First Responders and Autism
Thinking Outside of the Box

Our Education System

“Everybody is a genius. But if you judge a fish by its ability to climb a tree, it will live its whole life believing that it is stupid.”

-Albert Einstein
Every person with autism is unique!

“If you’ve met one individual with autism, you’ve met one individual with autism.”

- Stephen M. Shore
Prevalence of Autism: Sesame Street character
Autism is a complex neurobehavioral condition (not a mental illness) that includes impairments in social interaction and developmental language and communication skills combined with rigid, repetitive behaviors.
Key Deficits for Autistic People (3 Areas)

Social Interaction

Impairments can include:

• difficulty using nonverbal behaviors such as eye-gaze, facial expressions, body postures, and gestures.
• difficulty forming peer relationships.
• difficulty seeking out others for the purpose of sharing enjoyment, interests, or achievements.
• difficulty with the “back-and-forth” nature of relationships for social or emotional purposes.
Communication

Impairments can include:

- delay or lack of development of spoken language.
- difficulty starting or maintaining a conversation.
- using stereotyped (“repetitive, often seemingly driven, and nonfunctional,”) or idiosyncratic (odd or peculiar) language.
- lacking variety and spontaneity in make-believe play or social imitative play.
Impairments can include:
• being preoccupied with an interest—intensity or focus is abnormal.
• being inflexible and sticking to specific routines or rituals that may not be “purposeful.”
• using stereotyped or repetitive motor movements such as hand or finger flapping or twirling or whole-body movements.
• preoccupation with parts of objects (drawn to water)(wander from safety)
Signs of Autism

Since Autism is a spectrum, the severity of its symptoms can be from very mild to very severe.

Symptoms of Autism in children include: obsessive interests, repetitive actions/ body movements, hyperactivity, lack of understanding emotions where they be in one’s self or in others, lack of understanding of safety, wanting to be alone, getting upset over minor changes, lack of eye contact and other social skills, misuse of pronouns, repeating words or phrases over and over again (echolalia), meltdowns, aggression, and bad speech. ("Signs of Autism.").
25 Field Response Tips for First Responders

1. Make sure the person is unarmed and maintain a safe distance because they may suddenly invade your personal space. (Hug, poke etc)

2. Talk calmly and softly.

3. Speak in direct, short phrases such as “Stand up now.” or “Get in the car.”

4. Avoid slang expressions, such as “What’s up your sleeve?” or “Are you pulling my leg?” Don’t understand idioms; Very literal

5. Allow for delayed responses (10-15 seconds) to your questions or commands.

6. Repeat or rephrase.
Con’t 25 Tips

7. Consider use of pictures, written phrases/commands, sign language or computer images (Be Prepared to have these on hand)

8. Use low gestures for attention; avoid rapid or abrupt pointing or waving.

9. Examine for presence of medical alert jewelry or tags, or an autism handout card.

10. Model calming body language (such as slow breathing and keeping hands low)

11. Model the behavior you want the person to display. (Even medical procedures)

12. A person with autism may not react well to changes in routine or the presence of strangers, even a uniformed responder.
13. Officers should not interpret the person’s failure to respond to orders or questions as a lack of cooperation or a reason for increased force.

14. Seek information and assistance from parent or others at the scene about how to communicate with and de-escalate the person’s behavior.

15. Avoid stopping repetitive behaviors unless there is risk of injury to yourself or others.

16. If the individual is holding and appears to be fascinated with an inanimate object, consider allowing the subject to hold the item for the calming effect (if first responder safety is not jeopardized by doing so).
Con’t 25 Tips

17. Evaluate for injury: person may not ask for help or show any indications of pain, even though injury seems apparent. May run back into safe place or hide in house because of the feeling of safety.

18. Be aware that the person may be having a seizure.

19. Be aware of person’s self-protective responses and sensitivities to even usual lights, sounds, touches, odors, and animals—canine or mounted patrol.

20. If possible, turn off sirens and flashing lights and remove canine partners, crowds, or other sensory stimulation from the scene.

21. If person's behavior escalates, use geographic containment and maintain a safe distance until any inappropriate behaviors lessen.
22. Remain alert to the possibility of outbursts or impulsive acts (aggressive behavior).

23. Use your discretion. If you have determined that the person is unarmed and have established geographic containment, use all available time to allow the person to deescalate themselves without your intervention. If a life or death situation for person and/or first responder, do what is necessary to maintain everyone’s safety.

24. If in custody, alert jail authorities. Consider initial isolation facility. Person would be at risk in general population.

25. REMEMBER: Each individual with autism is unique and may act or react differently. Be prepared for the unexpected!!
Quick Facts for First Responders

- Individuals with autism can't be identified by appearance. They look the same as anyone else. They're identified by their behavior.

- Some individuals with autism do not have a normal range of sensations and may not feel the cold, heat, or pain in a typical manner. In fact they may fail to acknowledge pain in spite of significant pathology being present. They may show an unusual pain response that could include laughter, humming, singing and removing of clothing.

- Speak in short clear phrases “Get in.” “Sit Down.” “Wait here.” An individual with autism may take longer to respond to directives, and that can be because they don't understand what's being demanded of them, or even just because they're scared, they may not be able to process the language and understand a directive when fearful. (hear the words but not comprehend)

- When restraint is necessary, be aware that many individuals with autism have a poorly developed upper trunk area. Positional asphyxiation could occur if steps are not taken to prevent it: frequent change of position, not keeping them face down. Individuals with autism may continue to resist restraint.

- Adults with autism are just as likely to hide, like children, in a fire situation. Closets, under bed and behind furniture checks need to be done during search and rescue.

- These individuals are a bolt risk after rescue. Firefighter must stay with the individual with autism.
Good Examples
Amazing information and scenarios!
More awesome examples and info!
Autism Toolkit
(Have on Hand)
Keep with you items like:

- Means of Communication

- Fidgets or squeeze objects (chew objects)

- Foods (Candy, Crackers, Chips)

- Textured materials (small blankets)