Wehby, J. H., Partin, T. C. M., Robertson, R., & Oliver, R. M. (2011). A meta-analysis of school-based behavioral interventions for students with autism spectrum disorders. *Research in Autism Spectrum Disorders*, 5(4), 1059–1068. <https://doi.org/10.1016/j.rasd.2010.11.008>

Sarah Dooley Center for Autism. (n.d.). Autism in the classroom: How to handle behavior challenges. <https://www.sarahdooleycenter.org/news/autism-in-the-classroom-how-to-handle-behavior-challenges/>

Steinbrenner, J. R., Hume, K., Odom, S. L., Morin, K. L., Nowell, S. W., Tomaszewski, B., Szendrey, S., McIntyre, N. S., Yücesoy-Özkan, S., & Savage, M. N. (2020). Evidence-based practices for children, youth, and young adults with autism. University of North Carolina at Chapel Hill, Frank Porter Graham Child Development Institute. <https://doi.org/10.17615/j8vh-we54>

Resources:

<https://www.challengingbehaviour.org.uk/wp-content/uploads/2025/06/003-Positive-Behaviour-Support-Planning-Part-3.pdf>

Glossary of key terms

Challenging Behaviours: Behaviour which may be harmful, disruptive or destructive; prevents learning participation and engagement. A form of communication and not necessarily intentional

Self-Regulation: A person's ability to regulate themselves, their emotions, needs and behaviour.

Antecedent: What happens before a behaviour.

Functional Behaviour Assessment: A structured comprehensive process to identify the function of a challenging behaviour. Typically completed alongside families.



Positive Behaviour Support: Proactive person centred approach to reduce challenging behaviours and improve quality of life.

Stimming: Repetitive behaviours (e.g., hand flapping, rocking, vocalizing); helps regulate the emotional state

Meltdowns: Intense emotional outbursts triggered by overwhelming sensory input, unexpected changes, or unmet needs.



Module 5:

Collaboration with Families and Professionals

In today's inclusive and interconnected educational environment, collaboration is not optional — it is a foundation of effective teaching and student support. **Module 5** focuses on how meaningful partnerships with families and external professionals contribute to improved outcomes for all students, especially those with diverse learning needs.

This module is based on the belief that families are the true experts on their children and should be treated as active partners in the educational process. When schools implement family-centered practices, they create learning environments that are more equitable, respectful, and responsive to each child's unique strengths and needs. Furthermore, the involvement of external professionals — such as therapists, psychologists, or social workers — provides students with comprehensive, coordinated, and specialized support.

During this module, participants will explore the theoretical foundations of collaboration, learn strategies for building culturally responsive and strengths-based relationships, and discover tools that support effective teamwork within multidisciplinary teams. Whether through daily communication logs, strengths-focused questionnaires, or structured team meetings, the goal is to establish consistent and coordinated support systems that help every child grow — both in their learning and in their social and emotional development.

Learning Outcomes

By the end of this module, participants will be able to:

1. **Understand the importance of collaboration** with families and professionals as a key component of inclusive education.
2. **Identify barriers and enabling factors** for building meaningful relationships with families from diverse cultural and socioeconomic backgrounds.
3. **Implement family-centered practices** that foster mutual respect, trust, and active partnership in the educational process.
4. **Coordinate effectively with members of interdisciplinary teams** to provide coherent and comprehensive support for students with a range of needs.
5. **Use communication tools and strategies** (e.g., contact logs, surveys, team meetings) that support regular, efficient, and respectful information exchange between schools, families, and specialists.
6. **Promote a strengths-based approach** that empowers students and families and recognizes their unique capabilities and contributions.

1 Engaging Families as Partners

Theoretical Foundations

The Importance of Family-Centered Practices

Family-centered practices emphasize that families are not peripheral to a child’s education — they are central. Educators and schools that place families at the heart of their practice recognize the **irreplaceable role of caregivers** in children’s development and well-being.

Research consistently shows that when families are actively involved in educational decision-making and day-to-day learning, students benefit **academically, socially, and emotionally** (Turnbull et al., 2015; Friend & Cook, 2020). This is particularly important when working with autistic children, for whom individualized and consistent support across environments is crucial.

When educators adopt a family-centered lens, they shift from a model of “*doing to*” families to one of “*working with*” them. This approach fosters more relevant, respectful, and sustainable support systems that build on the strengths of both the child and their family.

Key Principles of The Family-Centered Model

The family-centered model is grounded in the belief that children thrive when their families are empowered, respected, and actively involved. Key principles include:

- **The Family as the Primary Unit of Support**
Families are seen as constant and central in a child’s life; interventions are designed to strengthen their role.
- **Empowerment and Capacity Building**
Families are supported to make informed decisions and develop confidence in their ability to advocate for their child.
- **Collaboration and Teamwork**
Professionals and families work together in equal partnership, sharing knowledge and responsibility in decision-making.
- **Cultural Responsiveness and Respect**
Practices are adapted to honor each family’s cultural background, values, and priorities.
- **Strengths-Based Approach**
Emphasis is placed on what the child and family *can* do, rather than focusing on deficits or limitations.
- **Flexibility and Individualization**
Supports are tailored to fit each family’s unique routines, schedules, and preferences.

Traditional vs. Family-Centered Approaches: A Comparison

Aspect	Traditional Model	Family-Centered Model
Role of Family	Passive recipients of services	Active partners and decision-makers
Decision-Making	Led by professionals	Shared with families
Focus of Intervention	The child in isolation	The child within the family system
Communication	One-way (from school to family)	Two-way, ongoing, respectful dialogue
Perception of Expertise	Professionals are seen as sole experts	Families are valued as experts on their child

Aspect	Traditional Model	Family-Centered Model
Cultural Consideration	Often standardized, less flexible	Tailored to each family's cultural values and context
Goals of Support	Address deficits and needs	Build on strengths and support family priorities
Service Planning	Based on professional schedules and structures	Adapted to family routines, needs, and availability

By embracing a **family-centered model**, educators and professionals move toward **more inclusive, equitable, and sustainable practices** — practices that align with the lived realities of families and the diverse strengths of the children they support.

Practical Activities for Building Family Partnerships

Home-School Communication Templates

These templates serve as daily or weekly bridges between home and school. Effective templates are short, visually accessible, and adaptable.

Examples include:

- **Daily communication notebooks:** Allow for two-way comments from teacher and parent.
- **Weekly goal updates:** Focused on one strength and one area for growth.
- **Visual communication cards:** Especially useful for multilingual families or students with disabilities.

Teachers can personalize templates to reflect the child's needs (e.g., behavior charts, mood meters, learning objectives). Ensuring translations are available and inviting parent feedback turns communication into a true partnership.

Strengths-Focused Family Questionnaire

A well-crafted questionnaire helps educators learn who a child is beyond the classroom. It also positions families as co-contributors to learning goals.

Sample questions:

- What does your child love doing at home?
- What routines or activities help calm or motivate your child?
- Are there any family traditions or practices you'd like us to be aware of?
- What are your hopes and concerns for your child this school year?

The focus on strengths builds rapport and shifts the narrative away from “what’s wrong” to “what’s strong.” Teachers can revisit this questionnaire throughout the year to ensure continued alignment.

Parent Meeting Role-Play (Professional Development Exercise)

Educators can enhance their family engagement skills through practice. Role-play scenarios help teachers:

- Prepare for emotionally charged meetings.
- Learn to listen actively and empathically.
- Practice using **strength-based language**, such as: “I noticed Sam is really focused when he’s working on puzzles. Can we build on that strength together?”
- Navigate disagreements respectfully and constructively.

Variations to consider:

- A parent who disagrees with a diagnosis.
- A family who speaks limited language that we’re using (foreigners).
- A caregiver expressing frustration with school communication.

By reflecting on these scenarios in training environments, educators can increase their cultural competence and conflict-resolution skills.

2. Partnering with External Professionals

Theoretical Foundations

Who Are the Key Partners?

No single educator can meet all the needs of a child, particularly those with disabilities, trauma histories, or complex developmental profiles. A multi-disciplinary approach brings together specialists to support the whole child.

Common external professionals include:

- **Speech-Language Pathologists (SLPs):** Assist with communication, feeding, and social language.
- **Occupational Therapists (OTs):** Support fine motor skills, sensory regulation, and daily living tasks.
- **Physical Therapists (PTs):** Help children develop strength, balance, and mobility.
- **School Psychologists:** Assess learning and behavior, design intervention plans, and support mental health.
- **Social Workers:** Connect families with services and offer support for emotional, social, or financial challenges.
- **Behavioral Therapists:** Address challenging behaviors through applied behavior analysis or related models.

Each professional has unique insights, but effective collaboration ensures that interventions are not fragmented or contradictory.

Coordinating Consistent Support Strategies

When educators, families, and specialists work in silos, the child often receives mixed messages. Collaborative, aligned support increases the likelihood of success and reduces stress for all involved.

Effective coordination involves:

- **Interdisciplinary meetings:** Regularly scheduled, with all voices valued.
- **Shared goals and data:** Ensuring everyone is working toward the same objectives.
- **Role clarity:** Knowing who is responsible for which supports.
- **Clear communication channels:** Preventing duplication or overlooked needs.

Consistency between home, school, and therapy settings builds routines, supports generalization, and helps the child develop trust in adults' shared expectations.

Practical Activities for Professional Collaboration

Building effective collaboration between educators, specialists, and families is essential to providing consistent and holistic support for the child. The following tools promote **clarity**, **shared responsibility**, and **transparency** across all members of the team.

Resource Mapping Worksheet

This worksheet helps **visualize a child's complete network of supports**, both within and beyond the school environment.

Instructions:

1. Place the child's name or photo in the center.
2. Branch outward to include:
 - **In-School Supports:** e.g., classroom teacher, speech-language pathologist, counselor, special educator
 - **External Supports:** e.g., private therapists, clinics, medical specialists
 - **Cultural/Community Resources:** e.g., faith-based groups, language-specific parent support groups, cultural centers
 - **Family and Caregivers:** e.g., parents, siblings, extended family

Benefits:

- Provides a **clear overview** of all supports involved with the child.
- Helps **new staff quickly understand** the child's existing support system.
- Identifies **gaps in services** or duplications.
- Empowers families to seek **additional community-based resources**.
- Can be **updated annually** to reflect the child's evolving needs and services.

Team Communication Log Template

This structured log ensures that **all team members stay informed**, and **decisions are documented clearly**.

Sample Template:

Date	Type of Meeting/Contact	Team Members Present	Key Points Discussed	Decisions Made	Next Steps (Who & By When)	Parent Feedback (if applicable)	Minutes Taken By
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- Use for IEP meetings, internal staff coordination, parent-teacher conferences, or phone/email check-ins
- Promotes **accountability and clarity** on follow-up actions
- Keep as part of the **student support file**

To conclude, collaboration with families and professionals is not a side element of education — it is central. By embracing family-centered practices, honoring cultural diversity, and partnering with external experts, educators can provide consistent, informed, and deeply personalized support to every child.

Through open communication, shared decision-making, and ongoing reflection, school teams can build strong networks around each learner, ensuring they thrive both in and out of the classroom.

References

- Janicka, I., & Liberska, H. (2014). Psychologia rodziny [Psychology of the family]. PWN.
- Jakoniuk-Diallo, A., & Kubiak, H. (2010). O co pytają rodzice dzieci z niepełnosprawnością [What parents of children with disabilities ask about]. Difin.
- Kędziora, S. (2007). Wpływ przewlekłej choroby dziecka na funkcjonowanie rodziny [The impact of a child's chronic illness on family functioning]. Nauczyciel i Szkoła, 3–4, 57–66.
- Liberska, H. (2011). Rodzina z dzieckiem niepełnosprawnym – możliwości i ograniczenia rozwoju [Family with a child with disabilities – opportunities and limitations of development]. Difin.
- Myśliwczyk, I. (2014). Retrospekcja doświadczeń biograficznych rodziców małych dzieci o specjalnych potrzebach edukacyjnych [Retrospection of biographical experiences of parents of young children with special educational needs]. Niepełnosprawność, 14, 146–149.
- Sztompka, P. (1989). Socjologiczna teoria podmiotowości [Sociological theory of subjectivity]. In P. Buczkowski & R. Cichocki (Eds.), Podmiotowość: możliwość – rzeczywistość – konieczność. Nakom.
- Szumski, G. (2002). Perspektywy integracyjnego kształcenia niepełnosprawnych w Polsce: Analiza systemowo-porównawcza [Perspectives of integrative education of people with disabilities in Poland: A systemic-comparative analysis]. Ruch Pedagogiczny, 2002, 15–28.
- Szurowska, B. (2019). Rodzina w sytuacji trudnej: Zdążyć z pomocą [Family in a difficult situation: Help in time]. Difin.

Tkaczyk, G. (2002). O wiodącej roli środowiska społeczno-przyrodniczego, realizowanego na I etapie edukacyjnym – w procesie przystosowania dzieci ze specjalnymi potrzebami edukacyjnymi do życia w warunkach integracyjnych [On the leading role of the socio-natural environment at the first stage of education in the process of adapting children with special educational needs to life in integrative conditions]. In E. Górniewicz & A. Krauze (Eds.), *Od tradycji do ponowoczesności* (pp. 383–392). Wydawnictwo Uniwersytetu Warmińsko-Mazurskiego.

Module 6:

Observation, Planning, and Progress Tracking

This module equips early childhood educators with essential skills for supporting children with ASD, through systematic observation and individualized planning approaches. Given the diverse ways ASD manifests in young children, effective support requires moving beyond one-size-fits-all strategies to develop personalized, responsive educational practices.

Throughout this module, you will explore evidence-based observation techniques that capture the unique strengths, challenges, and developmental patterns of each child with ASD. You'll learn to use various documentation methods, to build a better understanding of how children communicate, interact socially, regulate their emotions, and engage with learning activities.

The module also guides you through the process of translating observational insights into practical, individualized educational plans. Finally, you'll discover how to set meaningful goals using the SMART framework and adapt evidence-based approaches like TEACCH and SCERTS to meet individual needs.

Learning Outcomes

Upon completion of this module, you will be able to:

- Implement diverse observation techniques and monitoring systems, for ongoing assessment of children with ASD
- Recognize and document developmental red flags processing that may indicate the need for further assessment or intervention
- Develop individualized support plans for each child's specific learning style and developmental profile
- Design flexible curriculum adaptations that benefit all learners while specifically supporting children with ASD
- Collaborate effectively with families and specialists involving them in goal-setting and strategy development

1.Observation & Developmental Monitoring

Theory

Observing and monitoring the development of children with autism is a critical component of early identification and effective educational planning. Since ASD presents with a wide range of characteristics and developmental profiles, consistent and purposeful observation allows educators to understand each child's unique strengths, challenges, and patterns of behavior across settings. Through both structured and naturalistic techniques, educators can gather meaningful information about a child's communication, social interaction, sensory responses, and learning engagement. This information supports individualised instruction, promotes collaboration with families and specialists, and ensures that interventions are responsive and developmentally appropriate. The following evidence-based observation techniques are designed to help educators monitor progress, guide support strategies, and contribute to inclusive classroom practices.

Observation techniques

1. Structured observation

Structured observation involves the use of predefined criteria to assess specific behaviors in consistent settings. Educators might use rating scales¹ or observation forms during classroom activities to monitor eye contact, communication, and engagement levels.

2. Naturalistic observation

This technique captures how a child behaves spontaneously in unstructured environments, such as playtime or recess. It's useful for understanding social interaction, play preferences, and adaptive behavior in real-life contexts.

3. Antecedent-Behavior-Consequence recording

An ABC chart identifies the triggers (antecedents), behaviors, and resulting consequences, helping educators determine why a child engages in certain actions, especially those that may be disruptive or concerning.

4. Time sampling / Interval recording

This method involves observing whether a specific behavior occurs during preset intervals (e.g., every 5 minutes). It is efficient for tracking the frequency of behaviors like repetitive actions or on-task behavior.

5. Event recording

Event recording counts how often a specific behavior happens. This method is ideal for measuring discrete behaviors such as hand-flapping or instances of elopement during a school day.

6. Developmental milestone checklists

Educators can use validated milestone checklists to track growth across language, motor, social, and adaptive domains. This method supports early detection of developmental delays and intervention planning.

Developmental red flags

The recognition of developmental red flags is important for early identification and intervention in children with ASD. These signs may indicate delays or atypical patterns in communication, social interaction, behavior, or sensory processing. Early attention to these indicators allows educators and caregivers to seek further assessment and provide targeted support as soon as possible. According to

¹ Rating scale evaluation tools for educators

1. Classroom MEISR (ClAMEISR)

- Purpose: Evaluates children's engagement, independence, and social relationships during classroom routines.
- Age Range: Preschool to early elementary.
- Access: [ClAMEISR Manual PDF](#)

2. MEISR (Measure of Engagement, Independence, and Social Relationships)

- Purpose: Assesses functional behaviors of children from birth to 3 years within home routines.
- Access: [MEISR Overview and Scoring](#)

3. Communication Matrix

- Purpose: Online tool to assess early communication skills, especially for individuals with complex communication needs.
- Access: [Communication Matrix](#)

Dr. Gada (2021) some of the most common developmental red flags especially in toddlers are the following:

1. Communication and Language

- Lack of response to their name by 12–15 months
- Lack of pointing to indicate interest by 12–15 months (instead leading adults by hand)
- Echoing words or phrases heard repeatedly (echolalia)
- Giving inappropriate or unconnected answers to questions
- Lack of back-and-forth conversation or conversations only related to their interests

2. Social Interaction

- Preference to play alone or be alone
- Uncomfortable with eye contact or active avoidance of eye contact
- Difficulty understanding others' feelings or thoughts
- Inappropriate responses to social situations

3. Behavioral and Play

- Lack of pretend play (e.g. feeding a doll) by 18–24 months
- Recurrent meltdowns or tantrums
- Insistence on routine or distress with a change in routine
- Intense interests or obsessions with particular toys, objects, games, or topics
- Motor mannerisms (e.g. rocking, tiptoe walking, hand flapping, spinning)

4. Sensory Processing

- Intense like or intense distress with certain sensations (sound, light, texture, taste, or smell)

Using video/photo to document progress

Visual documentation serves as a powerful narrative tool in monitoring children's learning and development from birth to six years. This approach aligns with effective formative assessment: capturing authentic, everyday moments allows educators to "see what children are thinking and feeling, what they understand and can do" Photos and videos make learning visible, enabling educators to reflect on what was most meaningful for each child and plan next steps accordingly.

Moreover, involving children and families in selecting and reviewing visual documentation promotes a collaborative culture of learning and builds a shared understanding of progress. When children choose their own photos or video clips, they engage in self-reflection and contribute to building their portfolios. Visuals also strengthen partnerships with parents and specialists, offering clear, contextualised insight into the child's capabilities and interests across various environments (Kline, 2008).

Activities

Activity 1: Observation log practice

How to use an observation log tool step by step (see Annex: Observation log - Printable template):

Step 1- Preparation phase: Plan 10–15-minute focused observation sessions, ideally 2-3 times per week. Then observe your students during different activities (free play, structured activities, transitions, social interactions).

Step 2- During observation: Focus on one child at a time and concentrate on the target child's behaviors, interactions, and responses. Then record what is happening around the child that might influence their behavior and finally observe naturally so the child does not feel watched.

Step 3- Recording process: Use the ABC format (when relevant): Antecedent (what happened before), Behavior (what occurred), Consequence (what happened after). Don't only focus on challenges, try to note strengths and successful moments and when it is possible record the child's exact words.

Step 4- Post observation: Fill in any gaps while the observation is fresh in your memory, and look for trends across multiple observation sessions. Finally, discuss findings with team members, specialists, or families as needed.

Activity 2: Developmental milestone checklist

How a child plays, learns, speaks, acts, and moves provides important insight into their overall development. These observable behaviors, known as developmental milestones, represent skills that most children can typically do by a certain age. Milestones cover key developmental areas such as social and emotional interaction, communication and language, problem-solving, and both fine and gross motor skills.

While each child develops at their own pace, understanding what is typical for a given age helps educators identify when a child may be showing signs of developmental delay. This is particularly important when supporting children with ASD, as early signs can often be subtle and emerge in different ways across these domains.

Educators play a critical role in observing children within natural environments such as free play, classroom routines, and social interactions. Through these observations, they can recognise patterns, spot red flags, and contribute valuable input to early intervention processes. Recognising developmental concerns early can make a significant difference in a child's access to appropriate support.

To support this process, **downloadable developmental milestone checklists are included in the annex: Developmental milestone checklist**. These checklists are not generic but tailored to specific age ranges, from 2 months up to 5 years. Educators should select the checklist that corresponds to the child's chronological age, or adjusted age if needed, and use it during regular observations. This approach allows for the identification of common developmental patterns while making it easier to notice when a child may benefit from additional assessment or support.

Activity 3: Child profile worksheet

A child profile worksheet is important because it creates a complete picture of the child beyond their ASD diagnosis, capturing their unique personality, strengths, interests, and needs. This prevents educators from seeing only the disability rather than the whole child. Additionally, every child with ASD is different. Profiles help educators understand what works specifically for each child, enabling truly personalised teaching approaches and interventions. (see Annex: Child profile worksheet - Printable template).

How to use a child profile worksheet:

Step 1- Initial information gathering: Set aside 45-60 minutes to complete the profile with parents/caregivers. Then help families understand how this information will be used to better support their child.

Step 2- Collaborative completion process: Begin by discussing what the child does well and enjoys. Also respect family values, traditions, and communication styles, and record specific examples and direct quotes when possible

Step 3- Professional observation integration: Include observations from classroom settings that complement family information. If behaviors differ between home and school, document both perspectives. If possible, Incorporate information from therapists, psychologists, or other professionals.

Step 4- Regular updates and reviews: Update the profile every 3-4 months or when significant changes occur. Then adjust and modify approaches based on new information or changing needs.

2. Individualised Planning and Evaluation

Theory

Adjusting approaches over time

Autism spectrum disorder presents in diverse ways, meaning no single educational approach will suit every child. To support this diversity, educators need flexible methods that can be tailored to individual strengths, challenges, and developmental stages. Two widely recognised and adjustable approaches are the **TEACCH Method** (Treatment and Education of Autistic and Related Communication Handicapped Children) (Deolinda, 2025) and the **SCERTS Model** (Prizant, n.d.). While different in focus, both provide frameworks that educators can adapt based on each student's unique profile.

TEACCH: Structure and visual supports

The TEACCH Method emphasises structured teaching through visual organisation, predictable routines, and clear physical environments. It is particularly effective for students who benefit from routine, visual cues, and step-by-step learning.

Why TEACCH is adjustable:

- Visual schedules can range from photos to symbols to written text, depending on a child's abilities.
- Task complexity and independence levels can be gradually increased as the child progresses.
- Physical environments can be tailored for sensory sensitivities and attention needs.
- Can be used with students who are verbal or nonverbal, from early learners to more independent ones.
- TEACCH supports consistency and clarity while allowing for ongoing individualisation.

SCERTS: Social Communication and Emotional Regulation

The SCERTS Model focuses on Social Communication, Emotional Regulation, and Transactional Support. It is especially suited for children who need help developing communication and emotional coping skills in natural, relationship-based contexts.

Why SCERTS is adjustable:

- Communication strategies are customised—from speech to augmentative systems like PECS.
- Emotional regulation support ranges from adult-guided calming strategies to independent self-regulation.
- Goals are developed collaboratively and evolve as the child grows and develops new capabilities.
- Interventions can be embedded into daily routines, classroom activities, and social interactions.
- SCERTS provides a flexible framework that adapts to emotional and social development at any stage.

Both TEACCH and SCERTS are adjustable, evidence-based frameworks. Educators can select the method (or blend elements of each) that best matches the individual needs, learning style, and goals of each student. The key is not to rigidly follow a method but to use it as a flexible tool to build a responsive, supportive educational experience.

How educators can set goals based on observed needs

1. **Collect and analyse observational data:** Use structured and naturalistic observations as it has already mentioned in the section above. Tools like ABC charts, developmental checklists, and video/photo documentation can reveal patterns and functional needs.
2. **Identify strengths and areas of challenge:** Interpret the observational data to determine where the child is thriving and where they may need support. For example, a child who communicates through gestures but not spoken words may benefit from goals targeting augmentative communication.
3. **Link to developmental milestones or curricula:** Reference early learning frameworks such SCERTS Model to align goals with age-appropriate developmental expectations. Ensure goals support the child's holistic development (language, cognitive, social, and emotional).
4. **Use SMART Goal Principles (Panol, 2023):**
 - Specific: Focused on one observable skill or behavior
 - Measurable: Progress can be tracked
 - Achievable: Within the child's reach with support
 - Relevant: Tied to functional, meaningful needs
 - Time-bound: A clear timeframe for review
5. **Involve the child and family:** Consult with the family to understand priorities, cultural values, and the child's behavior at home. Where possible, involve the child by observing preferences and motivations.
6. **Plan supports and strategies:** Based on the identified goals, design learning activities and supports that fit the child's needs. This might include visual schedules, sensory accommodations, or social scripts.

7. **Monitor and adjust:** Track progress through ongoing observation and documentation. Adjust goals as the child develops new skills or as needs evolve.

Activities

Activity 4: Goal writing practice (SMART goals)

Using the SMART method helps educators stay organised, focused, and consistent in supporting children with ASD. It ensures that goals are not too vague or too ambitious, which can lead to frustration for both the child and the teacher. Instead, SMART goals promote small, manageable steps that lead to real progress.

SMART goals also make it easier to share progress with families and other professionals. They provide clear evidence of growth, help identify what works best for each child, and support collaborative decision-making. (see Annex: SMART Goals Canva template link).

What Is the SMART Method?

SMART is an acronym that stands for:

S – Specific: The goal should be clear and focused. It should describe exactly what the child is expected to do.

M – Measurable: The goal should include criteria for measuring progress or success. This allows educators to track improvement over time.

A – Achievable: The goal should be realistic, based on the child’s current abilities and support needs.

R – Relevant: The goal should be meaningful and directly related to the child’s development and daily participation in preschool activities.

T – Time-bound: The goal should have a defined timeline or deadline, helping educators stay focused and motivated to work toward the outcome.

Activity 5: Weekly progress tracker

A weekly progress tracker is a simple, structured tool that helps educators document and monitor the progress of children with ASD over the course of a week. Rather than relying on memory or occasional observations, this systematic approach provides a clear picture of how strategies are working and what adjustments may be needed.

How to use the weekly progress tracker

Step 1: Set weekly focus areas

At the beginning of each week, identify 2-3 specific areas to observe. These might include:

- Social interactions during play time
- Response to transitions
- Communication attempts
- Sensory regulation strategies
- Academic skill development

Step 2: Make brief daily notes

Spend just 2-3 minutes at the end of each day documenting:

- What they observed in the focus areas

- Which strategies were used
- The child's response
- Any notable successes or challenges

Step 3: Weekly reflection

At the end of the week, review the daily notes and ask:

- What patterns do they notice?
- Which strategies were most effective?
- What should they continue, modify, or try differently next week?
- What new goals or focus areas should they set?

Step 4: Plan forward

Use the insights gained to inform the following week's planning, adjusting strategies and setting new observation priorities.

Activity 6: Adapting strategies

The preschool educators, face a common challenge: how do they effectively support children with ASD when they have a classroom full of diverse learners and limited time for individual attention? The traditional approach of creating separate, specialised strategies for each child with ASD can feel overwhelming and often impractical in busy classroom environments.

Adapting the curriculum as a way of thinking offers a different approach. Rather than thinking about autism support as something additional they must do, this tool helps them reframe their existing teaching practices through an autism-informed lens (see Annex: Weekly planning Canva template link).

The three-lens approach

1. The predictability lens

Instead of thinking "How do I make this special for the autistic child?" they can ask:

"How can I make this activity more predictable for everyone?"

"What visual supports would help all children understand expectations?"

Example: Adding a visual schedule doesn't just help the child with ASD, but also, it reduces anxiety for all children and helps them transition more smoothly.

2. The sensory-smart lens

Rather than creating separate accommodations, educators can think:

"How can I offer sensory choices that benefit the whole class?"

"What environmental adjustments would create better learning conditions for everyone?"

3. The multiple pathways lens

Instead of "How do I modify this for one child?" they can consider:

"How can I present this information in multiple ways so every child can access it?"

"What are different ways children can show me they understand?"

Example: Offering verbal instructions, pictures, and demonstrations gives every child their best chance to succeed.

The implementation strategy

Start Small, Think Big: Teachers may choose one routine or activity each week to view through these three lenses. This prevents overwhelm while gradually building autism-informed practices into their entire classroom culture.

The "What If" Question: Before any activity, quickly ask themselves: "What if every child in my class needed more structure, more sensory support, or more processing time?" Then they can build those supports into their original plan.

References

Autism Spectrum Disorder: Supporting Children and Youth – Module 3 | ConnectABILITY. (2011). <https://connectability.ca/2011/06/13/supporting-children-with-asd-module-3/>

Deolinda, A (2025). Understanding and utilizing the TEACCH method. Autism Parenting Magazine. <https://www.autismparentingmagazine.com/asd-teacch-method-works/>

Gada, D. (2021, January 17). "Red Flags" in Child Development - Dr. Srinivas Gada. Dr. Srinivas Gada. <https://www.drsgigada.co.uk/red-flags-in-child-development/>

Kline, L. S. (2008). Documentation Panel: The "Making Learning Visible" project. Journal of Early Childhood Teacher Education, 29(1), 70–80. <https://doi.org/10.1080/10901020701878685>

Panol, A. (2023, August 2). SMART IEP Goals. The Autism Community in Action. <https://tacanow.org/family-resources/smart-iep-goals/>

Prizant, B. (n.d.). <https://barryprizant.com/about/scerts/>

Siller, M., Morgan, L., Wedderburn, Q., Fuhrmeister, S., & Rudrabhatla, A. (2021). Inclusive early childhood education for children with and without autism: progress, barriers, and future directions. *Frontiers in Psychiatry*, 12. <https://doi.org/10.3389/fpsy.2021.754648>

Additional resources

[Autism toolkit for primary schools](#)

[100-day kit for young children](#)

[YouTube video: Autism Preschool Classroom: 3 Engagement Strategies That Work!](#)

Annexes

Annex module 1

Observation sheet in natural contexts

Instructions for the observer

- Record only concrete facts, without interpretations or value judgments.- Write down what you see: actions, gestures, voices, sensory reactions.- Avoid expressions such as "it seems", "it looks like" or "I think that"; instead, document what was happening in the child's environment and exact behavior.- An objective description reduces bias and allows the team, family, and outside professionals to clearly understand support needs.

1. Identification data

Name of the person: _____

Informant/observer: _____

Start Time: ____: ____ End Time: ____: ____

Context (mark or describe):

- ☐ Play
- ☐ Corner Snack
- ☐ Time Assembly / Story
- ☐ Circle Playground / Outdoor
- ☐ Activity Diaper Change / Grooming
- ☐ Other: _____

2. Observation Areas

Areas	Description of the conduct	Frequency: 0-never, 1-little, 2-much.	Comments: type of support and intensity
Social Communication	E.g. "When you call him by his name, he does not turn his head; he utters babbles without forming words; Use basic gestures such as pointing or greeting.		
Repetitive gameplay and patterns	E.g. "Line up blocks in a row for several minutes; obsessively spins the wheels of a car; does not alternate between different toys or participate in symbolic play."		
Social participation (joint attention and imitation)	E.g. "He does not follow the adult's gaze towards an object; he does not point out to share interest; look at another child only briefly."		

Sensory behaviors	E.g. "He covers his ears in front of loud music; rubs rough textures with his hands; Seek pressure by sitting on a heavy cushion."		
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3. Additional Observations

- Strengths detected:

- _____
- _____

- Immediate support needs:

- _____
- _____

Annex module 3

Visual agenda

Ready to use templates of visual agenda

Instructions. How to prepare the visual agenda:

- Copy the agenda template** onto an A5-size document (half of A4).
- Insert a photo of the child** inside the square marked for identification (optional but recommended).
- Print and laminate** the document for durability.
- Attach rough (hook) side Velcro** squares inside each of the 4 activity slots.
- On additional laminated A5 sheets, **place horizontal Velcro strips** (also rough side). These will serve as storage for:
 - Pictograms not currently in use
 - Completed activity pictograms

How to use it:

Suggested step-by-step approach to using the agenda effectively:

- Introduce the visual agenda at the start of the activity or day.**
Place the pictograms representing the next 3 or 4 activities. Try to ensure that the last activity shown is something the child finds pleasant or motivating. This helps increase their willingness to follow the routine.
- Ensure the child focuses on the agenda.**
Show it clearly and, if needed, gently guide their attention by taking their finger and helping them point to each pictogram while you name the activity. This supports engagement and comprehension.
- At the end of each activity, use clear closure language.**
Say: "[Name of activity] is finished," and help the child remove the pictogram. Store it on the laminated Velcro sheet designated for completed or unused pictograms. This visual removal reinforces the concept of time passing and tasks being completed.
- Reinforce what comes next.**
After removing the pictogram, refer back to the agenda and clearly indicate the next activity. Again, support the child in pointing to the next icon, reinforcing the sequence.

Tips for use:

- Always **adapt the number of activities shown** to the child's attention span or capacity to process multiple steps.
- Use **clear, consistent verbal cues** to accompany each step.
- Allow the child to participate in setting up the agenda when possible, as this can increase motivation and understanding.
- You can **combine this agenda with timers** or auditory signals to help mark transitions.

Visual agenda. Type 1:

AGENDA

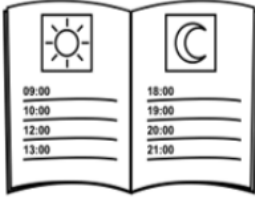


PHOTO OF
THE CHILD

1	2	3	4

Visual agenda. Type 2:

1	2

Pictograms of daily routines

Instructions for preparing the pictograms:

1. **Copy the pictogram list** onto an A4-size document.
2. **Print and cut** each pictogram individually. **Laminate** the sheet for durability, and then **cut out each pictogram again** after laminating.
3. **Attach soft-side (loop) Velcro** squares to the back of each pictogram. Make sure to **leave a small plastic border** around each pictogram when cutting after laminating. This helps protect the edges and ensures long-term durability.

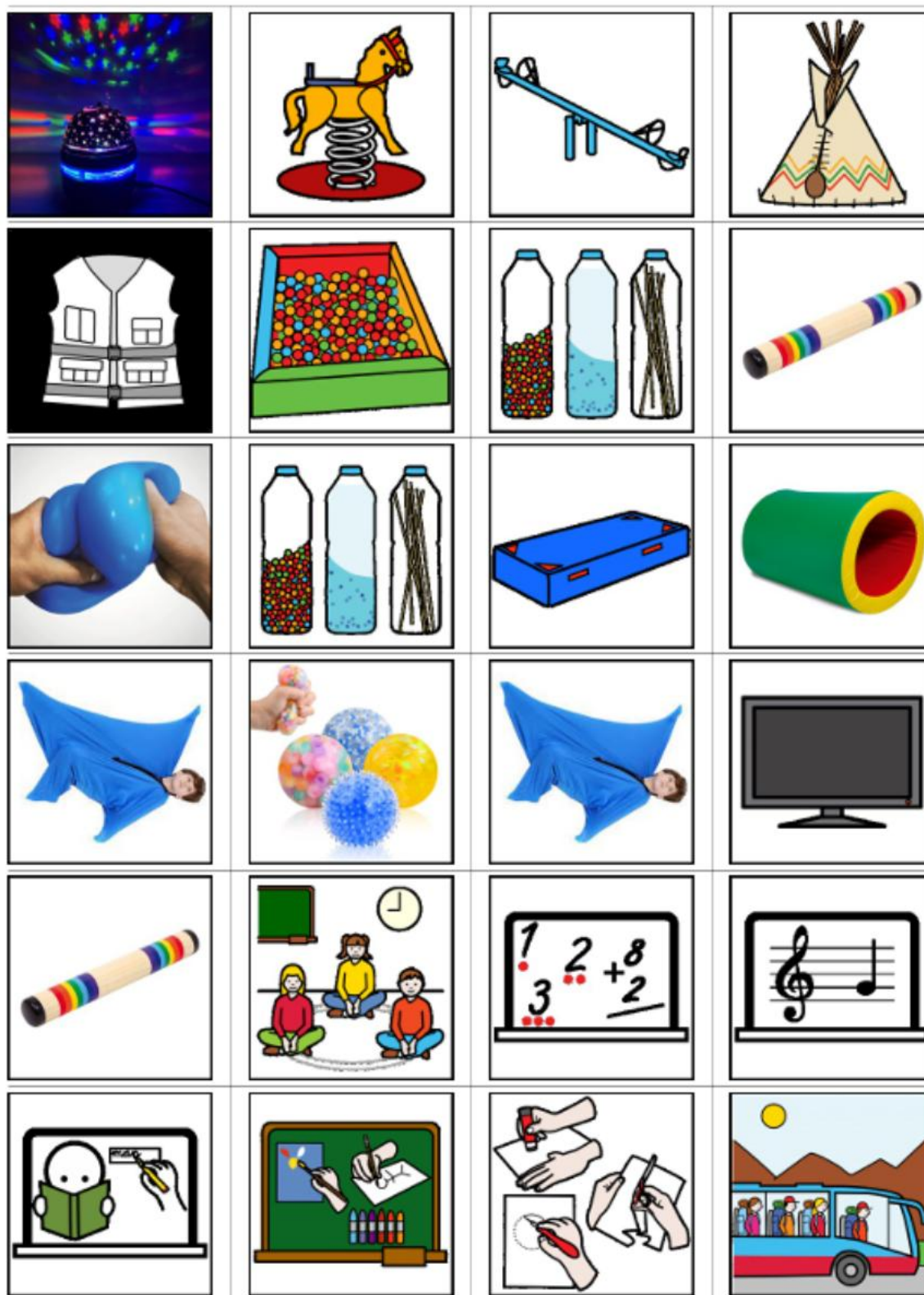
Note: The professional should decide the appropriate **size** of each pictogram and whether to **include the written label** (name of the activity) below the image, depending on the needs and reading level of each child.











“Practicing Sign-Based Instructions” activity materials

Illustrated cards

Included below: Sample **illustrated cards** with pictograms that can be used during the activity.

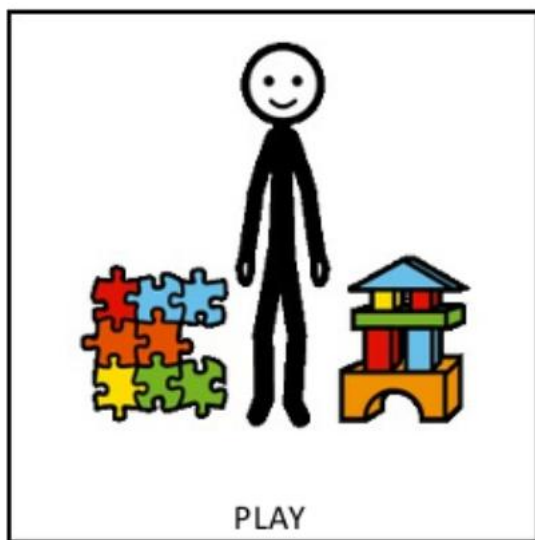
Recommendations for use:

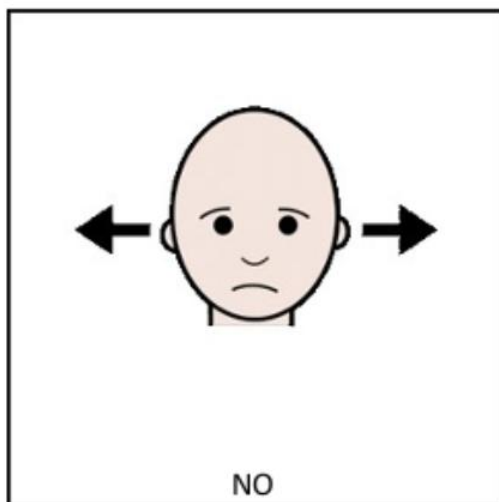
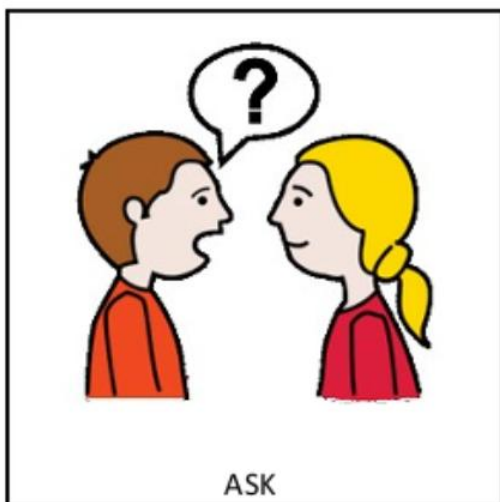
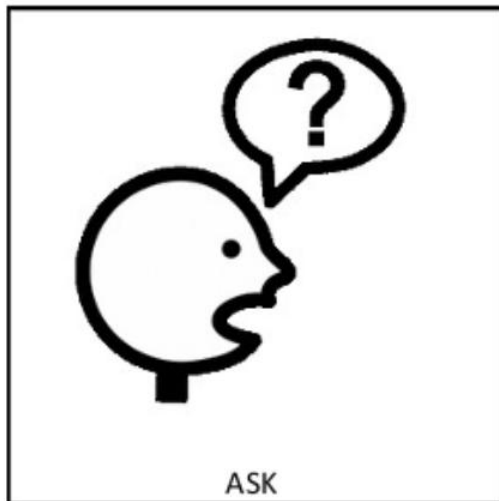
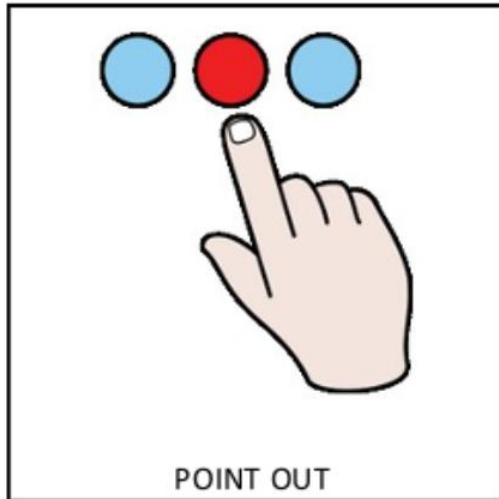
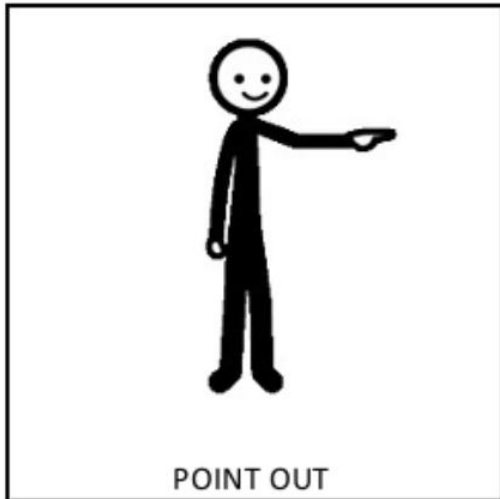
- Each card should be paired with a **recognized sign**:
 - Preferably from a **standard sign language**, or
 - A **structured communication system** like **Benson Schaeffer**.
- Signs should be **consistent and recognizable**, allowing children to:
 - Use them in various **social contexts** beyond the classroom.
 - Communicate with a wider range of people.

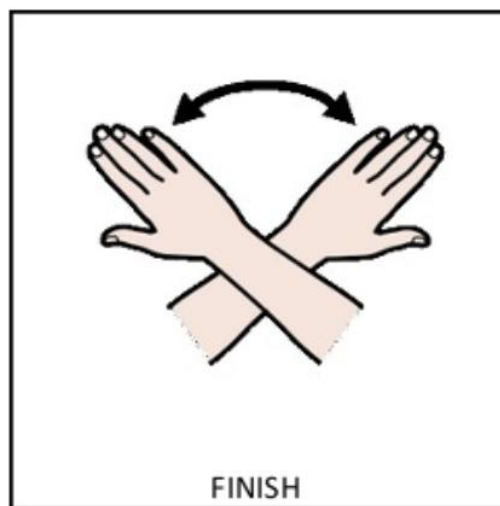
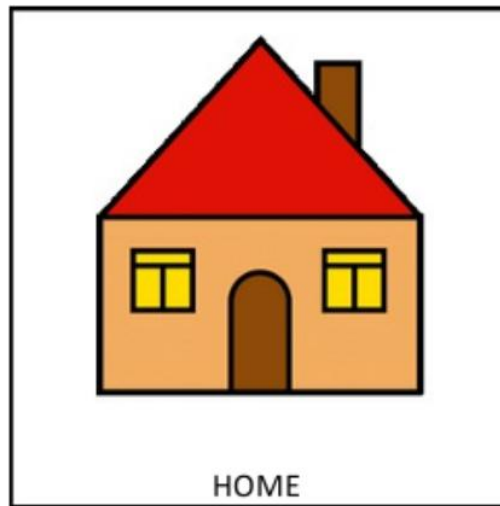
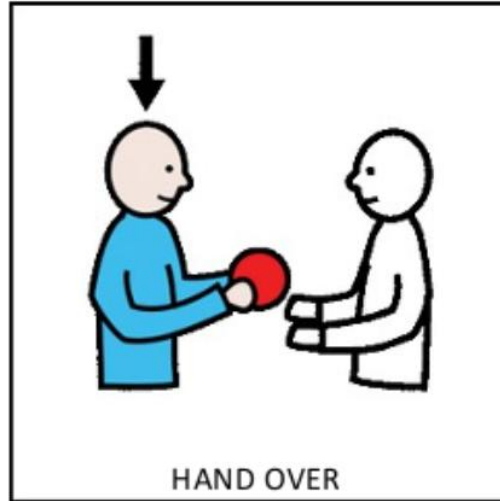
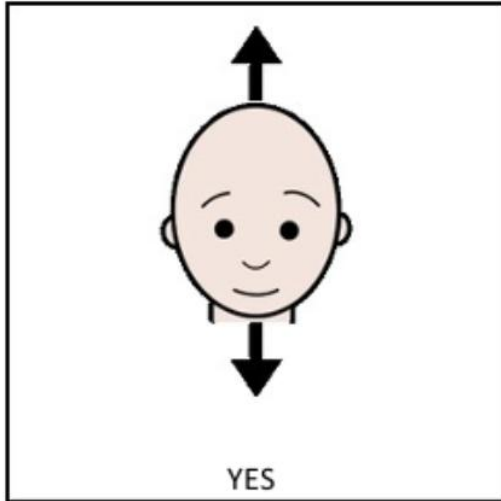
Teacher guidelines:

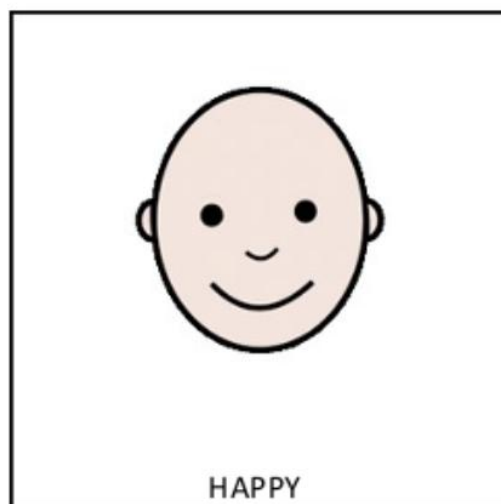
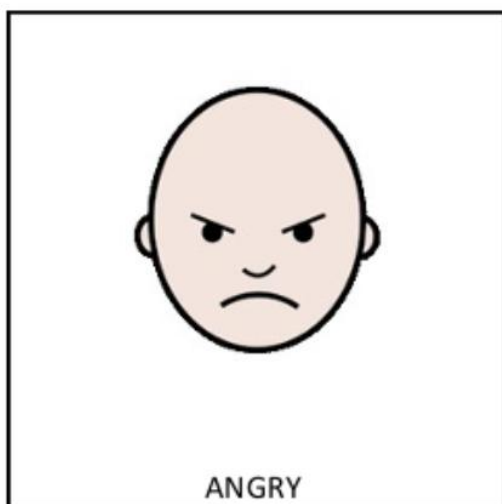
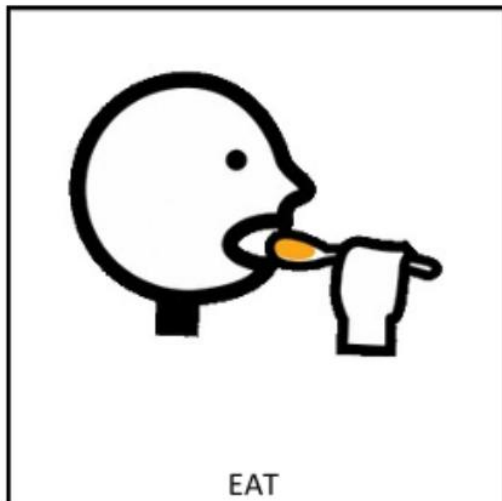
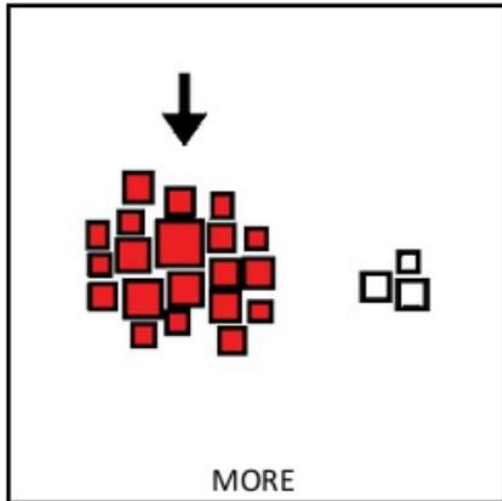
- Ensure gestures are modeled **clearly and repeatedly**.
- Use **visual and physical support** when needed.
- Reinforce all communicative attempts with **positive feedback**.

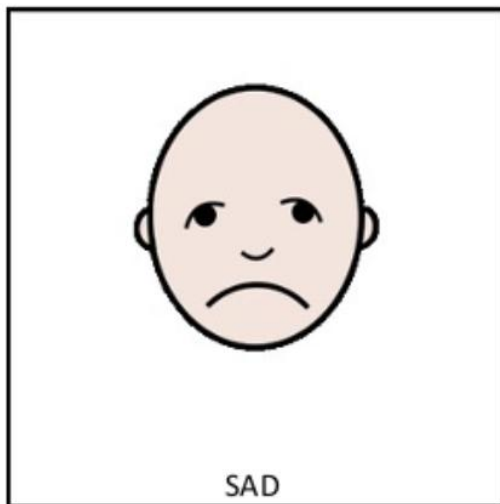
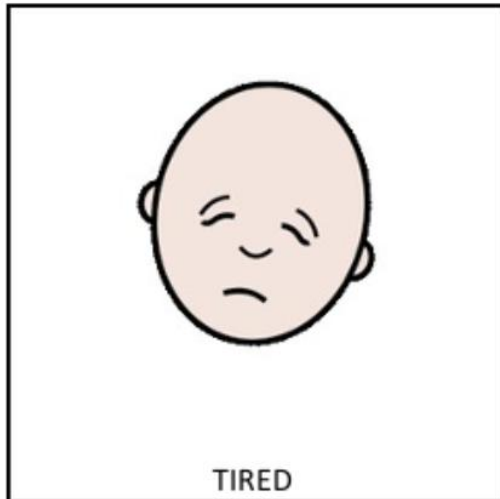
Adapt presentation according to the **individual needs** of the students.











Visual checklist for the teacher

Below is a suggested list of key words and actions that can be modeled during the activity and throughout daily routines. These gestures should be used consistently and paired with signs and visual support to promote understanding and communication for all children.

- ☐ Angry
- ☐ Ask
- ☐ Drink
- ☐ Eat
- ☐ Finish
- ☐ Greet
- ☐ Hand over
- ☐ Happy
- ☐ Help
- ☐ Home
- ☐ More
- ☐ Need to go to the toilet / need to pee
- ☐ Play
- ☐ Point out
- ☐ Raise hand
- ☐ Sad
- ☐ Saying “no”
- ☐ Saying “yes”
- ☐ Sick
- ☐ Sleep / need to sleep
- ☐ Stop
- ☐ Tired
- ☐ Work

Annex module 4

ABC Chart

Date and time	Antecedent	Behaviour	Consequence	Possible Reason

Activity 1 checklist

Interests and Preferred Activities

Do they gravitate towards a particular book, game, toy or activity?

Do they have a preference for a specific kind of play style? (e.g., movement, solo play, art)

Are there any activities/topics they show a huge interest in?

Staff/People/Comfort

Who do they seek out or want to engage with?

Who are they most comfortable with?

Communication

What is their preferred method of communication?

What are the most effective communication strategies?

Sensory Needs

What situations seem to be overstimulating?

What situations seem to be more calming?

Are there any specific preferences or needs related to classroom environment (sound, lights, movement, smells)

Are there any observed sensory seeking or avoidant behaviours?

GREEN: What does 'regulate' look like?

What are they doing when they are comfortable and engaged?

Are there any particular activities or routines that support this?

AMBER: Early signs

What are some of the changes that might indicate increased stress? (e.g., pacing, facial changes, withdrawing, restlessness)

Has anything been effective at bringing the student back to GREEN? What are they and use specifics.

BLUE: What has helped?

What does the student need to help them regulate again? (e.g., quiet, sensory tool, reassurance)

What are the signs the student is ready to reengage?

Tools

Are there any tools that are particularly effective? (e.g., fidget toy, headphones, tablet)

Are there specific types of praise, rewards, or support that are particularly effective?

Family Communication

What does the family say about any/all of the above?

Activity 2: template

Question	Answer
When and where does the behaviour occur?	
Who is present?	
What happens just before the behaviour? <i>Tip!</i> <i>Include environmental, emotional or sensory factors (e.g. noise, frustration, task difficulty).</i>	
What does the child get or avoid by doing the behaviour?	
How do professionals respond to these behaviours (extinction, redirection to another activity, repeat the demand)? <i>Tip!</i> <i>Adult reactions can unintentionally reinforce certain behaviours.</i>	
What would the child be doing if they weren't engaging in the behaviour? <i>Tip!</i> <i>This helps identify what replacement or alternative behaviour to teach (e.g. asking for help, requesting a break)</i>	

Activity 3: template

GREEN		AMBER		RED		BLUE	
Student	Staff	Student	Staff	Student	Staff	Student	Staff
What do I do to show I am calm and regulated?	What does the staff do to help support this phase?	What do I do to show that I am becoming agitated or dysregulated?	What does the staff do to help?	What do I do to show that the behaviour has escalated?	What should the staff do to manage and deescalate?	What do I do to show that I am returning to regulation?	What should the staff do to further support?
<i>e.g., I am smiling and engaging,</i>	<i>e.g., Talk and interact, explain</i>	<i>e.g., Take shoes off, apply pressure</i>	<i>e.g., Offer regulation tools, offer a</i>	<i>e.g., Hitting self or others,</i>	<i>e.g., Stay calm, give space, minimize</i>	<i>e.g., Behaviour has reduced,</i>	<i>e.g., Offer time in an</i>

<i>can follow instructions easily, follow activities</i>	<i>processes and warn of transitions using visual cues</i>	<i>on my body, bite my lip</i>	<i>different activity/ break, use agreed upon symbols</i>	<i>biting, running around and yelling</i>	<i>words of instructions</i>	<i>still showing slight agitation</i>	<i>activity that helps regulate, quiet corner</i>

Annex module 6

Template links, checklists, and downloadable tools

[Developmental milestone checklist](#)

[SMART GOALS Canva template](#)

[Weekly planning Canva template](#)

Observation log- Printable template

Child Name:	
Age:	
Date:	
Observer:	
Start Time:	
End Time:	

Time	Activity/context	Observed behavior	Environmental factors	Additional notes

COMMUNICATION & SOCIAL INTERACTION	BEHAVIORAL PATTERNS
• Made appropriate eye contact • Used verbal communication • Used gestures/nonverbal communication • Initiated social interaction • Responded to social initiations • Engaged in parallel play • Engaged in cooperative play • Demonstrated turn-taking	• Showed repetitive behaviors • Displayed sensory-seeking behaviors • Showed sensory avoidance • Had difficulty with transitions • Followed established routines • Demonstrated self-regulation • Showed appropriate emotional responses • Maintained focus/attention

MOTOR SKILLS & COORDINATION	LEARNING & COGNITION
• Used age-appropriate gross motor skills • Demonstrated fine motor control • Showed good coordination • Maintained balance appropriately • Demonstrated motor planning skills • Used bilateral coordination	• Followed simple instructions • Engaged in problem-solving • Imitated actions/behaviors • Showed symbolic/pretend play • Understood cause and effect • Demonstrated memory skills • Showed categorizing abilities

OBSERVATION SUMMARY & INSIGHTS

Key Strengths Observed:

Describe positive behaviors, skills, and strengths demonstrated during this observation period...

Areas of Concern or Challenge:

Note any behaviors or skills that may need additional support or intervention...

Patterns Noticed:

Identify any recurring behaviors, triggers, or patterns observed...

Child profile worksheet- Printable template

Basic information

Child's Name	Preferred Nickname	
Date of Birth	Gender	
Primary Language	Other Languages	
Diagnosis Date	Diagnosing Professional	
Current Classroom	Profile Completed by	
Date Completed	Next Review Date	

Family information

Primary Caregiver(s)	
Siblings (ages)	
Cultural Background	

STRENGTHS & INTERESTS

What does this child do really well?
Special Interests & Preferred Activities:

Learning Style Strengths:

• Visual learner (pictures, charts) • Auditory learner (songs, verbal) • Kinesthetic learner (movement, touch)	• Auditory learner (songs, verbal) • Learns well with routines • Hands-on learning
--	--

Motivators & Preferred Rewards:

COMMUNICATION PROFILE

Expressive Communication:	Receptive Communication:
• Uses verbal speech • Uses sign language • Uses picture cards/PECS • Uses gestures/body language • Uses written words/letters	• Understands verbal instructions • Follows visual cues • Responds to gestures • Needs repetition • Needs processing time • Best with simple language

SENSORY PROFILE

Sensory Seeking Behaviors:	Sensory Avoidance/Sensitivities:
• Seeks movement/spinning • Seeks deep pressure • Seeks different textures • Seeks loud sounds/music • Seeks visual stimulation • Mouths objects	• Sensitive to noise • Sensitive to bright lights • Avoids certain textures • Sensitive to touch • Sensitive to smells • Sensitive to tastes

Specific Sensory Triggers to Avoid:

SOCIAL & EMOTIONAL PROFILE

Social Strengths:	Social Challenges:
• Shares toys/materials • Takes turns • Makes eye contact • Responds to name • Shows affection • Engages in parallel play	• Difficulty with peer interaction • Prefers adult interaction • Misses social cues • Struggles in group settings • Emotional regulation challenges • Rigid thinking patterns

How does this child express different emotions?

Effective Strategies for Social/Emotional Support:

--

BEHAVIORAL PATTERNS & SUPPORT NEEDS

Repetitive Behaviors or Routines:

--

Transition Needs:

- Needs advance warning
- Benefits from visual schedule
- Uses transition object
- Needs extra time
- Needs adult support
- Prefers consistent person

DAILY LIVING & SELF-CARE SKILLS

Eating & Nutrition:	Toileting:	Sleep & Rest:
• Eats independently • Needs assistance • Has specific food preferences • Has texture issues	• Fully toilet trained • In training process • Needs reminders • Uses diapers	• Naps regularly • Participates in quiet rest • Has sleep difficulties • Needs comfort items