

Disaster Response for Individuals with Autism

Setting up emergency shelters and educating staff and volunteers

Individuals with Autism Spectrum Disorder (ASD) can have different needs that should be considered when setting up emergency shelters and training staff and volunteers.

Environmental modifications

- If the individual is sensitive to bright lights, try to soften lighting, especially fluorescent lights.
- If the child with autism prefers not to be touched, then abide by that.
- For safety, check for sharp-edged furniture, small parts, electrical plugs, and cleaning materials.
- Provide a rest area – somewhere quiet to go when needed. Individuals with ASD are coping with far more incoming information than most people, so they may need to pace themselves to avoid exhaustion.
- Routine and predictability are also vital; individuals with autism need to know what to expect. Try a visual schedule or to-do list.
- Individuals with autism benefit from some information to help orient them to their surroundings. Show them the layout and provide a map if possible.
- Provide support by pairing the individual with a quiet, caring person who can be aware of them and lend assistance if requested. First check with the individual with special needs; respect their confidentiality and privacy.

Behavioral strategies

- Minimize wait time for individuals when checking families in, distributing meals, etc.
- Provide breaks for caregivers so they do not become overwhelmed.
- Ask families how you can help the individual feel more comfortable. Follow their lead on responding to challenging behavior and ask them how to reinforce positive behavior.

Strategies to improve communication

- Ask caregivers about how their child communicates: verbal, nonverbal, and alternative or alternative strategies used by the child, such as taking your hand and placing it on something that they desire.
- Talk directly to the child, not to their caregiver. Even if the child does not speak verbally, they may understand what you say.
- If you don't understand what the child said, politely ask them to repeat themselves or show you what they want instead.
- Speak in simple sentences just at or one step above the level of communication that the child uses. For example, if the child speaks in two-word phrases, try to keep your sentences to four words or fewer if you want them to understand.
- Some children may need more time to process language and respond to you. Try counting to 10 in your head to give them enough time to process what you have said.

- Consider ways that you can combine visual information with verbal to help children with ASD comprehend lessons better and keep them engaged.
- Avoid using figurative language when speaking to children with ASD. They often have literal interpretations of what is said and could be disturbed by some metaphors.
- Give clear choices such as “do you want to color or play outside?” instead of asking open-ended questions such as “what do you want to do?”
- Choices are also easier to depict visually. For example, you could hold up pictures of activities and have the child point to or pick up the picture of their choice.
- Children who use augmentative and alternative communication (AAC) may prefer using picture symbols to choose snacks or activities. They may also use a programmed voice output device to make choices or answer questions.

What is Autism?

Autism Spectrum Disorder (ASD) refers to a group of developmental disabilities that affect a person’s ability to understand what they see, hear, and otherwise sense. It is a brain disorder that affects communication, social interaction, and behavior. Individuals with ASD typically have difficulty understanding verbal and nonverbal communication and learning appropriate ways of relating to other people, objects, and events. No two people with ASD are the same. As its name implies, ASD is a spectrum disorder that affects individuals differently and with varying degrees of severity. Additionally, ASD is often found in combination with other disabilities such as anxiety, depression, GI issues, and seizures.

A person with ASD might:

- have severe language deficits or differences
- talk about or show interest in a restricted range of topics
- not look at objects when another person points at them
- have trouble relating to others or not have an interest in other people at all
- avoid eye contact and want to be alone
- have trouble understanding other people’s feelings or talking about their own feelings
- prefer not to be held or cuddled or might cuddle only when they want to
- appear to be unaware when other people talk to them but respond to other sounds
- repeat or echo words or phrases said to them, or repeat words or phrases in place of normal language (echolalia), use vocalizations that are not words
- have trouble expressing their needs using typical words or motions
- laugh, cry, or show distress for no apparent reason
- repeat actions over and over again
- have unusual reactions to the way things smell, taste, look, feel, or sound
- be oversensitive or under-sensitive to pain

For more information or assistance, please contact the Autism Society of North Carolina.

5121 Kingdom Way, Suite 100

Raleigh, NC 27607

800-442-2762

www.autismsociety-nc.org