



Competency Based Learning Material (CBLM)

Caregiving for Infant, Toddler and Children

Level-3

Module: Manage Children with Special Needs

Code: CBLM-IS-CITC-05-L3-EN-V1



National Skills Development Authority
Prime Minister's Office
Government of the People's Republic of Bangladesh

Copyright

National Skills Development Authority
Prime Minister's Office
Level: 10-11, Biniyog Bhaban,
E-6 / B, Agargaon, Sher-E-Bangla Nagar Dhaka-1207, Bangladesh.
Email: ec@nsda.gov.bd
Website: www.nsd.gov.bd.
National Skills Portal: <http://skillsportal.gov.bd>

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The CBLM on “Manage Children with Special Needs” is developed based on NSDA approved Competency Standards and Competency Based Curriculum under Caregiving for infant, toddler and children Level-3 Occupation. It contains the information required to implement the Caregiving for infant, toddler and children Level-3 standard.

This document has been prepared by NSDA with the help of relevant experts, trainers/professionals.

All Government-Private-NGO training institutes in the country accredited by NSDA can use this CBLM to implement skill-based training of Caregiving for infant, toddler and children level-3 course.

Approved by

---th Authority Meeting of NSDA

Held on -----

How to use this Competency Based Learning Material (CBLM)

The module, Maintaining and enhancing professional & technical competency contains training materials and activities for you to complete. These activities may be completed as part of structured classroom activities or you may be required you to work at your own pace. These activities will ask you to complete associated learning and practice activities in order to gain knowledge and skills you need to achieve the learning outcomes.

1. Review the **Learning Activity** page to understand the sequence of learning activities you will undergo. This page will serve as your road map towards the achievement of competence.
2. Read the **Information Sheets**. This will give you an understanding of the jobs or tasks you are going to learn how to do. Once you have finished reading the **Information Sheets** complete the questions in the **Self-Check**.
3. **Self-Checks** are found after each **Information Sheet**. **Self-Checks** are designed to help you know how you are progressing. If you are unable to answer the questions in the **Self-Check** you will need to re-read the relevant **Information Sheet**. Once you have completed all the questions check your answers by reading the relevant **Answer Keys** found at the end of this module.
4. Next move on to the **Job Sheets**. **Job Sheets** provide detailed information about *how to do the job* you are being trained in. Some **Job Sheets** will also have a series of **Activity Sheets**. These sheets have been designed to introduce you to the job step by step. This is where you will apply the new knowledge you gained by reading the Information Sheets. This is your opportunity to practise the job. You may need to practise the job or activity several times before you become competent.
5. Specification **sheets**, specifying the details of the job to be performed will be provided where appropriate.
6. A review of competency is provided on the last page to help remind if all the required assessment criteria have been met. This record is for your own information and guidance and is not an official record of competency

When working through this Module always be aware of your safety and the safety of others in the training room. Should you require assistance or clarification please consult your trainer or facilitator.

When you have satisfactorily completed all the Jobs and/or Activities outlined in this module, an assessment event will be scheduled to assess if you have achieved competency in the specified learning outcomes. You will then be ready to move onto the next Unit of Competency or Module

Table of Contents

Copyright	2
How to use this Competency Based Learning Material (CBLM)	6
Module Content	10
Learning Outcome 1: Identify Autism Spectrum Disorder (ASD) in a Child	11
Learning Experience 1: Identify Autism Spectrum Disorder (ASD) in a Child	12
Information Sheet 1: Identify Autism Spectrum Disorder (ASD) in a Child.....	13
Self-Check Sheet - 1: Identify Autism Spectrum Disorder (ASD) in a Child	24
Answer Key - 1: Identify Autism Spectrum Disorder (ASD) in a Child	25
Task Sheet-1.1 Identify Potential Signs of Autism Spectrum Disorder (ASD) in a Child	26
Learning Outcome 2: Assist Child for ASD Management	27
Learning Experience 2: Assist Child for ASD Management	28
Information Sheet 2: Assist Child for ASD Management	29
Self-Check Sheet - 2: Assist Child for ASD Management	33
Answer Key - 2: Assist Child for ASD Management	34
Task Sheet-2.1 Manage ASD in a Child	35
Learning Outcome 3: Assist Child with Treatment of ASD	36
Learning Experience 3: Assist Child with Treatment of ASD.....	37
Information Sheet 3: Assist Child with Treatment of ASD	38
Self-Check Sheet - 3: Assist Child with Treatment of ASD.....	46
Answer Key - 3: Assist Child with Treatment of ASD.....	47
Task Sheet-3.1 Educational Intervention for the Child with Autism Spectrum Disorder.....	48
Review of Competency	49

Module Content

Unit Title: Manage Children with Special Needs

Unit Code: OU-IS-CITC-05-L3-V1

Module Title: Managing Children with Special Needs

Module Description: This module covers the knowledge, skills and attitudes required in managing children with special needs. It specifically includes identifying autism spectrum disorder (ASD) in a child, assisting child for ASD Management, and treatment of ASD.

Nominal Duration: 40 Hours

Learning Outcomes:

Upon completion of this module the trainees must be able to:

1. Identify autism spectrum disorder (ASD) in a child
2. Assist child for ASD management
3. Assist child with treatment of ASD

Assessment Criteria:

1. Autism spectrum disorder and its types are defined
2. Sign and symptom of autism spectrum disorder are recognized
3. Causes of autism spectrum disorder are explained
4. Risk Factors of autism spectrum disorder are interpreted
5. Symptoms of ASD in child are identified
6. Educational intervention is applied.
7. Medical management is provided.
8. Family is involved in support to children.
9. Appropriate diet chart is followed.
10. Safety measures are ensured.
11. Applied behavioral analysis (ABS) is performed.
12. Child is assisted with occupational therapy as prescribed.
13. Child is assisted with speech therapy as prescribed.
14. Child is assisted with physical therapy as prescribed.
15. Child is assisted with pharmacological therapy as prescribed.
16. Awareness of ASD is disseminated to family, friend and society.

Learning Outcome 1: Identify Autism Spectrum Disorder (ASD) in a Child

Assessment Criteria	<ol style="list-style-type: none"> 1. Autism spectrum disorder and its types are defined 2. Sign and symptom of autism spectrum disorder are recognized 3. Causes of autism spectrum disorder are explained 4. Risk Factors of autism spectrum disorder are interpreted 5. Symptoms of ASD in child are identified
Conditions and Resources	<ol style="list-style-type: none"> 1. Real or simulated workplace 2. CBLM 3. Handouts 4. Laptop 5. Multimedia Projector 6. Paper, Pen, Pencil, Eraser 7. Internet facilities 8. White board and marker 9. Audio Video Device
Contents	<ol style="list-style-type: none"> 1. Autism spectrum disorder and its types 2. Sign and symptom of autism spectrum disorder 3. Causes of autism spectrum disorder 4. Risk Factors of autism spectrum disorder 5. Symptoms of ASD in child
Training Methods	<ol style="list-style-type: none"> 1. Discussion 2. Presentation 3. Demonstration 4. Guided Practice 5. Individual Practice 6. Project Work 7. Problem Solving 8. Brainstorming
Assessment Methods	<ol style="list-style-type: none"> 1. Written Test 2. Demonstration 3. Oral Questioning

Learning Experience 1: Identify Autism Spectrum Disorder (ASD) in a Child

In order to achieve the objectives stated in this learning guide, you must perform the learning steps below. Beside each step are the resources or special instructions you will use to accomplish the corresponding activity.

Learning Steps	Resources specific instructions
1. Student will ask the instructor about identify autism spectrum disorder (ASD) in a child	1. Instructor will provide the learning materials of identify autism spectrum disorder (ASD) in a child
2. Read the Information sheet/s	2. Information Sheet No:1 identify autism spectrum disorder (ASD) in a child
3. Complete the Self-Checks & Answer key sheets.	3. Self-Check No: 1- identify autism spectrum disorder (ASD) in a child Answer key No. 1- identify autism spectrum disorder (ASD) in a child
4. Read the Job/ Task sheet and Specification Sheet	4. Job/ task sheet and specification sheet Task Sheet No:1.1: Identify Potential Signs of Autism Spectrum Disorder (ASD) in a Child

Information Sheet 1: Identify Autism Spectrum Disorder (ASD) in a Child

Learning Objective:

After completion of this information sheet, the learners will be able to explain, define and interpret the following contents:

- 1.1 Autism spectrum disorder and its types
- 1.2 Sign and symptom of autism spectrum disorder
- 1.3 Causes of autism spectrum disorder
- 1.4 Risk Factors of autism spectrum disorder
- 1.5 Symptoms of ASD in child

1.1 Autism spectrum disorder and its types

Autism spectrum disorder (ASD) is a neuro-developmental disease typically diagnosed during childhood. The former name of ASD is autism, and many people still use the term. But ASD includes several conditions within the spectrum. ASD changes the way your child interacts and communicates. There's no cure for autism, but the symptoms may lessen over time.

Autism spectrum disorder (ASD) is a developmental disability caused by differences in the brain. Although autism can be diagnosed at any age, it is described as a “developmental disorder” because symptoms general.

Example that illustrates Autism Spectrum Disorder (ASD):

Meet Zahed, a bright and energetic 6-year-old. While he's incredibly gifted when it comes to drawing intricate patterns and has an exceptional memory for facts, he also faces unique challenges. Zahed struggles with maintaining eye contact when talking to others and often prefers to play alone, engrossed in his own world of imagination.

At school, his teacher notices that Zahed occasionally has difficulty following verbal instructions and can become overwhelmed by the sensory stimuli in a bustling classroom. His classmates sometimes find it challenging to understand his nonverbal cues, like when he flaps his hands with excitement.

Zahed's parents consult with a developmental specialist who diagnoses him with Autism Spectrum Disorder. With early intervention and targeted therapies, Zahed's parents and teachers work together to help him improve his communication skills, manage sensory sensitivities, and develop social connections. Over time, Zahed makes progress and learns to navigate his unique world while sharing his incredible talents with those around him.

Types of Autism Spectrum Disorder (ASD):

- There are 5 types of ASD which include
- Asperger's syndrome
- Rett syndrome
- Childhood disintegrative disorder
- Kanner's syndrome
- Pervasive developmental disorder – not otherwise specified.

1.1.1 Asperger's Syndrome

Although the term Asperger's syndrome was quite common before 2013, the term is actually no longer used by medical professionals. It has since been reclassified as level 1 autism spectrum disorder by the DSM-5 diagnostic manual. Still, Asperger's syndrome may be used informally-in fact, autism communities use it more often than level 1 spectrum disorder.

A child with level 1 spectrum disorder will have above average intelligence and strong verbal skills but will experience challenges with social communication. In general, a child with level 1 autism spectrum disorder will display the following symptoms:

- Inflexibility in thought and behavior
- Challenges in switching between activities
- Executive functioning problems
- Flat monotone speech, the inability to express feelings in their speech, or change their pitch to fit their immediate environment
- Difficulty interacting with peers at school or home

1.1.2 Rett Syndrome

Rett syndrome is a rare neurodevelopmental disorder that is noticed in infancy. The disorder mostly affects girls, although it can still be diagnosed in boys. Rett syndrome presents challenges that affect almost every aspect of a child's life. The good thing is your child can still enjoy and live a fulfilling life with the proper care. You can have family time together and provide support to allow the child to do what they enjoy.

Common symptoms of Rett syndrome include:

- Loss of standard movement and coordination
- Challenges with communication and speech
- Breathing difficulties in some cases

1.1.3 Childhood Disintegrative Disorder (CDD)

Childhood disintegrative disorder (CDD), also known as Heller's syndrome or disintegrative psychosis, is a neurodevelopmental disorder defined by delayed onset of developmental problems in language, motor skills, or social function. A child experiences normal development in these areas only to hit a snag after age three and up to age 10. The developmental loss can be very heartbreaking for parents who had no idea their child had autism challenges all along.

The cause of CDD is unknown though researchers link it to the neurobiology of the brain. Childhood disintegrative disorder is more common in boys. Out of every 10 cases of the disorder, nine will be boys, and only one will be a girl.

In CDD, the child will have normal development up to the time when the disorder starts, and regressions suddenly start to occur in more than two developmental aspects of their life. The child may lose any of the following skills and abilities:

- Toileting skills if they had already been established
- Acquired language or vocabularies
- Social skills and adaptive behaviors
- Some motor skills

1.1.4 Kanner's Syndrome

Kanner's syndrome was discovered by psychiatrist Leo Kanner of John Hopkins University in 1943 when he characterized it as infantile autism. Doctors also describe the condition as a classic autistic disorder. Children with Kanner's syndrome will appear attractive, alert, and intelligent with underlying characteristics of the disorder such as:

- Lack of emotional attachment with others
- Communication and interaction challenges
- Uncontrolled speech
- Obsession with handling objects
- A high degree of rote memory and visuospatial skills with major difficulties learning in other areas.

1.1.5 Pervasive Developmental Disorder – Not Otherwise Specified (PDD-NOS)

Pervasive Developmental Disorder – Not Otherwise Specified (PDD-NOS) is a mild type of autism that presents a range of symptoms. The most common symptoms are challenges in social and language development.

Your child may experience delays in language development, walking, and other motor skills. You can identify this type of autism by observing the child and noting what area the child displays a deficit in, such as interacting with others. PDD-NOS is sometimes referred to as “subthreshold autism,” as it is a term used to describe an individual that has some but not all symptoms of autism.

1.2 Sign and symptom of autism spectrum disorder

The signs of autism can vary from child to child, but some common symptoms may indicate that your child has autism. Here are some of the early signs to look out for:

Category	Signs and Symptoms
Social Interaction and Communication	<ul style="list-style-type: none"> ▪ Limited eye contact ▪ Difficulty with social interactions ▪ Delayed speech development ▪ Echolalia (repetition of words or phrases) ▪ Lack of nonverbal communication (gestures, facial expressions) ▪ Limited interest in others
Repetitive Behaviors and restricted interests	<ul style="list-style-type: none"> ▪ Repetitive movements (e.g., hand-flapping, rocking) ▪ Intense and narrow interests ▪ Routines and rituals ▪ Resistance to changes in routines or environments
Sensory Sensitivities	<ul style="list-style-type: none"> ▪ Strong reactions to sensory stimuli (e.g., loud noises, bright lights) ▪ Seeking or avoiding sensory input ▪ Unusual sensitivity to certain textures or smells
Social and Emotional Challenges	<ul style="list-style-type: none"> ▪ Difficulty recognizing and understanding emotions ▪ Limited empathy ▪ Challenges with forming and maintaining relationships
Unusual motor skills	<ul style="list-style-type: none"> ▪ Unusual gait or movement patterns ▪ Fine motor coordination difficulties (e.g., using utensils)
Language and communication challenges	<ul style="list-style-type: none"> ▪ Repetitive speech or phrases ▪ Difficulty with abstract language (idioms, sarcasm) ▪ Monotone or unusual speech patterns

1.2.1 Difficulty with social interactions:

Children with autism may have trouble making eye contact, responding to their names, or showing interest in others.



1.2.2 Delayed speech and language skills:

Children with autism may have delayed speech and language skills, or they may not speak at all.



1.2.3 Repetitive behaviors:

Children with autism may engage in repetitive behaviors such as rocking, hand flapping, or spinning.



1.2.4 Facing problems in the change daily routine:

Children with autism may become upset or anxious when there is a change in daily charts, routine, schedule or environment.



1.2.5 Sensory issues:

Children with autism may be overly sensitive or under-sensitive to certain stimuli such as sounds, textures, or lights.



1.2.6 Lack of concentration:

Unable to concentrate any conversation, task or situation like eating, playing or gossiping.



1.2.7 Lack of eye contact:

Lack of eye contact is a common symptom of Autism Spectrum-Disorder. People with ASD may avoid or have difficulty making eye contact with others, which can affect their ability to communicate and to engage socially.



1.2.8 Difficulty with communication:

Individuals with ASD may have difficulty with verbal and nonverbal communication. They may speak in a robotic manner, have difficulty understanding sarcasm or figurative language, or have a limited vocabulary.



1.2.9 Miss matched expression, movement, gesture etc.:

"Mismatched expression, movement, or gesture" generally refers to situations where a person's verbal or non-verbal communication does not match the intended message or emotion.



1.2.10 Abnormal social behavior:

Children with autism usually have abnormal social behavior. They have difficulty to initiate or to maintain conversation, lack of interest in social interaction, difficulty with social cues and nonverbal communication.



1.3 Causes of autism spectrum disorder

There are different causes of autism spectrum disorder, but it is difficult to identify specifically the exact cause of ASD. The main causes are as follows-

- **Family history:** Family history is considered a significant risk factor for the development of autism spectrum disorder (ASD). Studies have shown that having a family member with ASD increases the likelihood of an individual developing the disorder.
- **Genetic factor:** There is evidence to suggest that certain genes or combinations of genes may increase the risk of developing ASD.
- **Low birth weight:** Low birth weight has been defined by WHO as weight at birth of <2500 grams (5.5 pounds)
- **Environmental factors:** Environmental factors such as prenatal exposure to toxins, viral infections, and maternal stress have been suggested to contribute to the development of ASD.
- **Viral infection:** A history of viral infection refers to a past occurrence of a viral infection, such as the flu, herpes, rubella, or cytomegalovirus. Research has suggested that some viral infections during pregnancy or early childhood may increase the risk of developing Autism Spectrum-Disorder (ASD).
- **And being born to older parents:** Previous records say being born to older parents has a chance to develop Autism.
- **Trauma at brain:** Any trauma to brain during forceful delivery can cause autism as this accident damages the cells of mature brain.

1.4 Risk Factors of autism spectrum disorder

Autism Spectrum Disorder (ASD) is a complex condition with a combination of genetic, environmental, and neurological factors contributing to its development. While the exact causes of ASD are not fully understood, several risk factors have been identified through research. It's important to note that having one or more of these risk factors does not guarantee that an individual will develop ASD. Risk factors for ASD include:

- **Gender:** Boys are about four times more likely to develop autism spectrum disorder than girls are. So, gender issue is one of the major risk factors of ASD.
- **Family history:** Families who have one child with autism spectrum disorder have an increased risk of having another child with the disorder.
- **Extremely preterm/premature babies:** Your baby is born at or before 28 weeks of pregnancy. Some of the health problems related to premature birth can last a lifetime. Preterm is defined as babies born alive before 37 weeks of pregnancy are completed.
- **Higher Parents' ages:** If children born to older parents there will be slightly increased risk for developing ASD.

1.5 Symptoms of ASD in child

- Difficulty or absence of eye contact
- Can't tell his/her name at the age of 9 months
- Lack of facial expressions like happy, sad, angry, and surprised by 9 months of age
- No interest in interactive games by 12 months of age
- Very few or no gestures by 12 months of age (for example, does not wave goodbye)
- No interest to share anything with others by 15 months of age (for example, shows you an object that they like)
- Does not point to show you something interesting by 18 months of age
- No complaint if anybody hurts by 24 months of age
- No attachment in play by 36 months of age
- Does not pretend to be something else, like a teacher or superhero, during play by 48 months of age.
- No interest in singing song, in dance or act for you by 60 months of age.

Examples:

Meet Emily, a delightful 3-year-old with a bright smile and a curious spirit. Emily's parents have noticed some unique behaviors and developmental differences in her compared to her peers:

- **Limited Eye Contact:** When interacting with others, Emily tends to avoid making direct eye contact. Instead, she often gazes at objects or focuses on their mouths while they speak.
- **Delayed Speech Development:** Emily hasn't started speaking as many words as other children her age. She communicates her needs through gestures and pointing, but full sentences are rare.
- **Repetitive Behaviors:** Emily frequently flaps her hands with excitement when watching her favorite cartoons. She also lines up her toys meticulously and becomes upset if someone disrupts the order.
- **Sensory Sensitivities:** Emily appears hypersensitive to certain textures. She refuses to wear clothing with tags and becomes distressed in noisy environments.
- **Limited Social Interaction:** Emily enjoys playing alone with her toys and doesn't seek out playmates. When around other children, she doesn't engage in interactive games or respond to their attempts to play.

Self-Check Sheet - 1: Identify Autism Spectrum Disorder (ASD) in a Child

Questionnaire:

1. What do you mean by child with special needs?

Answer:

2. Service needed for child with special need?

Answer:

3. What is ASD?

Answer:

4. Who is the autistic baby?

Answer:

5. Types of ASD?

Answer:

6. Describe about Asperger's Syndrome?

Answer:

Answer Key - 1: Identify Autism Spectrum Disorder (ASD) in a Child

1. What do you mean by child with special needs?

Answer: Those who have or are at risk for a chronic physical, developmental, behavioral, or emotional condition beyond needs generally required by children (U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau, 2008) Children who have a terminal illness, or are otherwise dying.

2. Service needed for child with special need?

Answer:

- Prescription medication
- Medical care
- Mental health and education services
- Physical, occupational, or speech therapy
- Treatment for emotional, developmental, or behavioral problems
- Financial assistance
- Family support

3. What is ASD?

Answer: Autism spectrum disorder is a condition related to brain development that impacts how a person perceives and socializes with others, causing problems in social interaction and communication. The disorder also includes limited and repetitive patterns of behavior.

4. Who is the autistic baby?

Answer: The baby who suffers from autism spectrum disorder (ASD) is called autistic baby.

5. Types of ASD?

Answer:

- There are 5 types of ASD which include
- Asperger's syndrome
- Rett syndrome
- Childhood disintegrative disorder
- Kanner's syndrome
- Pervasive developmental disorder – not otherwise specified.

6. Describe about Asperger's Syndrome?

Answer: Although the term Asperger's syndrome was quite common before 2013, the term is actually no longer used by medical professionals. It has since been reclassified as level 1 autism spectrum disorder by the DSM-5 diagnostic manual. Still, Asperger's syndrome may be used informally-in fact, autism communities use it more often than level 1 spectrum disorder.

Task Sheet-1.1 Identify Potential Signs of Autism Spectrum Disorder (ASD) in a Child

Objectives: This task involves recognizing, assessing, and providing appropriate guidance for a child with potential autism disorder (ASD).

Working Procedure:

1. Listen to parents to understand their observations and concerns.
2. Note any delays in speech, social interactions, or unusual behaviors exhibited by the child.
3. Record specific examples of behaviors such as repetitive actions, sensitivity to sensory stimuli, and difficulties in communication.

Note: This task sheet outlines the steps involved in recognizing, assessing, and providing guidance for a child with potential autism spectrum disorder (ASD). Through careful observation, screening, assessment, and collaboration with professionals, the objective is to ensure early intervention and tailored support for the child's developmental needs.

Learning Outcome 2: Assist Child for ASD Management

Assessment Criteria	<ol style="list-style-type: none"> 1. Educational intervention is applied. 2. Medical management is provided. 3. Family is involved in support to children. 4. Appropriate diet chart is followed. 5. Safety measures are ensured.
Conditions and Resources	<ol style="list-style-type: none"> 1. Real or simulated workplace 2. CBLM 3. Handouts 4. Laptop 5. Multimedia Projector 6. Paper, Pen, Pencil, Eraser 7. Internet facilities 8. White board and marker 9. Audio Video Device
Contents	<ol style="list-style-type: none"> 1 Educational intervention 2 Medical management 3 Appropriate diet chart 4 Safety measures
Training Methods	<ol style="list-style-type: none"> 1. Discussion 2. Presentation 3. Demonstration 4. Guided Practice 5. Individual Practice 6. Project Work 7. Problem Solving 8. Brainstorming
Assessment Methods	<ol style="list-style-type: none"> 1. Written Test 2. Demonstration 3. Oral Questioning

Learning Experience 2: Assist Child for ASD Management

In order to achieve the objectives stated in this learning guide, you must perform the learning steps below. Beside each step are the resources or special instructions you will use to accomplish the corresponding activity.

Learning Steps	Resources specific instructions
1. Student will ask the instructor about assist child for ASD management	1. Instructor will provide the learning materials of assist child for ASD management
2. Read the Information sheet/s	2. Information Sheet No:2 Assist child for ASD management
3. Complete the Self-Checks & Answer key sheets.	3. Self-Check No: 2- Assist child for ASD management Answer key No. 2- Assist child for ASD management
4. Read the Job/ Task sheet and Specification Sheet	4. Job/ task sheet and specification sheet Task Sheet No:2.1: Manage ASD in a Child

Information Sheet 2: Assist Child for ASD Management

Learning Objective:

After completion of this information sheet, the learners will be able to explain, define and interpret the following contents:

- 2.1 Educational intervention
- 2.2 Medical management
- 2.3 Family Involvement
- 2.4 Appropriate diet chart
- 2.5 Safety measures

2.1 Educational intervention

A comprehensive educational intervention is essential to provide fruitful support to the child with autism spectrum disorder (ASD). Child with autism may have various health related needs, an intellectual delay or may be non-verbal as well. If He or She attends to any school either to public school or special school, He or She requires the service of a functional class room where all the teaching facilities for the special child is available.

From all the educational areas mentioned below a child with autism can take learning-

- a) **Main stream school-** a regular school where there is special instructor and who gives extra teaching support.
- b) **Special school-** a school for children with special educational needs.
- c) **Residential school-** where special child stays overnight and gets assistance with peer relationship.
- d) **Homeschooling-** mother plays here an important role to provide overall supports. Mother may learn educational intervention technique and can apply at home for the development of the child's skills.
- e) **Home and school combination-** A child with autism can have skills developing learning both from home and school.
- f) **Individualized Education Program (IEP)-**One of the best educational interventions for autism is the “**Individualized Education Program (IEP)**” as this education program is tailored to the individual student to provide the maximum benefit. Individual program is a program that is appropriate for one child with autism may not be appropriate for another. It is one to one education program which is very effective.

Wherever the child with autism goes additional support with reading, writing or math skills and support with alternative communication methods, toileting skills, feeding skills etc. would be needed.

2.2 Medical management

Medical management for child with autism spectrum disorder (ASD) involves the use of medications to treat some of the symptoms associated with the condition.

Mentionable that, there is no medicine or tools of medication that can cure the autism spectrum disorder (ASD). But a symptomatic treatment can be applied for this Neuro-Developmental disorder like ASD. Symptoms like convulsion, anxiety, hypersensitivity/hyperactivity, aggression can be managed by medication.

First involvement for the child with autism is family members. Then friends, neighbors, teachers, caregivers, therapists are the parts of his/her companionship. All the family members have the role to accompany the special child as only mother or father may feel bored to foster the child.

Families of children with ASD may benefit from support and education on how to best support their child's development and well-being. This may include support groups, counseling, or other types of support.

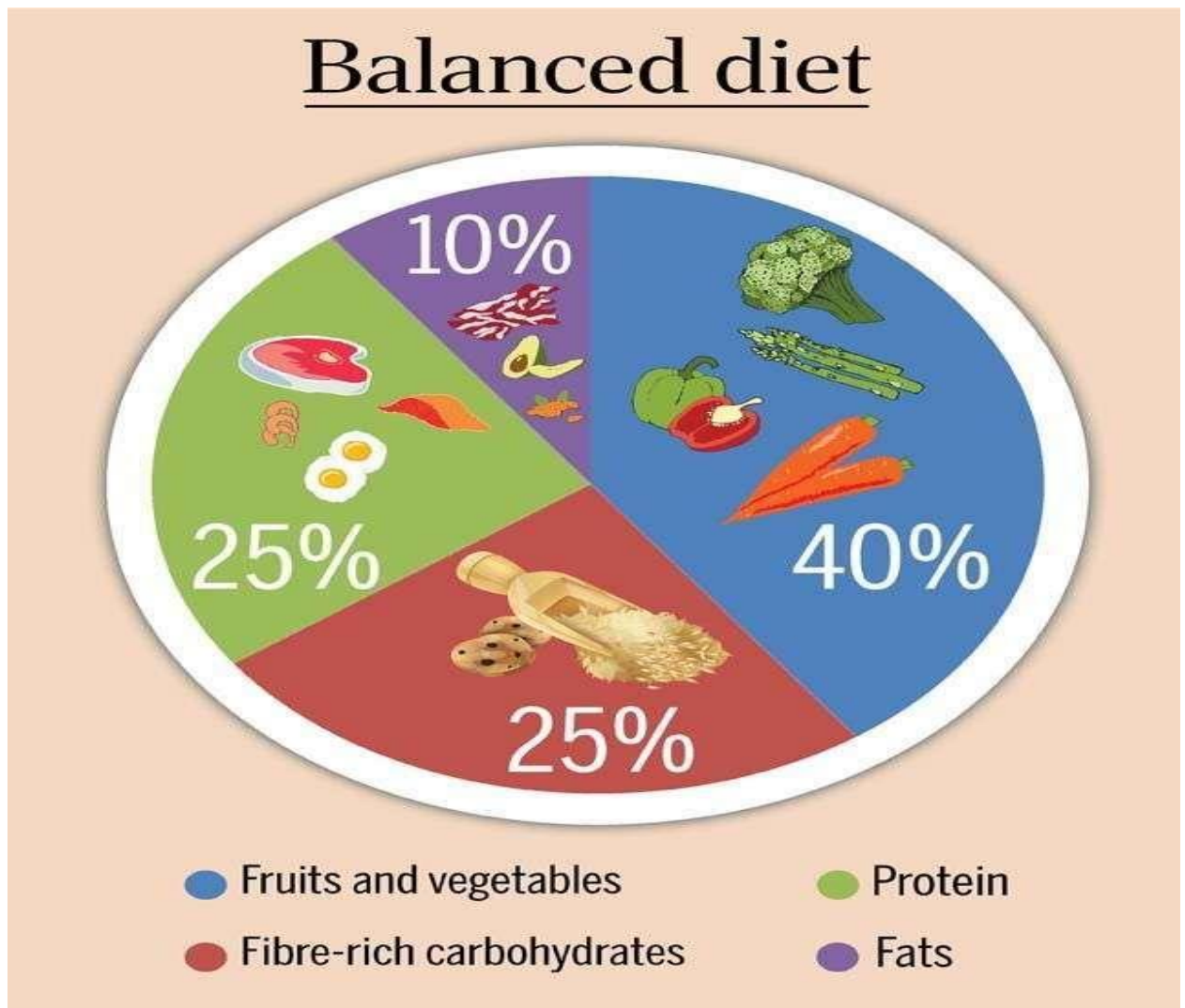
2.3 Family Involvement

Family involvement is a crucial component of managing Autism Spectrum Disorder (ASD). By actively engaging in their child's care and development, families can provide essential support and create a nurturing environment.

- Seek early intervention services
- Open and effective Communication
- Attend therapy session
- Establish and maintain routine
- Implement behavior plans
- Facilitate social interactions
- Use positive reinforcement
- Prioritize self-care
- Embrace acceptance

2.4 Appropriate diet chart

An appropriate diet chart is to be followed where a balanced diet plan shall be mentioned. A nutritious diet is really important for the growth and development of the kids with autism both physically and mentally. This becomes crucial when it comes to kids with autism as they have many digestive problems and other problems. So, understanding that, they need different nutrient requirements. An appropriate diet chart refers to a balanced and nutritious meal plan that is designed to meet an individual's dietary needs and support their overall health and well-being. For individuals with autism spectrum disorder (ASD), healthy diet can be especially important in managing symptoms and promoting optimal functioning. A well-balanced diet typically includes a variety of fruits, vegetables, whole grains, lean proteins, and healthy fats, while minimizing processed and sugary foods.



2.5 Safety measures

Following safety measures are ensured to assist child for autism management-

- **Stay in consistency:** Consistency means establishing a regular and structured routine in communication and therapy sessions with an individual who has ASD. Consistency is important because it can help reduce anxiety and confusion for the person with ASD and help them develop and improve their communication and social skills.
- **Maintaining Routine or schedule:** "Stick to a schedule" in ASD (autism spectrum disorder) treatment chart means following a predetermined routine of therapy sessions and communication activities that are designed to support the individual with ASD.
- **Encouragement/reward for good behavior:** Encouragement for good behavior in ASD (autism spectrum disorder) involves providing positive reinforcement for appropriate and desirable behaviors.
- **Building up autism friendly safety zone:** Autism friendly structure, safe and secure environment for individuals with ASD (autism spectrum disorder) will reduce the risk of injury or harm to a bigger extent.
- **Change of communication pattern:** Nonverbal ways of communication are to be more fruitful than verbal communication for that autistic child who may have difficulty with verbal communication or social interaction. Gestures, visual aids, body language, augmentative and alternative communication (AAC) devices are some nonverbal ways of communication that can be helpful for individuals with ASD.
- **Making enjoyment/Making time for fun:** Making enjoyment like fun is an important aspect of caring for individuals with ASD (autism spectrum disorder). Engaging in fun and enjoyable activities can help reduce stress, promote relaxation, and improve overall well-being.



Self-Check Sheet - 2: Assist Child for ASD Management

Questionnaire:

1. What Medical Management given in an ASD child?

Answer:

2. Write about education Individualized program for ASD?

Answer:

3. Name some Change of communication pattern?

Answer:

4. What is the Pay attention to sensory sensitivities?

Answer:

Answer Key - 2: Assist Child for ASD Management

1. What Medical Management given in an ASD child?

Answer: Medical management for child with autism spectrum disorder (ASD) involves the use of medications to treat some of the symptoms associated with the condition.

Mentionable that, there is no medicine or tools of medication that can cure the autism spectrum disorder (ASD). But a symptomatic treatment can be applied for this Neuro-Developmental disorder like ASD. Symptoms like convulsion, anxiety, hypersensitivity/hyperactivity, aggression can be managed by medication

2. Write about education Individualized program for ASD?

Answer: One of the best educational interventions for autism is the “Individualized Education Program (IEP)” as this education program is tailored to the individual student to provide the maximum benefit. Individual program is a program that is appropriate for one child with autism may not be appropriate for another. It is one to one education program which is very effective.

3. Name some Change of communication pattern?

Answer: Nonverbal ways of communication are to be more fruitful than verbal communication for that autistic child who may have difficulty with verbal communication or social interaction. Gestures, visual aids, body language, augmentative and alternative communication (AAC) devices are some nonverbal ways of communication that can be helpful for individuals with ASD.

4. What is the Pay attention to sensory sensitivities?

Answer: Individuals with ASD (autism spectrum disorder) may experience sensory sensitivities, which can impact their ability to function in daily life. Here are some tips for paying attention to sensory sensitivities in individuals with ASD.

Task Sheet-2.1 Manage ASD in a Child

Objectives: The task involves assessing and implementing effective management strategies for a child with autism spectrum disorder (ASD).

Working Procedure:

1. Conduct a thorough assessment of the child's communication, social interaction, and sensory sensitivities.
2. Observe and document any repetitive behaviors, fixations, or challenges in daily functioning.
3. Analyze assessment results to understand the child's strengths and areas requiring support
4. Implement ABA techniques to reinforce desired behaviors and reduce challenging ones.
5. Provide speech and language therapy to enhance communication skills.
6. Integrate sensory-based activities to address sensitivities and promote self-regulation.
7. Consistently apply strategies across various settings, including home, school, and therapy sessions.

Note: This task sheet outlines the steps involved in managing autism spectrum disorder (ASD) in a child. Through assessment, collaboration, tailored interventions, monitoring, family support, and celebrating progress, the objective is to provide comprehensive care that empowers the child and helps them reach their full potential.

Learning Outcome 3: Assist Child with Treatment of ASD

Assessment Criteria	<ol style="list-style-type: none"> 1. Applied behavioral analysis (ABS) is performed. 2. Child is assisted with occupational therapy as prescribed. 3. Child is assisted with speech therapy as prescribed. 4. Child is assisted with physical therapy as prescribed. 5. Child is assisted with pharmacological therapy as prescribed. 6. Awareness of ASD is disseminated to family, friend and society.
Conditions and Resources	<ol style="list-style-type: none"> 1. Real or simulated workplace 2. CBLM 3. Handouts 4. Laptop 5. Multimedia Projector 6. Paper, Pen, Pencil, Eraser 7. Internet facilities 8. White board and marker 9. Audio Video Device
Contents	<ol style="list-style-type: none"> 1 Applied behavioral analysis (ABS) 2 Occupational therapy 3 Speech therapy 4 Physical therapy 5 Pharmacological therapy 6 Awareness of ASD
Training Methods	<ol style="list-style-type: none"> 1. Discussion 2. Presentation 3. Demonstration 4. Guided Practice 5. Individual Practice 6. Project Work 7. Problem Solving 8. Brainstorming
Assessment Methods	<ol style="list-style-type: none"> 1. Written Test 2. Demonstration 3. Oral Questioning

Learning Experience 3: Assist Child with Treatment of ASD

In order to achieve the objectives stated in this learning guide, you must perform the learning steps below. Beside each step are the resources or special instructions you will use to accomplish the corresponding activity.

Learning Steps	Resources specific instructions
1. Student will ask the instructor about simulate children's awareness and creativity	1. Instructor will provide the learning materials of simulate children's awareness and creativity
2. Read the Information sheet/s	2. Information Sheet No:3 Simulate children's awareness and creativity
3. Complete the Self-Checks & Answer key sheets.	3. Self-Check No: 3- Simulate children's awareness and creativity Answer key No. 3- Simulate children's awareness and creativity
4. Read the Job/ Task sheet and Specification Sheet	4. Job/ task sheet and specification sheet Task Sheet No:3.1: Educational Intervention for the Child with Autism Spectrum Disorder

Information Sheet 3: Assist Child with Treatment of ASD

Learning Objective:

After completion of this information sheet, the learners will be able to explain, define and interpret the following contents:

- 3.1 Applied behavioral analysis (ABS)
- 3.2 Occupational therapy
- 3.3 Speech therapy
- 3.4 Physical therapy
- 3.5 Pharmacological therapy
- 3.6 Awareness of ASD

3.1 Applied behavioral analysis (ABA)

Applied behavioral analysis (ABA) is also called behavioral engineering. It is a psychological and therapeutic intervention that can help autistic children improve their social skills, self-care skills, communication skills, play skills and ability to manage their own behavior. It can also help to reduce behavior like inattention, aggression and screaming.

ABA therapy programs can help:

- Improve language and communication skills
- Increase attention, focus, social skills, memory, and academics
- Reduce the occurrence of behavioral problems

Applied Behavior Analysis (ABA) is a type of therapy based on the psychology of learning and behavioral traits. ABA therapy applies the understanding of how behavior works in real-life situations, to increase behaviors that are helpful and decrease behaviors that are harmful or affect learning. Applied Behavior Analysis involves several techniques for understanding and changing behavior. ABA is a form of flexible treatment that can be adapted to meet the needs of each unique person. It can also be provided in many different locations – at home, at school, and in the community.

A qualified behavioral psychologist designs and directly oversees the program. They customize the ABA program to the child's skills, needs, interests, preferences, and family circumstances. The ABA program is started with a detailed assessment of the child's existing skills and preferences in order to formulate specific treatment goals. Treatment goals are decided after taking into consideration the age and ability level of the child with autism.

Goals can include different skill areas, such as:

- Communication and language
- Social skills
- Self-care behaviors
- Play and leisure
- Motor skills
- Learning and academic skills

The instruction plan breaks down each of these skills into small, concrete steps. The therapist teaches each step one by one, from simple (e.g. imitating single sounds) to more complex (e.g. carrying on a conversation). Progress is measured by collecting data in each therapy session. Data helps to monitor the child's progress toward goals on an ongoing basis.

The therapist regularly meets with family members to review information about progress in order to plan ahead and adjust teaching plans and goals accordingly.

Example:

Meet Zahed, a friendly 5-year-old boy diagnosed with Autism Spectrum Disorder (ASD). Zahed's parents, Sarah and Mark, noticed that he was struggling with communication and having frequent meltdowns. They decided to seek help from a certified ABA therapist to address his behavioral challenges.

3.2 Occupational therapy

Occupational therapy: Occupational therapy is one kind of therapy that helps you live your best life at home, at work and everywhere else. It's about being able to do the things you want and have to do. That could mean helping you overcome challenges learning at school, going to work, playing sport or simply doing the dishes (Such as self-care skills, education, work, or social interaction)

An occupational therapist is a healthcare provider who helps you improve your ability to perform daily tasks. For example, getting dressed, playing a sport, cooking a meal etc.

Example:

Meet Sarah, a 7-year-old girl with Sensory Processing Disorder (SPD). Sarah's parents, Emily and David, noticed that she struggled with daily activities like dressing herself, focusing in school, and interacting with peers due to her sensory sensitivities. They decided to seek help from an occupational therapist to address these challenges.



Common interventions include:

- Helping children with disabilities to participate in school and social situations (independent mobility is often a central concern)
- Training in assistive device technology, meaningful and purposeful activities, and life skills.
- Physical injury rehabilitation
- Mental dysfunction rehabilitation
- Support of individuals across the age spectrum experiencing physical and cognitive changes
- Assessing ergonomics and assistive seating options to maximize independent function, while alleviating the risk of pressure injury
- Education in the disease and rehabilitation process
- Advocating for patient health

3.3 Speech therapy

Speech therapy: Speech therapy is also a therapy that helps in the assessment and treatment of communication problems and speech disorders. It can help children with autism improve their verbal, nonverbal, and social communication. The overall goal is to help the children communicate in more useful and functional ways. The person responsible in the speech intervention is called speech therapist.

Examples:

Meet Liam, a bright 4-year-old boy who has been experiencing difficulty with speech development. His parents, Sarah and Michael, noticed that he was struggling to pronounce certain sounds and express himself clearly. Concerned about his communication skills, they decided to seek help from a speech therapist.



3.4 Physical therapy

Physical therapy: Physical therapy is also called physiotherapy. It is a medical treatment part or the part of multidisciplinary team which is used to restore functional movements, such as standing, walking, and moving of different body parts.

Examples:

Meet Emily, a 12-year-old girl who recently had surgery to correct a congenital hip condition. Following the surgery, Emily experienced limited mobility and muscle weakness in her affected leg. Her parents, Lisa and David, decided to seek help from a physical therapist to aid in her recovery and rehabilitation.



Physical Therapy Can-

Provide skilled intervention in the case of muscle weakness, Muscle spasm, Joint stiffness, Maintaining range of motion of joints (ROM)

Provide good treatment programs to gain muscle tone of a child has hypotonicity of muscles, Help in motor co-ordination.

3.5 Pharmacological therapy

Pharmacological therapy: Pharmacotherapy means the treatment for treating disease, illness or disease complications with medication. There are no medications that treat the core symptoms of ASD. But it helps in symptomatic treatment, that means if any symptoms found in the child with autism spectrum disorder (ASD) like convulsion, spasaticity, anxiety, sleeplessness, gastrointestinal problems (vomiting, loose motion etc.) and others, pharmacological therapy can there be applied.

Besides, Medication can increase energy level and reduce general weakness of child's body.

Examples:

Meet Sarah, a 38-year-old woman who has been experiencing symptoms of depression for several months. Her symptoms include persistent sadness, low energy, and a loss of interest in activities she used to enjoy. Sarah's daily life has been significantly affected, and she's finding it challenging to cope with her emotions.

3.6 Awareness of ASD

Autism awareness: The awareness distributed among family, society and throughout the country about autism is called autism awareness, so that no one humiliates a child with autism and accept him or her and give him/her all rights that a common people usually gets.

Example of promoting awareness of Autism Spectrum Disorder (ASD):

Imagine a community coming together for an "Autism Awareness Day" event at a local park. Colorful banners, puzzle-piece decorations, and friendly volunteers greet visitors as they arrive. Families, friends, and neighbors gather, eager to learn and show support.

Throughout the day, there are interactive booths that allow attendees to experience a taste of what it's like to navigate the world with ASD. At one booth, participants wear headphones to simulate sensory overload while trying to complete a simple task. At another, they learn about communication challenges by engaging in a game of charades with limited gestures.

Parents of children with ASD share their stories, offering insights into the daily triumphs and challenges they face. These heartfelt testimonials help attendees understand the importance of empathy, acceptance, and inclusion.

Local professionals and therapists provide information about early intervention programs and available resources for individuals with ASD and their families. Attendees leave the event not only with a deeper understanding of ASD but also with a commitment to creating a more inclusive and supportive community for everyone, regardless of their abilities.

Objective of autism awareness program:

- Improved inclusion for people with autism.
- Decreased bullying and exclusion.
- Greater support in schools, at home, etc.
- A better understanding of ASD in communities.
- Better integration of people with ASD into communities, jobs, etc.

2nd April is Autism Awareness Day. So, April is Autism Awareness Month and a busy time when organizations and individuals are raising funds, increasing understanding, and breaking down stigmas regarding autism. It is a wonderful time to reflect on your own awareness and behaviors and that of your family. But autism awareness shouldn't be limited to just one month of the year. It is something that should be happening every single day.

Here are five ways that you can be proactive throughout the year:

Educate Yourself: Awareness starts with each person taking responsibility for themselves. Do your part to understand more about what autism is (and isn't) and how you can interact more effectively with individuals with autism. Keep an open mind and focus on everything these individuals can do, rather than what they may struggle with. Once you have a better understanding of autism, you can help others to do the same.

Attend Local Events: Get actively involved in supporting autism awareness and activities in your area. Many groups have local chapters and hold events throughout the year. Take your family or friends and show your support while learning more about their efforts and showing you care. Even better – become a volunteer with these organizations and events.

Be an Advocate: Stand up for children and adults with autism. Don't let others put them down or talk negatively. Share your story. Ensure that individuals with special needs feel welcomed and valued where you work and are treated with respect just like everyone else. Individuals with autism can be as successful as anyone else with the right support.

Speak Up: Write or call your state representatives, local legislators, or other leaders regarding proposed legislation that affects those with autism. Be aware of how these policies will impact access to services, insurance, research, and other issues. Encourage others to do the same. Every voice counts.

Be a Positive Role Model: Pay attention to your own actions and words when it comes to autism. Set a good example for your children (and community) when interacting with others and helping those with autism to thrive. Make sure they feel accepted and included in your life.

Other effective ways to build up awareness among family, friends and society:

Embracing, respecting and supporting children with ASD: Embracing, respecting and supporting children with autism spectrum disorder (ASD) means recognizing their unique strengths and challenges, and creating a safe and supportive environment for them to thrive.

Observation of ASD Day and Month: ASD Day and Month are dedicated to raising awareness of Autism Spectrum Disorder (ASD) and promoting understanding and acceptance of individuals with ASD.

Distribution of awareness among all: Building awareness of Autism Spectrum Disorder (ASD) among all individuals is crucial to promote understanding, acceptance, and inclusion of individuals with ASD. Here are some ways to build awareness of ASD among all that we can implement-

- Education and Training.
- Public Awareness Campaign
- Community involvement in this campaign
- Publication through Print media, electronic Media and Social Media.

Building awareness of ASD among all individuals can help reduce stigma and discrimination, and promote a more inclusive and supportive society for individuals with ASD and their families.

Self-Check Sheet - 3: Assist Child with Treatment of ASD

Questionnaire:

1. What is safety measure?

Answer:

2. What is special need?

Answer:

3. What is SLT?

Answer:

4. Why is disabled child called a child with special needs?

Answer:

5. What kind of treatment is essential for autism spectrum disorder (ASD)?

Answer:

6. What is applied behavior analysis?

Answer:

Answer Key - 3: Assist Child with Treatment of ASD

1. What is safety measure?

Answer: An action, procedure or contrivance designed to stop or decrease the occurrence of accident or risk of injury, loss and danger to persons, property or the environment is called safety measures.

2. What is special need?

Answer: Any of various difficulties (such as a physical, emotional, behavioral, or learning disability or impairment) that causes an individual to require additional, extra or specialized services or accommodations (such as in education or recreation) students with special needs.

3. What is SLT?

Answer: Full meaning of SLT is Speech and Language Therapy. The children or persons who have speech problem and can't speak properly or at all, SLT are provided to them, so that they can overcome the speech difficulties

4. Why is disabled child called a child with special needs?

Answer: A disabled child has a different life style, different ways of communication, different interaction, different food habit and behavioral variation. As a result, a disabled child requires special care and special attention. So, he or she is called a child with special needs as his or her needs are different and special from others

5. What kind of treatment is essential for autism spectrum disorder (ASD)?

Answer: Treatment applied for the child with autism is not satisfactory, especially medical treatment. There is no medication for this to cure or reduce the symptoms of autism. Some treatments are performed according to the symptoms developed like spasticity, gastrointestinal problems, anxiety, depression, muscle spasm, insomnia etc.

6. What is applied behavior analysis?

Answer: Applied Behavior Analysis (ABA) is an approach to understanding and changing behavior. It's not a specific therapy itself, but a range of different strategies and techniques that can be used to help autistic people learn new skills and behavior.

Task Sheet-3.1 Educational Intervention for the Child with Autism Spectrum Disorder

Scenarios: A child with ASD, who is 12 years old. How you will educate him/her in a proper way.

Tools required: No specific tools are required but some equipment for extra-curricular activities shall be needed to educate the child with autism such as audio-visual sets, color book, color pen or pencil, drawing book, white board, projector screen, blocks etc.

Working Procedures:

Very easy, sophisticated and strategic ways should be chosen to educate a child with autism spectrum disorder (ASD) which may be as follows-

1. Build up friendly relationship: Creation of a friendly relationship with the child concerned will allow me to educate him/her. Autistic child does not allow any stranger person to be in an attachment.
2. Changing home environments: According to the choice of the child home exteriors should be arranged that will be helpful to educate him/her. What interior environment is appropriate for a sound child is not appropriate for special child.
3. Joyful arrangement of education: There should be such an arrangement for education which will provide learning along with enjoyments. Such as- drawing practice, coloring practice, making tower of blocks, bridge making, copy circle, triangle, cross etc. use of musical instruments, use of audio-visual instruments, dance practice etc.
4. No frequent change of learning routine: Child with autism cannot cope with frequent change of anything. Any change in daily routine strikes him/her brain.
5. Send or take him/her to special school: The child concerned shall be taken on a regular basis to a special school where there are special and autism friendly education techniques are available. In addition to it, behavioral therapy, speech and language therapy, physical therapy, occupational therapy are provided there.
6. Creation of peer group: He/she should be helped to create a peer group. This group shall be consisted of such persons whom he/she likes most.

Review of Competency

Below is yourself assessment rating for module **Manage Children with Special Needs**

Assessment of performance criteria	Yes	No
Autism spectrum disorder and its types are defined		
Sign and symptom of autism spectrum disorder are recognized		
Causes of autism spectrum disorder are explained		
Risk Factors of autism spectrum disorder are interpreted		
Symptoms of ASD in child are identified		
Educational intervention is applied.		
Medical management is provided.		
Family is involved in support to children.		
Appropriate diet chart is followed.		
Safety measures are ensured.		
Applied behavioral analysis (ABS) is performed.		
Child is assisted with occupational therapy as prescribed.		
Child is assisted with speech therapy as prescribed.		
Child is assisted with physical therapy as prescribed.		
Child is assisted with pharmacological therapy as prescribed.		
Awareness of ASD is disseminated to family, friend and society.		

I now feel ready to undertake my formal competency assessment

Signed by

Date.....

Development of CBLM:

The Competency Based Learning Material (CBLM) of ‘**Manage Children with Special Needs**’ (Occupation: Caregiving for Infant, Toddler and Children, Level-3) for National Skills Certificate is developed by NSDA with the assistance of SIMEC System, ECF consultancy & SIMEC Institute JV (Joint Venture Firm) in the month of June 2023 under the contract number of package SD-9A dated 07th May 2023.

SI No.	Name & Address	Designation	Contact number
1	Dr. Tahmina Rahman	Writer	01779 073 889
2	Md. Saiful Alam	Editor	01780 390 499
3	Md. Amir Hossain	Co-Ordinator	01631 670 445
4	Mahbub Ul Huda	Reviewer	01735 490 491