

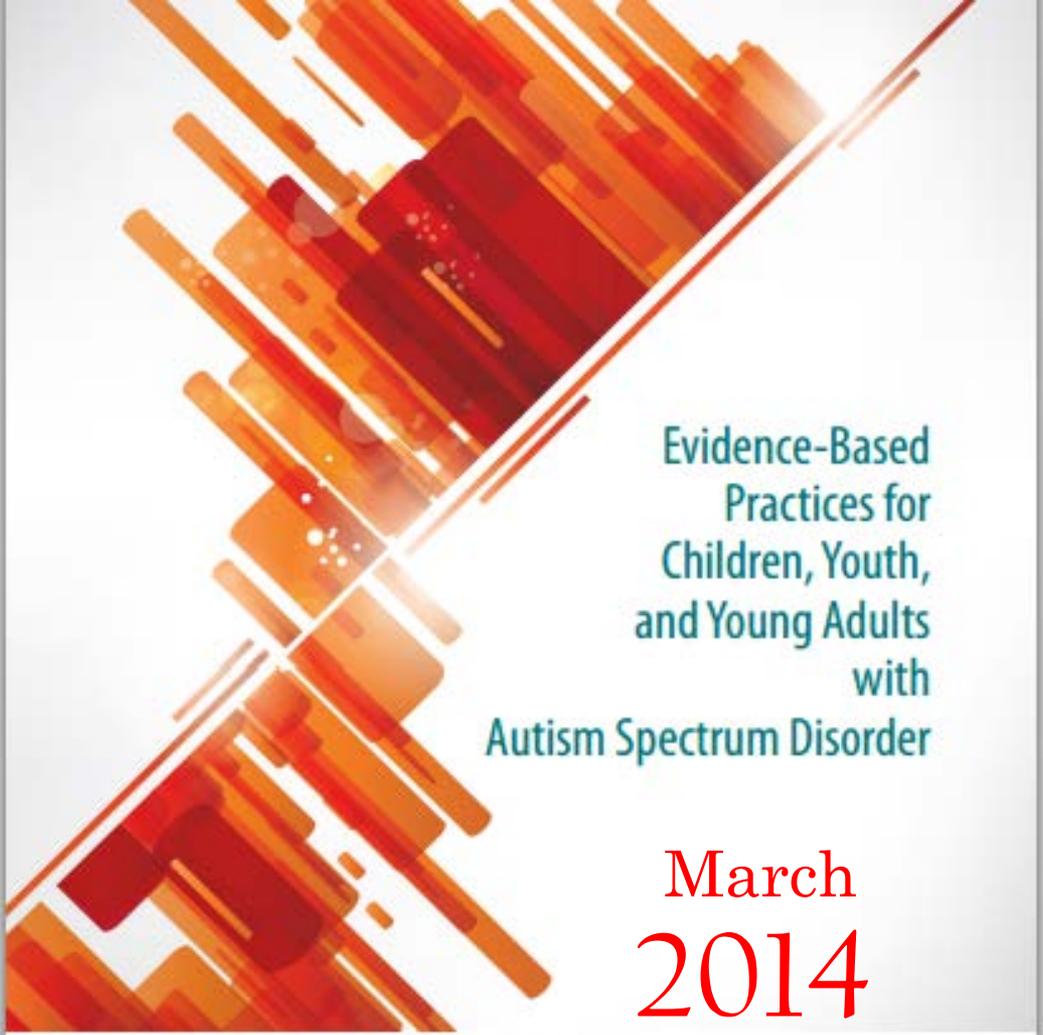


CAPTAIN

California Autism Professional Training
and Information Network

www.captain.ca.gov/handouts.html





Evidence-Based
Practices for
Children, Youth,
and Young Adults
with
Autism Spectrum Disorder

March
2014

Connie Wong, Samuel L. Odom,
Kara Hume, Ann W. Cox, Angel Fettig,
Suzanne Kucharczyk, Matthew E. Brock,
Joshua B. Plavnick, Veronica P. Fleury, and Tia R. Schultz

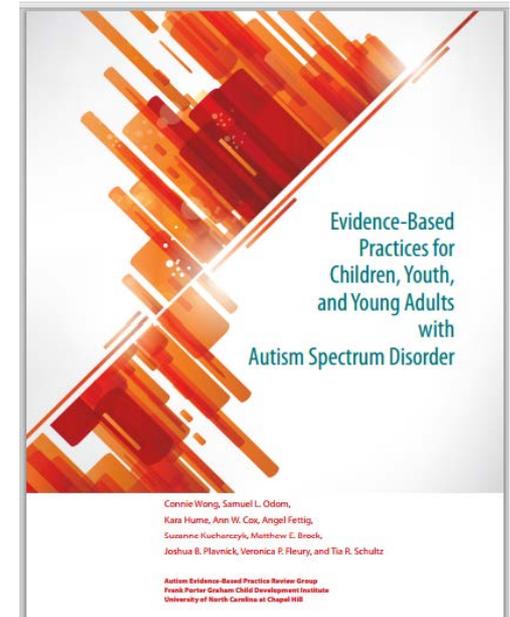
Autism Evidence-Based Practice Review Group
Frank Porter Graham Child Development Institute
University of North Carolina at Chapel Hill

<http://autismpdc.fpg.unc.edu>
captain.ca.gov

New NPDC Report Findings!

(Literature review 1997–2011)

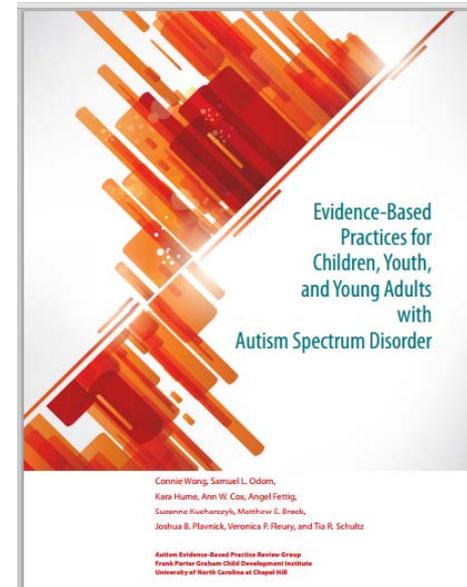
- 27 EBPs as compared to 24 EBPs identified in the previous review
- Six new EBP categories:
 1. Cognitive Behavior Interventions
 2. Exercise
 3. Modeling
 4. Scripting
 5. Structured play groups
 6. Technology-Aided Instruction and Intervention



New NPDC Report Findings!

Five of the six new EBP categories are entirely new:

1. Cognitive Behavior Interventions
2. Exercise
3. Modeling
4. Scripting
5. Structured play groups



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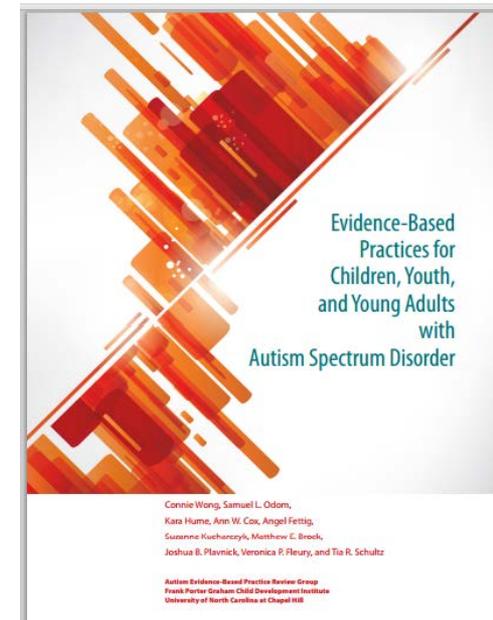
Autism Evidence-Based Practice Review Group
Frank Porter Graham Child Development Institute
University of North Carolina at Chapel Hill

New NPDC Report Findings!

One of the six new EBP categories subsumes EBPs from previous report:

6) Technology-Aided Instruction and Intervention:

- Computer Aided Instruction
- Speech Generating Devices/VOCA



New NPDC Report Findings!

Structured Work Systems:

- Not included in the 2014 set of EBPs
 - Why?
 - New methodological criteria eliminated some studies
 - Note: empirical support underlying structured work systems is highlighted in the list of practices
- “Other Focused Intervention Practices Having Some Support” elsewhere in this report

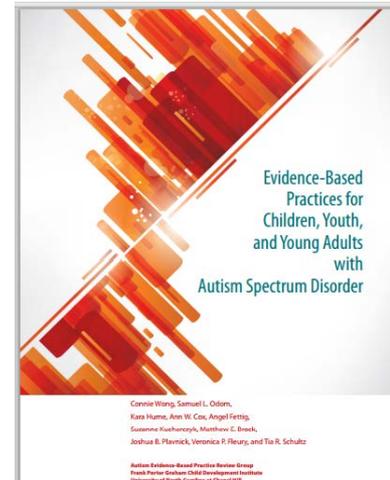


Table 11. Focused Intervention Practices from Previous and Current Review.

| Previous Review: Evidence-Based Practices from 1997–2007 | Current Review: Evidence-Based Practices from 1990–2011 | Reason for Change |
|---|--|---|
| Antecedent-Based Interventions | Antecedent-Based Interventions | |
| | Cognitive Behavior Intervention | More accumulated evidence |
| Computer Aided Instruction | | Expanded conceptualization (see Technology-Aided Instruction and Intervention) |
| Differential Reinforcement of Other Behaviors | Differential Reinforcement of Other Behaviors | |
| Discrete Trial Teaching | Discrete Trial Teaching | |
| | Exercise | More accumulated evidence |
| Extinction | Extinction | |
| Functional Behavior Assessment | Functional Behavior Assessment | |
| Functional Communication Training | Functional Communication Training | |
| | Modeling | More accumulated evidence |
| Naturalistic Intervention | Naturalistic Intervention | |
| Parent-Implemented Intervention | Parent-Implemented Intervention | |
| PECS | PECS | |
| Peer-Mediated Instruction and Intervention | Peer-Mediated Instruction and Intervention | |
| Pivotal Response Training | Pivotal Response Training | |
| Prompting | Prompting | |
| Reinforcement | Reinforcement | |
| Response Interruption/Redirection | Response Interruption/Redirection | |
| | Scripting | More accumulated evidence |
| Self-Management | Self-Management | |
| Social Narrative | Social Narrative | |
| Speech Generating Devices/VOCA | | Expanded conceptualization (see Technology-Aided Instruction and Intervention) |
| Social Skills Training | Social Skills Training | |
| | Structured Play Group | More accumulated evidence |
| Structured Work Systems | | More stringent criteria reduced previous evidence |
| Task Analysis | Task Analysis | |
| | Technology-Aided Instruction and Intervention | Expanded conceptualization (Incorporated previous Computer Aided Instruction and Speech Generating Devices) |
| Time Delay | Time Delay | |
| Video Modeling | Video Modeling | |
| Visual Support | Visual Support | |

NEW FACT SHEETS FOR EACH OF THE 27 EBPs

Video Modeling Fact Sheet

Brief Description

Video modeling (VM) is a method of instruction that uses video recording and display equipment to provide a visual model of the targeted behavior or skill. The model is shown to the learner, who then has an opportunity to perform the target behavior, either in the moment or at a later point in time. Types of video modeling include basic video modeling, video self-modeling, point-of-view video modeling, and video prompting. *Basic video modeling* is the most common and involves recording someone besides the learner engaging in the target behavior or skill. *Video self-modeling* is used to record the learner displaying the target skill or behavior and may involve editing to remove adult prompts. *Point-of-view video modeling* is when the target behavior or skill is recorded from the perspective of what the learner will see when he or she performs the response. *Video prompting* involves breaking the behavior into steps and recording each step with incorporated pauses during which the learner may view and then attempt a step before viewing and attempting subsequent steps. Video prompting can be implemented with other, self, or point-of-view models. Video modeling strategies have been used in isolation and also in conjunction with other intervention components such as prompting and reinforcement strategies.

Qualifying Evidence

VM meets evidence-based criteria with 1 group design and 31 single case design studies.

Ages

According to the evidence-based studies, this intervention has been effective for toddlers (0-2 years) to young adults (19-22) years with ASD.

Outcomes

VM can be used effectively to address social, communication, behavior, joint attention, play, cognitive, school-readiness, academic, motor, adaptive, and vocational skills.

Research Studies Providing Evidence

Akmanoglu, N., & Tekin-Iftar, E. (2011). Teaching children with autism how to respond to the lures of strangers. *Autism, 15*(2), 205-222. doi: 10.1177/1362361309352180

Allen, K. D., Wallace, D. P., Greene, D. J., Bowen, S. L., & Burke, R. V. (2010). Community-based vocational instruction using videotaped modeling for young adults with autism spectrum disorders performing in air-inflated mascots. *Focus on Autism and Other Developmental Disabilities, 25*(3), 186-192. doi: 10.1177/1088357610377318

- Definition of the intervention
- Age range of participants
- Type of outcomes it has generated
- Citations for the specific articles that provide the evidence for the efficacy of the practice

Welcome

CAPTAIN is a multiagency network developed to support the understanding and use of Evidence Based Practices for individuals affected by Autism Spectrum Disorder across the state.

CAPTAIN is dedicated to the following:

- Providing statewide access to trainings and resources in Evidence Based Practices (EBPs) that are culturally sensitive, family centered, cost effective, and competency based.
- Establishing supports that are locally based with trainer of trainers at the local level.
- Emphasizing how to use EBPs to assist students in accessing the California Common Core State Standards and developing College and Career Readiness.
- Providing ongoing training, support, and technical assistance to implement EBPs and ensure fidelity of implementation.
- Supporting the development of local multiagency collaborations to support consistent use of EBPs.
- Providing an annual training summit and a forum for collegial communication and support to CAPTAIN Cadre members.
- Providing web based access to materials and resources that are vetted and align with current EBPs.
- Providing information and outreach to other interested stakeholders and provider groups who could benefit from learning more about EBPs (E.g. Professional Organizations, Higher Education, Self Advocates, Allied Health Providers)



Quick Links

[National Professional Development Center On Autism Spectrum Disorders](#)

[National Autism Center](#)

[Autism Internet Modules](#)

[CAPTAIN Summit Resources](#)

[Autism Fact Sheet](#)

[English/Spanish](#)

[Other Languages](#)

[Ask a Specialist - ASD](#)

[CAPTAIN Cadre](#)

[CAPTAIN Leadership](#)

[Act Early](#)

[ASD Toddler Initiative](#)

[ADEPT](#)

CAPTAIN Partners

[Diagnostic Centers, CDE](#)

[Family Resource Centers Network of California](#)

[Center for Excellence for Developmental Disabilities at UC Davis MIND Institute](#)

[USC University Center for Excellence in Developmental Disabilities \(USC UCEDD\)](#)

[California Department of Developmental Services](#)

CAPTAIN Summits
[by invitation only]

North: October 16-17, 2014

South: October 2-3, 2014



27 EBPs Matrix

Available on the CAPTAIN Website

English and Spanish!

www.captain.ca.gov

The screenshot shows the CAPTAIN website interface. At the top left is the CAPTAIN logo: a map of California with stars and the text "CAPTAIN California Autism Professional Training and Information Network". To the right are navigation buttons for "Home", "About", and "News".

The main content area is divided into two columns. The left column is titled "CAPTAIN Summit Resources" and contains a table of resources:

| Thumbnail | Resource Title |
|-----------|---|
| | NEW Coaching Log - NPDC - CAPTAIN |
| | NEW What are EBPs CAPTAIN Resource - September 2014 |
| | EBP Chart with Definitions |
| | Tips for Early Care and Education Providers of Children with ASD |
| | CAPTAIN: Training and Confidence Survey |
| | Goal Attainment Scaling Procedures |
| | Goal Attainment Scale Form |
| | EBPs for Young Children Under Age 5 with ASD by NPDC - October 2013 |
| | Activity Matrix Blank Form |

The right column is titled "Quick Links" and lists various resources:

- National Professional Development Center On Autism Spectrum Disorders
- National Autism Center
- Autism Internet Modules
- CAPTAIN Summit Resources** (indicated by a red arrow)
- Autism Fact Sheet
 - English/Spanish
 - Other Languages
- Ask a Specialist - ASD
- CAPTAIN Cadre
- CAPTAIN Leadership
- Act Early
- ASD Toddler Initiative
- ADEPT

Below "Quick Links" is a section titled "CAPTAIN Partners" listing:

- Diagnostic Centers, CDE
- Family Resource Centers Network of California
- Center for Excellence for Developmental Disabilities at UC Davis MIND Institute
- USC University Center for Excellence in Developmental Disabilities (USC UCEDD)
- California Department of Developmental Services

| Evidence Based Practice and Abbreviated Definition | Evidence by Developmental Domain and Age (years) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|------|-------|-------|------|-------|------|------|-------|-------------|------|-------|------|------|-------|------|------|-------|--------------|------|-------|-------|------|-------|-------|------|-------|--------|------|-------|------|------|-------|---------------|--|--|
| | Social | | | Comm. | | | Beh. | | | Joint Attn. | | | Play | | | Cog. | | | School Ready | | | Acad. | | | Motor | | | Adapt. | | | Voc. | | | Mental Health | | |
| | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | | | |
| Antecedent Based Intervention (ABI): Arrangement of events preceding an interfering behavior to prevent or reduce occurrence | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cognitive Behavioral Intervention (CBI): Instruction on cognitive processes leading to changes in behavior | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Differential Reinforcement of Alternative, Incompatible, or Other Behavior (DRA/I/O): Consequences provided for desired behaviors that reduce the occurrence of interfering behaviors | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Discrete Trial Teaching (DTT): Instructional process of repeated trials, consisting of instruction, response, and consequence | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Exercise (ECE): Antecedent based physical exertion to reduce interfering behaviors or increase appropriate behaviors | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extinction (EXT): Removal of existing reinforcement in order to reduce an interfering behavior | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Functional Behavior Assessment (FBA): Systematic protocol designed to identify contingencies that maintain an interfering behavior | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Function Communication Training (FCT): Replacement of an interfering behavior with communication that accomplishes the same function | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Modeling (MD): Demonstration of a desired behavior that results in skill acquisition through learner imitation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Naturalistic Intervention (NI): Intervention strategies that occur with the learner's typical settings and routines | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Parent-Implemented Intervention (PII): Parent delivered intervention learned through a structured parent training program | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Peer-Mediated Instruction and Intervention (PMII): Typically developing peers are taught strategies that increase social learning opportunities in natural environments | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Picture Exchange Communication System (PECS): Systematic 6 phase protocol teaching the exchange of pictures between communicative partners | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

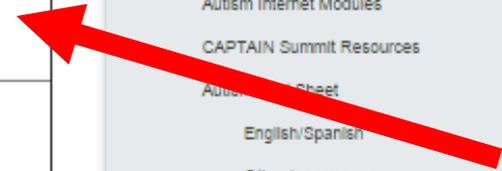
| Evidence Based Practice and Abbreviated Definition | Evidence by Developmental Domain and Age (years) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|--------|-------|-------|--------|-------|--------|--------|-------|-------------|--------|-------|-------|--------|-------|-------|--------|-------|--------------|--------|-------|--------|--------|-------|-------|--------|-------|--------|--------|-------|--------|------|-------|---------------|--|--|
| | Social | | | Comm. | | | Beh. | | | Joint Attn. | | | Play | | | Cog. | | | School Ready | | | Acad. | | | Motor | | | Adapt. | | | Voc. | | | Mental Health | | |
| | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | 0-5 | 6-14 | 15-22 | | | |
| Pivotal Response Training (PRT): Pivotal learning variables guide intervention implemented in settings that build on learner interests and initiative | Green | Yellow | | Green | Yellow | | | | | | | | Green | Yellow | | | | | | | | | | | | | | | | | | | | | | |
| Prompting (PP): Verbal, gestural, or physical assistance that supports skill acquisition | | | | | | | | Yellow | Blue | | Yellow | | | | | Green | Yellow | Blue | Green | Yellow | Blue | | | | Green | Yellow | Blue | | | | | | | | | |
| Reinforcement (R+): A response occurring after a behavior resulting in an increased likelihood of future reoccurrence of the behavior | | | Blue | | Blue | | Green | | | | | | | Blue | | | Yellow | | Green | | | Green | | | | | | | Blue | | | | | | | |
| Response Interruption/Redirection (RIR): Use of prompts or distracters during an interfering behavior that diverts attention and reduces the behavior | | | | Green | | | | Blue | | | | | Green | Yellow | | | | | | | | Green | Yellow | | | | | | | | | | | | | |
| Scripting (SC): A verbal or written model of a skill or situation that is practiced before use in context | Green | Yellow | Blue | Green | Yellow | Blue | | | | Green | Yellow | | | | | Green | Yellow | | | | | | | | | | | | Yellow | | | | | | | |
| Self Management (SM): Instruction on discrimination between appropriate and inappropriate behaviors and accurate self-monitoring and rewarding of behaviors | | | | | | | | Blue | | | | | | | | Green | Yellow | Blue | Green | | | | | | | | | | Blue | | | | | | | |
| Social Narratives (SN): Descriptions of social situations with examples of appropriate responding | Green | Yellow | | Green | Yellow | | Green | Yellow | Blue | Green | Yellow | | Green | Yellow | | | | | Yellow | | | | | | Green | Yellow | | | | | | | | | | |
| Social Skills Training (SST): Direct instruction on social skills with rehearsal and feedback to increase positive peer interaction. | Green | Yellow | Blue | Green | Yellow | | Green | | | | | | Green | Yellow | Blue | | Yellow | | | | | | | | | | | | | | | | | | | |
| Structured Play Group (SPG): Adult lead small group activities that include typically developing peers and use prompting to support performance | | | | | | | | | | | | | | | | | Yellow | | | Yellow | | | | | | | | | | | | | | | | |
| Task Analysis (TA): The process of breaking a skill into small steps that are systematically chained together | | | | | | | | | | | | | | | | | | | | Yellow | | | Yellow | | | | | | | | | | | | | |
| Technology-Aided Instruction and Intervention (TAII): Intervention using technology as a critical feature | Green | Yellow | Blue | Green | Yellow | Blue | Yellow | Blue | | | Blue | | Green | | | Green | Yellow | Blue | Green | Yellow | Blue | | | Blue | | Blue | | | Blue | | Yellow | Blue | | | | |
| Time Delay (TD): Delaying a prompt during a practice opportunity in order to fade the use of prompts | Green | | | | Blue | Green | Yellow | | | Green | Yellow | | Green | Yellow | | | | | Green | | | | | | Green | | | | | | | | | | | |
| Video Modeling (VM): A video recording of a targeted skill that is viewed to assist in learning | | | Blue | | | | | | | Green | Yellow | Blue | | | | | | | Green | | | | | | Green | Yellow | Blue | | Yellow | Blue | | | | | | |
| Visual Support (VS): Visual display that supports independent skill use. | Green | Yellow | Blue | Green | Yellow | | Green | | | | | | Green | | | Green | Yellow | | | | | Yellow | | | | | | | | | | | | | | |

Updated CAPTAIN EBP TRAINING



CAPTAIN Summit Resources

| | |
|---|---|
|  | NEW Coaching Log - NPDC - CAPTAIN  |
|  | NEW What are EBPs CAPTAIN Resource - September 2014  |
|  | EBP Chart with Definitions  |
|  | Tips for Early Care and Education Providers of Children with ASD  |
|  | CAPTAIN: Training and Confidence Survey  |
|  | Goal Attainment Scaling Procedures  |
|  | Goal Attainment Scale Form  |
|  | EBPs for Young Children Under Age 5 with ASD by NPDC - October 2013  |
|  | Activity Matrix Blank Form  |



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- [National Autism Center](#)
- [Autism Internet Modules](#)
- [CAPTAIN Summit Resources](#)
- [Autism Sheet](#)
- [English/Spanish](#)
- [Other Languages](#)
- [Ask a Specialist - ASD](#)
- [CAPTAIN Cadre](#)
- [CAPTAIN Leadership](#)
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- [ASD Toddler Initiative](#)
- [ADEPT](#)

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- [California Department of Developmental Services](#)

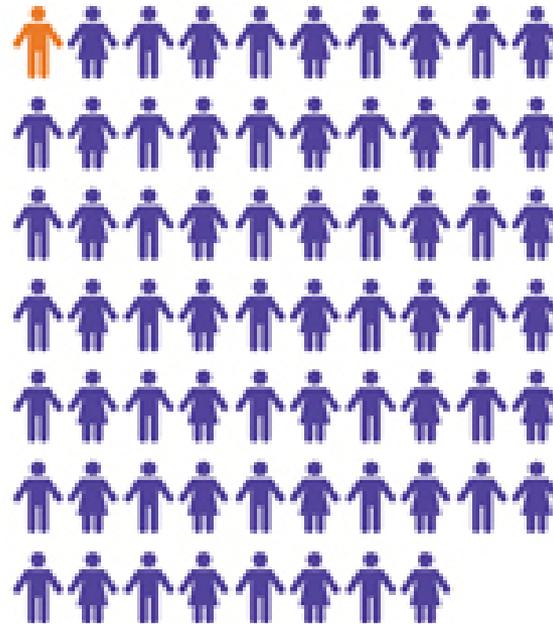
New NPDC-ASD Early Start Website!!!

<http://asdtoddler.fpg.unc.edu>

www.captain.ca.gov

The screenshot shows a web browser window displaying the ASD toddler initiative website. The browser's address bar shows the URL asdtoddler.fpg.unc.edu. The website header includes the logo for the ASD toddler initiative, along with logos for The University of North Carolina at Chapel Hill and Autism Speaks. Navigation links for "Learning Modules", "About", and "Resources" are visible, along with a search bar. The main content area features a large banner image of two hands holding a small white flower, with the text "Promoting evidence-based practices EBPS for young children, ages birth to 3, with Autism Spectrum Disorder (ASD)". Below the banner are three blue buttons: "EBP Evidence-based Practices", "Early Intervention Professional Development & Coaching", and "Guide to ASD Toddler Learning Modules". A footer section contains a paragraph of text: "The Autism Spectrum Disorders (ASD) Toddler Initiative will expand on the work conducted by the National Professional Development Center on Autism Spectrum Disorders (NPDC-ASD) funded by the Office of Special Education Programs. The ASD Toddler Initiative will develop new materials and modify existing processes to support the use of evidence-based practices for young children (birth-3) and for their families." The Windows taskbar at the bottom shows the system clock as 11:13 PM on 3/29/2014.

NUMBER OF CHILDREN IDENTIFIED WITH ASD



1 in 68



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

March 27, 2014

CDC Released New Statistics

Estimates 1 in 68 children has been identified with ASD
(30% increase since 2012)



Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™

- ASD is almost five times more common among boys than girls: 1 in 42 boys versus 1 in 189 girls
- White children are more likely to be identified as having ASD than are black or Hispanic children
- Levels of intellectual ability vary greatly among children with autism, ranging from severe intellectual challenges to average or above average intellectual ability. The study found that **46% of children identified with ASD have average or above average intellectual ability (an IQ above 85)** compared to a third of children a decade ago
- Children with ASD are **diagnosed after age 4** (53 months), even though ASD can be diagnosed as early as age 2

www.cdc.gov/autism

Prevalence of Autism Spectrum Disorders — Autism and Developmental Disabilities Monitoring Network Report

March 2014

Intellectual Ability

CDC March 2014 Findings



Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™

- 31% of children with ASD were classified as having IQ scores in the range of intellectual disability (IQ \leq 70)
- 23% in the borderline range (IQ = 71–85)
- 46% in the average or above average range of intellectual ability (IQ $>$ 85) compared to a third of children a decade ago

What's Going On?

CDC says:

“Consistent with previous reports from the ADDM Network, findings from the 2010 surveillance year were marked by significant variations in ASD prevalence by geographic area, sex, race/ethnicity, and level of intellectual ability.

The extent to which this variation might be attributable to diagnostic practices, under-recognition of ASD symptoms in some racial/ethnic groups, socioeconomic disparities in access to services, and regional differences in clinical or school-based practices that might influence the findings in this report is unclear.”



How many students ages 3-22 with ASD are in California schools?

CA Department of Special Education Special Education Enrollment by Age & Disability

December 2009-2010 Reporting Cycle=59,592

December 2010-2011 Reporting Cycle=65,815

December 2011-2012 Reporting Cycle=71,702 [10.5%]

December 2012-2013 Reporting Cycle=78,624 [11.3%]

December 2013-14 Reporting Cycle

84,713 Students

[12% of Special Education Students in CA]



Source: www.cde.ca.gov/ds



Special Education Enrollment by Age and Disability Statewide Report

| Age | Intellectual Disability (MR) | Hard of Hearing (HH) | Deaf (DEAF) | Speech or Language Impairment (SLI) | Visual Impairment (VI) | Emotional Disturbance (ED) | Orthopedic Impairment (OI) | Other Health Impairment (OHI) | Specific Learning Disability (SLD) | Deaf-Blindness (DB) | Multiple Disability (MD) | Autism (AUT) | Traumatic Brain Injury (TBI) | Total |
|-----|------------------------------|----------------------|-------------|-------------------------------------|------------------------|----------------------------|----------------------------|-------------------------------|------------------------------------|---------------------|--------------------------|--------------|------------------------------|-------|
| 0 | 90 | 344 | 63 | 30 | 30 | 0 | 100 | 189 | * | * | 30 | 0 | * | |
| 1 | 183 | 570 | 107 | 232 | 102 | 0 | 210 | 425 | 0 | * | 121 | * | * | |
| 2 | 222 | 561 | 109 | 947 | 127 | 0 | 210 | 453 | * | * | 113 | 48 | * | |
| 3 | 975 | 358 | 137 | 11,243 | 95 | * | 486 | 777 | 117 | * | 212 | 4,027 | 22 | |
| 4 | 1,352 | 388 | 149 | 17,042 | 123 | 11 | 527 | 924 | 243 | * | 286 | 5,368 | 33 | |
| 5 | 1,771 | 394 | 175 | 20,039 | 167 | 84 | 580 | 1,191 | 567 | * | 305 | 6,126 | 35 | |
| 6 | 2,044 | 494 | 197 | 21,899 | 198 | 263 | 662 | 1,998 | 2,677 | * | 358 | 6,318 | 54 | |
| 7 | 2,069 | 565 | 215 | 20,345 | 236 | 522 | 787 | 3,139 | 7,247 | * | 348 | 6,281 | 71 | |
| 8 | 2,290 | 664 | 194 | 17,868 | 229 | 835 | 764 | 4,249 | 13,782 | * | 297 | 6,271 | 76 | |
| 9 | 2,371 | 691 | 167 | 14,439 | 229 | 1,068 | 682 | 5,253 | 20,312 | * | 331 | 6,217 | 79 | |
| 10 | 2,490 | 670 | 215 | 11,367 | 271 | 1,396 | 718 | 5,867 | 24,688 | 11 | 369 | 6,289 | 97 | |
| 11 | 2,485 | 668 | 201 | 7,835 | 269 | 1,609 | 741 | 6,124 | 26,523 | * | 318 | 5,669 | 94 | |
| 12 | 2,565 | 634 | 214 | 5,293 | 240 | 1,770 | 734 | 6,187 | 28,222 | * | 314 | 5,335 | 125 | |
| 13 | 2,603 | 674 | 217 | 3,869 | 265 | 2,164 | 796 | 6,336 | 29,024 | * | 356 | 5,034 | 124 | |
| 14 | 2,698 | 596 | 211 | 2,576 | 249 | 2,509 | 764 | 6,268 | 28,151 | * | 340 | 4,568 | 121 | |
| 15 | 2,757 | 612 | 249 | 1,933 | 266 | 2,939 | 790 | 6,108 | 28,301 | * | 326 | 4,339 | 157 | |
| 16 | 2,738 | 579 | 245 | 1,608 | 277 | 3,304 | 775 | 6,083 | 27,334 | * | 340 | 3,994 | 178 | |
| 17 | 2,857 | 542 | 253 | 1,383 | 271 | 3,441 | 774 | 5,831 | 27,234 | * | 325 | 3,466 | 192 | |
| 18 | 2,507 | 249 | 155 | 572 | 157 | 1,692 | 580 | 2,553 | 13,782 | 11 | 314 | 2,019 | 102 | |
| 19 | 2,213 | 73 | 103 | 105 | 90 | 498 | 425 | 563 | 2,603 | * | 286 | 1,239 | 45 | |
| 20 | 2,085 | 28 | 68 | 44 | 60 | 194 | 384 | 237 | 717 | * | 247 | 988 | 40 | |
| 21 | 1,882 | 39 | 47 | 24 | 52 | 122 | 337 | 179 | 323 | * | 234 | 978 | 35 | |
| 22 | 326 | * | * | * | * | 17 | 50 | 22 | 52 | * | 38 | 139 | * | |

* Denotes values under 11

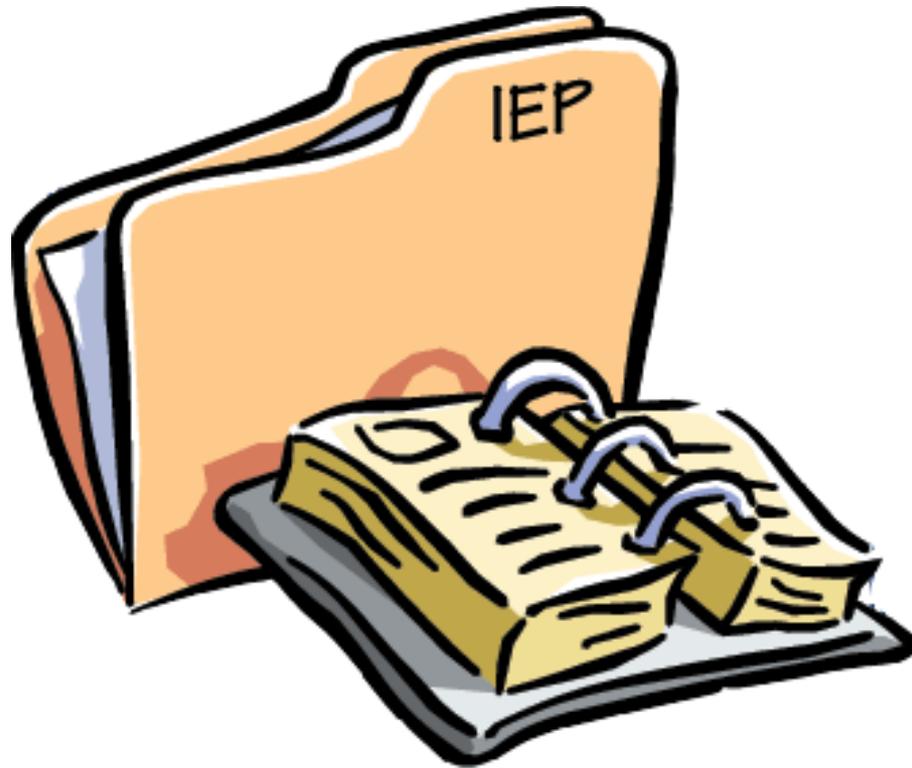
705,308

↑
 Autism=
 84,713

Source: <http://dq.cde.ca.gov/dataquest/>

Change in CA Eligibility for Autism

July 1, 2014



Key Changes in Autism Eligibility

The new regulation:

- deletes the term "autistic-like behaviors"
- adds the term "characteristics often associated with autism"



Key Changes in Autism Eligibility (cont'd)

The new list of "characteristics often associated with autism" replaces the former seven "autistic-like behaviors" but is highly similar:

- engagement in repetitive activities and stereotyped movements;
- resistance to environmental change or change in daily routines; and
- unusual responses to sensory experiences.



Why the changes?



CDE explained that aligning California's criteria with federal requirements:

- removes "confusion among educators when state and federal eligibility requirements for determining whether a student has autism are inconsistent"
- helps "ensure that students with autism are appropriately identified, and receive the appropriate services for their needs."

Change in Autism Eligibility
California Code of Regulations
§ 3030. Eligibility Criteria.
5 CA ADC § 3030

Prior to July 1, 2014

July 1, 2014

3030 (g) A pupil exhibits any combination of the following autistic-like behaviors, to include but not limited to:

- (1) An inability to use oral language for appropriate communication.**
- (2) A history of extreme withdrawal or relating to people inappropriately and continued impairment in social interaction from infancy through early childhood.**
- (3) An obsession to maintain sameness.**
- (4) Extreme preoccupation with objects or inappropriate use of objects, or both.**
- (5) Extreme resistance to controls.**
- (6) Displays peculiar motoric mannerisms and motility patterns.**
- (7) Self-stimulating, ritualistic behavior.**

(1) Autism means a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three, and adversely affecting a child's educational performance. Other **characteristics often associated** with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences.

(A) Autism does not apply if a child's educational performance is adversely affected primarily because the child has an emotional disturbance, as defined in subdivision (b)(4) of this section.

(B) A child who manifests the characteristics of autism after age three could be identified as having autism if the criteria in subdivision (b)(1) of this section are satisfied.

< Term >

Barclays Official California Code of Regulations [Currentness](#)

Title 5. Education

Division 1. California Department of Education

Chapter 3. Individuals with Exceptional Needs

Subchapter 1. Special Education

Article 3.1. Individuals with Exceptional Needs

New!
July 1, 2014

5 CCR § 3030

§ 3030. Eligibility Criteria.

(a) A child shall qualify as an individual with exceptional needs, pursuant to Education Code section 56026, if the results of the assessment as required by Education Code section 56320 demonstrate that the degree of the child's impairment as described in subdivisions (b)(1) through (b)(13) requires special education in one or more of the program options authorized by Education Code section 56361. The decision as to whether or not the assessment results demonstrate that the degree of the child's impairment requires special education shall be made by the IEP team, including personnel in accordance with Education Code section 56341(b). The IEP team shall take into account all the relevant material which is available on the child. No single score or product of scores shall be used as the sole criterion for the decision of the IEP team as to the child's eligibility for special education.

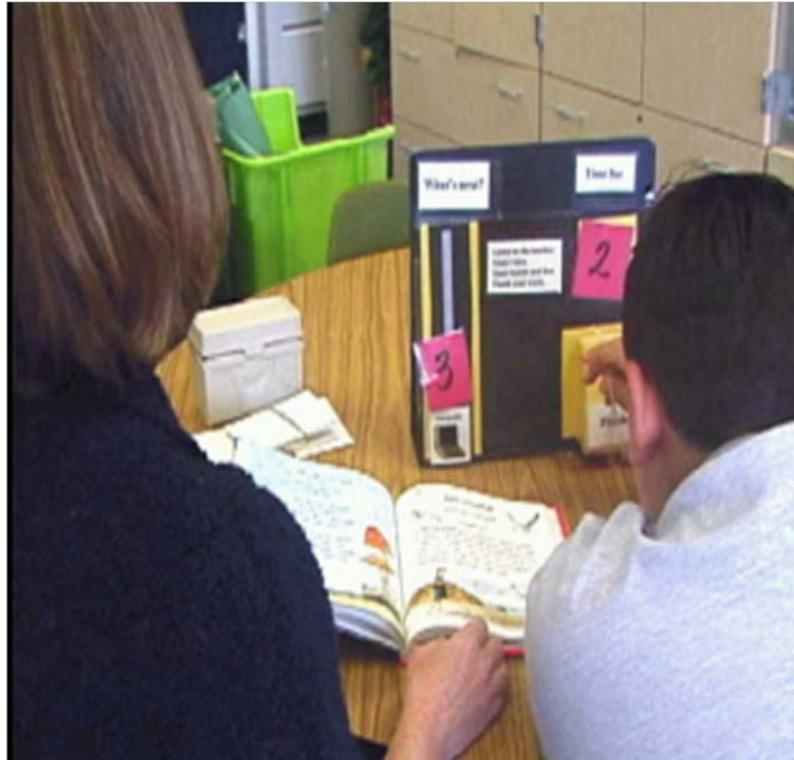
(b) The disability terms used in defining an individual with exceptional needs are as follows:

(1) Autism means a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three, and adversely affecting a child's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences.

(A) Autism does not apply if a child's educational performance is adversely affected primarily because the child has an emotional disturbance, as defined in subdivision (b)(4) of this section.

(B) A child who manifests the characteristics of autism after age three could be identified as having autism if the criteria in subdivision (b)(1) of this section are satisfied.

Who are we trying to impact through CAPTAIN?



Who are we trying to impact through CAPTAIN?

- **Educators**

- Special Education Teachers, Paras, DIS Providers (SLPs, Ots, Psychs)

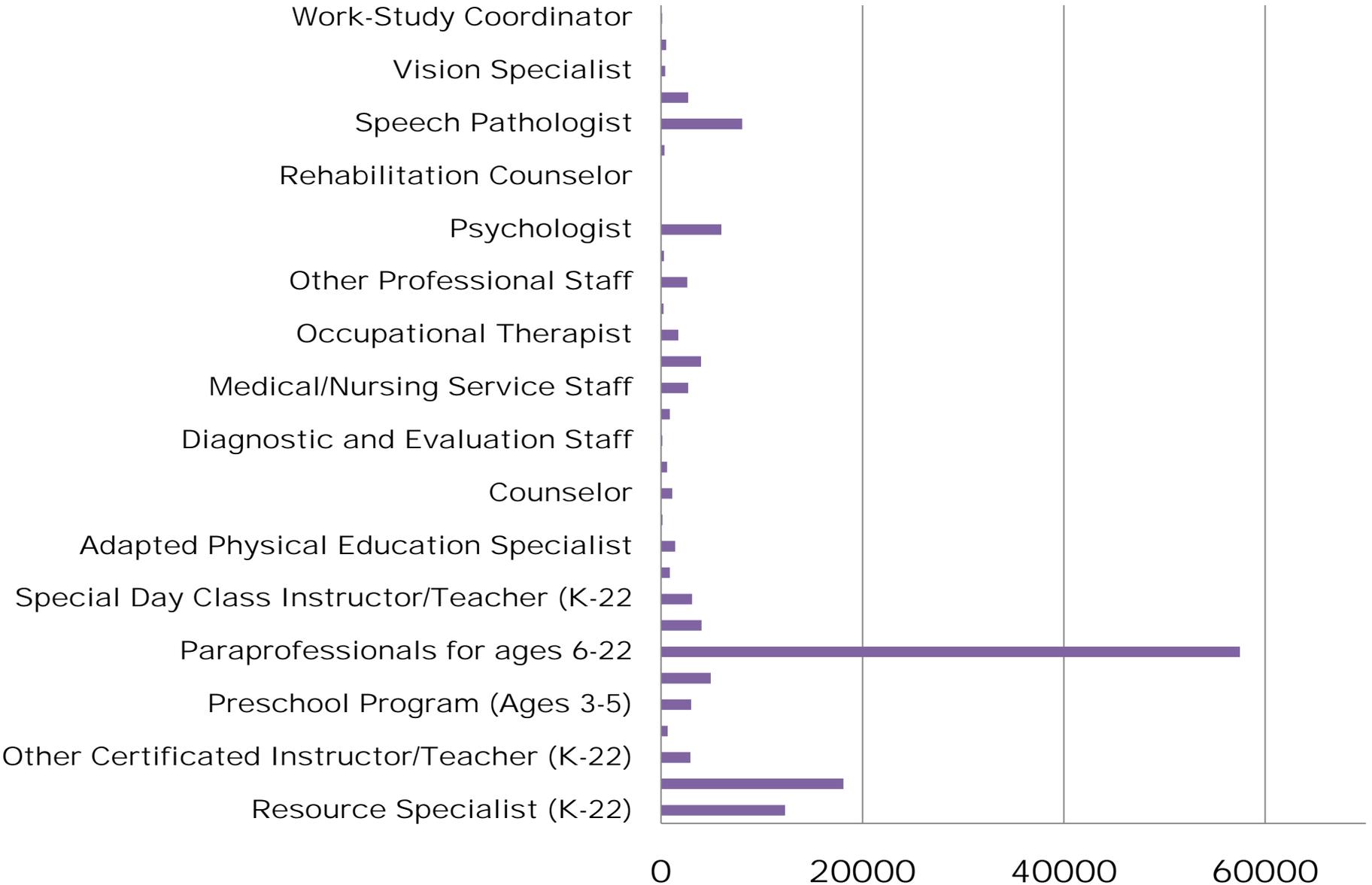
- **Families**

- **Regional Center Service Coordinators**
(about 3770 of them!)

- **Vendors**

- Respite/IHSS, In Home ABA, Infant Program Providers, ILS, SLS, Vocational Trainers, Day Programs

53, 842 Special Educators in CA Schools 2013-2014



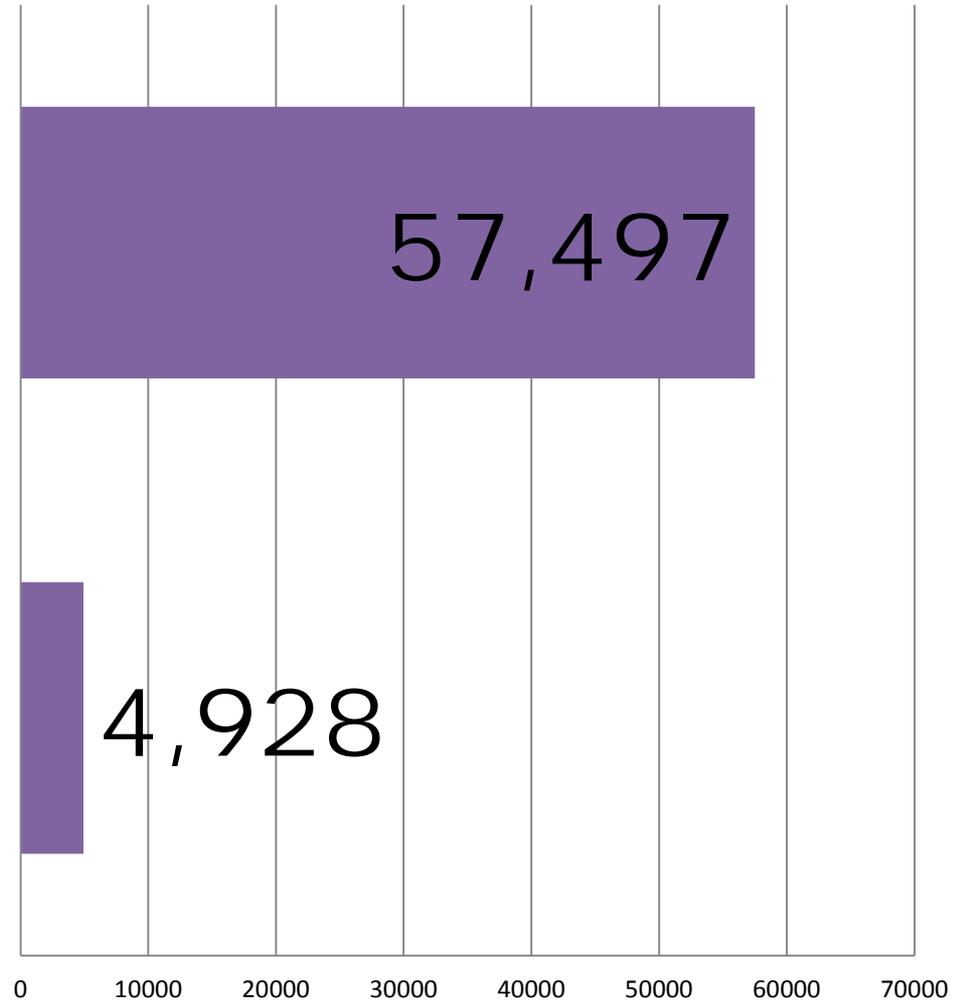
Paraprofessionals in CA Schools 2013-2014

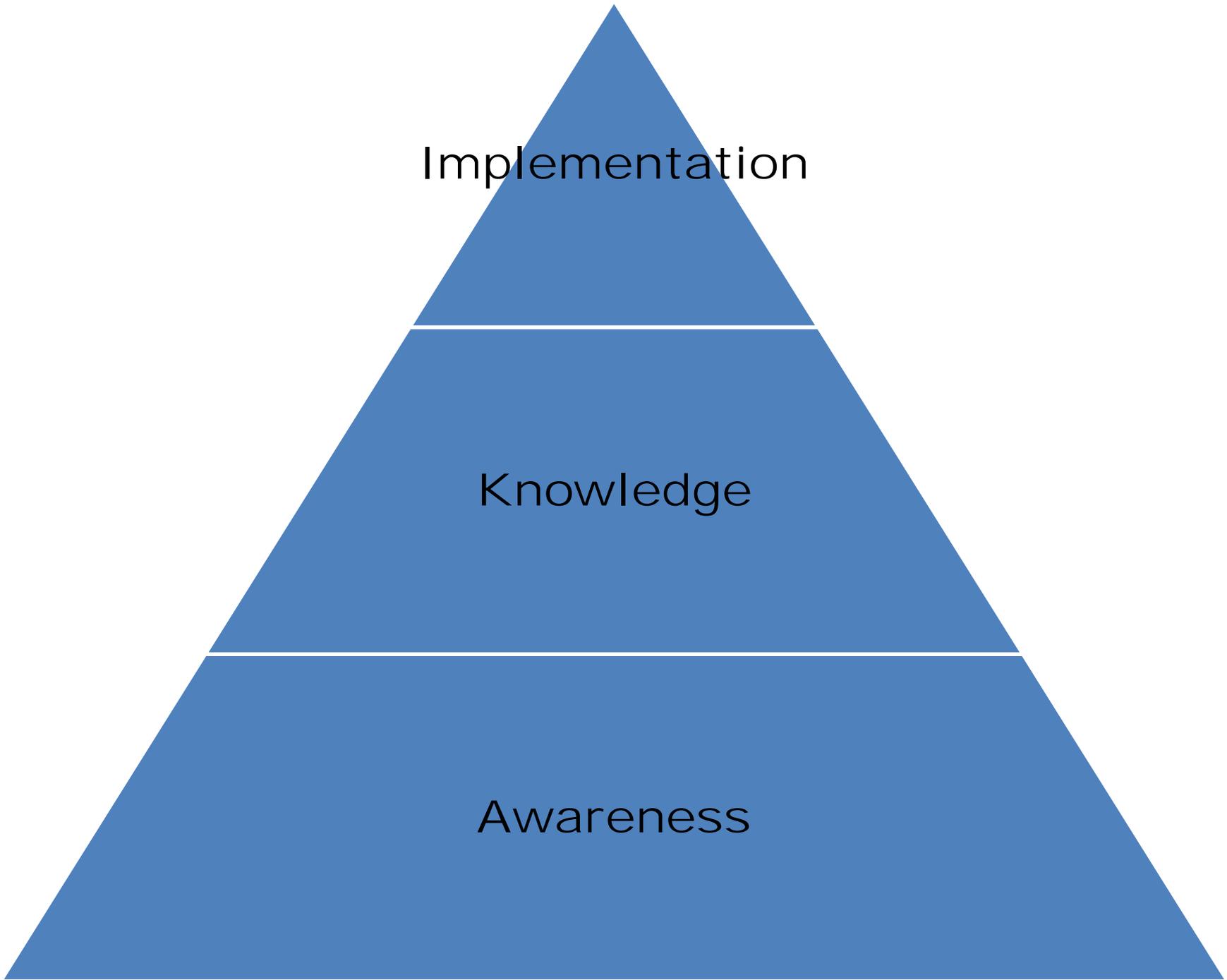
Paraprofessionals for
ages 6-22

57,497

Paraprofessionals for
ages 3-5

4,928





Implementation

Knowledge

Awareness

October

National Bullying Prevention Month

- Students with ASD are bullied more often than students with disabilities.
- Studies indicated that of the students who are bullied, 63% are on the autism spectrum



CDC Information on Bullying

www.cdc.gov/violenceprevention/youthviolence/bullyingresearch/index.html?s_cid=tw_inj1007

CDC Home
CDC Centers for Disease Control and Prevention
CDC 24/7: Saving Lives. Protecting People.™

A-Z Index **A B C D E F G H I J K L M N O P Q R S T U V W X Y Z #**

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- Youth Violence
 - Definitions
 - Data Sources
 - Risk and Protective Factors
 - Consequences
 - Prevention Strategies

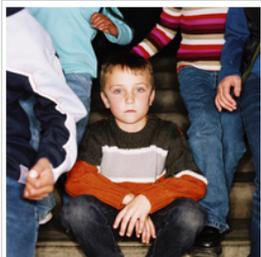
[Violence Prevention](#) > [Youth Violence](#)

[Recommend](#) [Tweet](#) [Share](#)

Featured Topic: Bullying Research

Youth Bullying: What Does the Research Say?

Bullying is one type of youth violence that threatens young people's well-being. Bullying can result in physical injuries, social and emotional difficulties, and academic problems. The harmful effects of bullying are frequently felt by others, including friends and families, and can hurt the overall health and safety of schools, neighborhoods, and society.



The Centers for Disease Control and Prevention (CDC) defines bullying as any **unwanted aggressive behavior(s)** by another youth or group of youths who are not siblings or current dating partners that involves an **observed or perceived power imbalance and is repeated multiple times or is highly likely to be repeated**. Bullying may inflict **harm or distress** on the targeted youth including physical, psychological, social, or educational harm.¹ A young person can be a perpetrator, a victim, or both (also known as "bully/victim").

Bullying can occur in-person and through technology. Electronic aggression or

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Understanding Evidence LEARN MORE CDC

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http://www.cdc.gov/violenceprevention/youthviolence/bullyingresearch/index.html?s_cid=tw_inj1007

Definition of Bullying

- "The Centers for Disease Control and Prevention (CDC) defines **bullying** as:

"Any unwanted aggressive behavior(s) by another youth or group of youths who are not siblings or current dating partners that involves an observed or perceived power imbalance and is repeated multiple times or is highly likely to be repeated."

- **Note the phrase:** "...or is highly likely to be repeated"
So, if there is a power imbalance and aggressive actions, even one episode could rise to the level of "bullying."

The controversy over number of acts necessary for bullying is now inclusive of single acts if it is determined it may be repeated.

Definition of Harassment

The OCR (Office of Civil Rights) in the "Dear Colleague Letters" on Harassment, specifically on disability harassment in the 2013 letter, informs us that actions taken by individuals combined with the creation of a negative environment for the student, can rise to the level of harassment if the impacted individual is a member of a protected class.

These include: disability, gender, sexual orientation, ethnicity, national origin, religion and race.

<https://www2.ed.gov/policy/speced/guid/idea/memos/dcltrs/bullyingdcl-8-20-13.pdf>

Bullying and Harassment Documentation Forms

PENT.CA.GOV

- Harassment/Bullying Investigation and Intervention Planning Form:

<http://www.pent.ca.gov/frm/harassbullyform.docx>

- Harassment (Only) Investigation and Intervention Planning Form:

<http://www.pent.ca.gov/frm/harassform.docx>

New Law Allows Counseling Referrals for School Bullying Victims and Witnesses

SEPTEMBER 2014

Assembly Bill 1455

Expands the Ed Code's anti-bullying provisions to allow school officials to refer *bullying victims, as well as those who witness or are affected by bullying, to counseling and other mental health services.*

New law authorizes the superintendent, principal or the principal's designee to refer "a victim of, witness to, or other pupil affected by" an act of bullying to the school counselor, school psychologist, social worker, child welfare attendance personnel, school nurse, or other school support service personnel for case management, counseling, and participation in a restorative justice program, as appropriate.

AB 1455 applies to acts of bullying that occur on or after January 1, 2015

Bullying Resources

- U.S. Department of Health and Human Services/U.S. Department of Education
 - www.stopbullying.gov
- Special Needs Anti-Bullying Toolkit
 - <http://specialneeds.thebullyproject.com/toolkit>
- California Department of Education
 - www.cde.ca.gov/ls/ss/se/bullyres.asp
- Centers for Disease Control and Prevention
 - www.cdc.gov/violenceprevention
- Positive Behavioral Interventions and Supports
 - www.pbis.org
- Review 360 - Behavior Matters
 - <http://thebehaviorco.com/>

Bullying Resources

- Striving To Reduce Youth Violence Everywhere (STRYVE)
 - www.safeyouth.gov
- KnowBullying (free app) Substance Abuse and Mental Health Services Administration
 - iTunes or <http://store.samhsa.gov/apps/bullying>
- Edutopia Bullying Prevention Resources
 - <http://www.edutopia.org/blogs/tag/bullying-prevention>
- Pacer's National Bullying Prevention Center
 - <http://www.pacer.org/bullying/>
- Center for Safe Schools
 - <http://www.safeschools.info/bullying-prevention>
- Welcoming Schools
 - <http://www.welcomingschools.org/what-can-we-do-bias-bullying-and-bystanders/>

Behavioral Intervention Stakeholder Work Group 2013-2014

<http://www.cde.ca.gov/sp/se/ac/bip.asp>

- FAQs for Parents Behavioral Intervention:

<http://www.cde.ca.gov/sp/se/ac/bippmntgrdnfaq.asp>

- FAQs for LEAs Behavior Intervention:

<http://www.cde.ca.gov/sp/se/ac/bipleafaq.asp>

- Syllabus of Guidance on Behavior-Related Issues:

<http://www.cde.ca.gov/sp/se/ac/syllabusofguidance.asp>

- Peer-Reviewed Research:

<http://www.cde.ca.gov/sp/se/ac/peerrvwdrsrch.asp>

Behavioral Intervention Stakeholder Work Group 2013-2014

<http://www.cde.ca.gov/sp/se/ac/bip.asp>

- Requirements for Behavioral Emergency Reports:

<http://www.cde.ca.gov/sp/se/ac/bipltr031414.asp>

- Requirements for Personnel Involved in Behavioral Intervention:

<http://www.cde.ca.gov/sp/se/ac/bipltr032714.asp>

- Local Educational Agency and Individualized Education Program Team Responses to the Behavior of Students with Disabilities (Revised):

<http://www.cde.ca.gov/sp/se/ac/bipltr031314.asp>

- The Special Edge Newsletter Summer 2014:

http://www.calstat.org/publications/pdfs/2014_SummerEdge_english.pdf

Peer-Reviewed Research:

<http://www.cde.ca.gov/sp/se/ac/peerrvwdrsrch.asp>

 California Department of
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Peer-Reviewed Research

This Web page contains information about peer-reviewed research in educating students with behavioral concerns. It was developed by the Behavioral Intervention Stakeholder Work Group pursuant to AB 86, Statutes of 2013.

Assembly Bill 86 (AB 86), the Education Omnibus Trailer Bill, Chapter 48, Statutes of 2013, repealed regulations and added state statute that address positive behavioral intervention plans. In accordance with AB 110, California's 2013–2014 budget bill, the California Department of Education (CDE) is required to provide oversight of, and technical assistance and monitoring to, local educational agencies regarding changes to the requirements related to the identification and provision of behavioral intervention services included in AB 86.

As a part of this effort, AB 110 also required the CDE to convene a broad and varied stakeholder group to discuss several topics, including the identification and recommendation of practices based on 'peer-reviewed research.' According to the Office of Special Education Programs (OSEP), 'Peer-reviewed research' generally refers to research that is reviewed by qualified and independent reviewers to ensure that the quality of the information meets the standards of the field before the research is published. However, there is no single definition of 'peer reviewed research' because the review process varies depending on the type of information to be reviewed.¹

The Individuals with Disabilities Education Act (IDEA) states that the individualized education program (IEP) must contain a statement of special education and related services and supplementary aids and services, based on peer-reviewed research to the extent practicable.² The IDEA's reference to peer-reviewed research applies to the positive behavioral interventions and supports that the IEP team considers for a student whose behavior impedes his learning or that of others.³

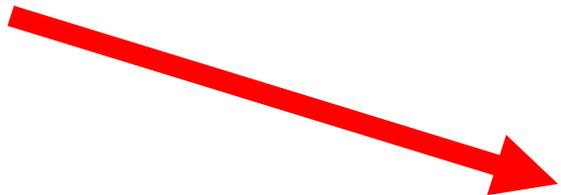
An abundance of information about recommended research-based practices is available at the [OSEP Technical Assistance Center on Positive Behavioral Interventions and Supports](#).⁴ The Technical Assistance Center on Positive Behavioral Interventions and Supports (PBIS) was established by the Office of Special Education Programs, US Department of Education, to give schools capacity-building information and technical assistance for identifying, adapting, and sustaining effective school-wide disciplinary practices. The site provides research-based information about PBIS in schools at the primary, secondary, and tertiary levels; within communities; and in families. It also publishes issue briefs and research-based information on best practices, and coach and trainer resources.

For working with students with autism spectrum disorders, the publication [Evidence-Based Practices for Children, Youth, and Young Adults with Autism Spectrum Disorder](#) (PDF; 3MB) was developed by the Autism Evidence-Based Practice Review Group under the auspices of the Frank Porter Graham Child Development Institute, University of North Carolina at Chapel Hill. Published in 2014, this 144-page document provides in-depth analysis of research-based practices, the practices' outcomes, and the ages of the students for whom the interventions are effective.

The [CAPTAIN \(California Autism Professional Training and Information Network\) Web site](#) is maintained by the CDE's Diagnostic Center, Northern California. CAPTAIN is a multi-agency network developed to support the understanding and use of evidence-based practices for individuals affected by Autism Spectrum Disorder (ASD) across California. The CAPTAIN Web site serves as a clearinghouse of resources, research materials, and information about evidence-based practices for educating students with an ASD. Links to the CAPTAIN Leadership Team, Cadre Members, and Partners, as well as training resources from the annual CAPTAIN Summits can also be found on this site.

The Frank Porter Graham Child Development Institute, University of North Carolina at Chapel Hill, also maintains a Web site for the [State Implementation and Scaling Up of Evidence-based Practices Center \(the SISEP Center\)](#). The purpose of the SISEP Center is to help educators build capacity to implement research-based practices. The center provides technical assistance nationwide and is funded by the federal Office of Special Education Programs.

The [Council for Exceptional Children Web site](#) offers numerous articles and information about Webinars that focus on research-based practices for addressing students' behavior through a simple





CAPTAIN

California Autism Professional Training
and Information Network



Hot Topics

