Autism & Wandering

Alison Singer
President
Autism Science Foundation

IACC
January 16, 2019
Timeline

• October 2010:
  – Wandering issue presented at IACC during public comments by President of the National Autism Association
  – Safety committee formed to investigate wandering

• November 2010:
  – Consortium Formed to Study Wandering
    • Jan-Feb 2011: Survey designed
    • March 2011: Survey released to community
      – (Parents of 1218 kids with ASD, 1076 sibs)
Timeline

- **February 2011:**
  - Letter sent to Secretary Sebelius
- **March 2011:**
  - Response received
Initial Data Presented April, 2011

Reported rates of elopement at specific ages: a comparison of children with ASD and unaffected siblings.

Anderson, Law, et al (KKI/IAN)
International Classification of Diseases, Ninth Revision (ICD-9)

The International Classification of Diseases (ICD) is designed to promote international comparability in the collection, processing, classification, and presentation of mortality statistics. This includes providing a format for reporting causes of death on the death certificate. The reported conditions are then translated into medical codes through use of the classification structure and the selection and modification rules contained in the applicable revision of the ICD, published by the World Health Organization. These coding rules improve the usefulness of mortality statistics by giving preference to certain categories, by consolidating conditions, and by systematically selecting a single cause of death from a reported sequence of conditions. The single selected cause for tabulation is called the underlying cause of death, and the other reported causes are the nonunderlying causes of death. The combination of underlying and nonunderlying causes is the multiple causes of death.

The ICD has been revised periodically to incorporate changes in the medical field. To date, there have been 10 revisions of the ICD. The years for which causes of death in the United States have been classified by each revision are as follows:
Occurrence and Family Impact of Elopement in Children With Autism Spectrum Disorders

AUTHORS: Connie Anderson, PhD, a J. Kiely Law, MD, a,b Amy Daniels, PhD, a,b, Catherine Rice, PhD, a David S. Mandell, ScD, a Louis Hagopian, PhD, a,b and Paul A. Law, MD, MPH, a,b

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KEY WORDS
autism spectrum disorders, elopement, wandering

WHAT'S KNOWN ON THIS SUBJECT: Anecdotal accounts suggest elopement behavior occurs in children with autism spectrum disorders (ASDs), that injuries and fatalities can result, and that associated family burden and stress are substantial. However, there has been little research characterizing the phenomenon or its frequency.

WHAT THIS STUDY ADDS: Nearly half of children with an ASD elope, and more than half of these “go missing.” Elopement is associated with autism severity, and is often goal-directed. Addressing elopement behavior is an important aspect of
Nearly half of children with autism wander from safety

The fear that overtakes a parent when a child wanders away from home or other safe place is easily compounded when that child has an autism-spectrum disorder. A new study shows that such behavior occurs more often than in other kids, and that the hazards can be significant.

In a sample of 1,200 children with autism, 49% had wandered, bolted or “eloped” at least once after age 4. 26% went missing long enough to cause their family concern. By comparison, only 13% of 1,076 siblings without autism had ever wandered off at age 4 or after age 4, developmentally the age when such behavior becomes less common, finds the study.

Nearly half of Children With Autism Wander From Safety: Survey

Advocates say a system such as Amber Alerts is needed for these kids

By Maureen Salamon
HealthDay Reporter

MONDAY, Oct. 8 (HealthDay News) -- Nearly half of children with autism wander or "elope" from safety -- often to pursue a special interest or goal -- with more than half of those kids disappearing long enough to cause great concern about their well-being, new research suggests.

Researchers from the Interactive Autism Network, a project of the Kennedy Krieger Institute in Baltimore, found that close calls with traffic injuries were reported for 65 percent of the missing children and near-misses with drowning were reported in nearly a quarter of all cases.
Wandering More Common in Autistic Children Than Once Thought

Twelve-year-old Connor McMillian is one of many children with autism who have repeatedly wandered away from home. (Courtesy Lori McMillian)

By LARA GALAI (@BostonLara)
October 5, 2012

Lori McMillian, 39 of Cary, N.C., lives in constant fear that her 12-year-old son, Connor, who is autistic, will bolt from home or school if he is ever left unsupervised.

"You live in constant prevention mode," said McMillian. "You're always on high alert."

Four years ago, Connor wandered away from a school playground and headed right toward a busy highway.
Anticipatory Guidance Lacking
Wandering Off (Elopement)

What is wandering off (elopement)?
This is the tendency for an individual to try to leave the safety of a responsible person's care or a safe area, which can result in potential harm or injury. This might include running off from adults at school or in the community, leaving the classroom without permission, or leaving the house when the family is not looking. This behavior is considered common and short-lived in toddlers, but it may persist in children and adults with autism spectrum disorders (ASDs). Children with ASDs have challenges with social and communication skills and safety awareness. This makes wandering a potentially dangerous behavior.

Why do children with ASDs wander off?
Parents of children with ASDs report the following top 5 reasons for wandering:
- Simple enjoyment of running or exploring
- Desire to reach a place he enjoys (such as the park)
- Trying to escape an anxious situation (like demands at school)
- Pursuit of a special interest (as when a child fascinated by trains heads for train tracks)
- Trying to escape uncomfortable surroundings (like loud noise)

http://aware.org/docs/wanderingbrochure.pdf, and IAN Research Report: Elopement and Institute, Baltimore, Maryland. This information appeared originally at: www.iancommunity.org/cs/
Other AAP initiatives

• Presentation by Dr. Susan Hyman and Dr. Susan Levy at 2017 AAP meeting.
• Article in AAP magazine in 2017; another one planned in 2019
March, 2018: Kevin and Avonte’s Law

- Still no Appropriation for Kevin and Avonte’s Law
  - Autism “alert”
  - GPS tracking devices
  - First Responder training
1338 ASD missing and “found missing” person cases in the U.S. since 2011, 180 reported fatalities.
On average: 20 cases, 2 to 3 deaths per month. Drowning remains leading cause of death.
Average Age by Year, 2011 to 2016

*Current average age for lethality, 15
**What Increased Lethal/Injury Risk**

- Residential settings, esp. those unfamiliar, near water
- Times of transition, disruption
- Heightened response to stress
- Caregiver/staff distracted
- Commotion, esp. during holidays/family gatherings
- Longer Search Time
- Police unaware, unprepared
Autistic woman, reported missing, dies after being found in creek

By Sun-Times Wire email

A woman with autism died Thursday following a five-hour police search that led to her rescue from a creek in west suburban Bristol.
Body found in pond confirmed as missing Texas City child with autism, officials say


Posted: 4:53 PM, January 06, 2019
Updated: 11:34 AM, January 09, 2019

TEXAS CITY, Texas - A body found in a pond has been identified as a boy with autism who recently went missing in Texas City, officials said Tuesday.
Maddox Ritch, who disappeared from park, died from accidental drowning

The Gastonia Police Department in North Carolina said no criminal charges will be filed.
UPDATE: 12:40 p.m.

The Pittsylvania County Sheriff’s Office said Andrew Yarboro was located Wednesday morning in the 6000 block of Strawberry Road in Chatham, about 1.4 miles away from his home.

They said he had scratches on his back and was very tired, but appeared to be okay.

He was being treated by EMS, helping with the search, when searchers and the boy’s father said he got away from them again.
Body pulled from Genesee River identified as Trevyan Rowe

By Spectrum News Staff | Rochester
PUBLISHED March 12, 2018 @4:16 PM

ROCHESTER N.Y. — Rochester Police say the body recovered from the Genesee River Sunday has been identified as 14-year-old Trevyan Rowe.

Police say they found the body near the Frederick Douglass-Susan B. Anthony Memorial Bridge. They say tips made to the department focused their search efforts along the river in that section.

"State police responded because they have a responsibility for the express way, were unable to find anything," Ciminelli said. "In tracking this back, our investigators located one of the individuals who called and they pointed out the location where they had seen the person standing and in fact I think this individual met with our scuba squad to try to pinpoint the location."

Rowe was last seen leaving School No. 12 Thursday morning. His family says they did not know he was missing until he did not get off the bus with his sister later that afternoon. They say Rowe is autistic and may have been upset when he walked away after getting off the bus Thursday morning.
'He said he was going to kill himself': Trevyan Rowe's history of red flags needed support

If the 14-year-old had a history of suicidal threats and mental health arrest, it's fair to ask if he got the institutional and familial help he needed.

Justin Murphy and
Steve Orr, Democrat and Chronicle

Published 12:44 p.m. ET March 18, 2018 | Updated 9:38 a.m. ET March 19, 2018
IACC Impact:

- April 2010: NAA statement on wandering
- October 2010: NAA IACC presentation on wandering
- April 2011: IAN data

Data created incredible amount of awareness, opened door for resources.
NAA Program Impact:

- Nearly 50,000 NAA Big Red Safety Boxes shipped across the U.S.
- Over $100,000 provided to agencies for tracking technology by NAA
- Ongoing training for agencies, families and service professionals
- No current funding for agency resources, tracking and training
Prevention is Essential.

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<thead>
<tr>
<th>Item</th>
<th>Not Helpful</th>
<th>Helpful</th>
<th>Very Helpful</th>
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<tr>
<td>Door/Window Alarms</td>
<td>2%</td>
<td>19%</td>
<td>78%</td>
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<tr>
<td>Adhesive Stop Signs</td>
<td>12%</td>
<td>38%</td>
<td>50%</td>
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<tr>
<td>Safety Alert Wristband</td>
<td>15%</td>
<td>36%</td>
<td>49%</td>
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<td>Safety Alert Window Clings</td>
<td>6%</td>
<td>33%</td>
<td>61%</td>
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<tr>
<td>Personalized ID Tags</td>
<td>8%</td>
<td>28%</td>
<td>64%</td>
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<td>BeREDy Booklet</td>
<td>2%</td>
<td>35%</td>
<td>62%</td>
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<tr>
<td>Child ID Kit from the National Center for Missing &amp; Exploited Children</td>
<td>3%</td>
<td>35%</td>
<td>63%</td>
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Missing Saratoga boy located with Project Lifesaver
9-year-old with autism was wearing bracelet transmitter

By Rachel Silberstein  Updated 6:00 pm EDT, Saturday, September 29, 2018
Gaston County Sheriff’s Office sees spike in Project Lifesaver requests after search for Maddox Ritch

GASTONIA, NC (WBTV) - In the wake of a community-wide tragedy, more and more people are requesting to be a part of a potentially life-saving program used to find missing persons.
Too many counties still carry age exclusions. Funding for autism and other disabilities needed.

How to obtain a Bracelet:
Eligibility: Age 60 or older, Saginaw County resident, Suffering from a dementia related illness
Contact: Saginaw County Commission on Aging at (989) 797-6880 or 1-866-763-6336
Process: Initial Assessment from a Commission on Aging caseworker to determine eligibility. Once approved, client will be set up with the Lifesaver Bracelet. Staff will make monthly in-home visits to ensure equipment is working properly.
With more than 5 million Americans currently living with Alzheimer's disease and approximately 500,000 new cases of this disease emerging each year, projections pronounce that there could be as many as 16 million Americans that will have Alzheimer's by 2050. To help law enforcement protect this special population, IACP's Alzheimer's Initiatives program is committed to helping first responders improve their knowledge and skills to safeguard this special population.

A STATE-BY-STATE GUIDE TO:

Missing Senior/Adult Public Alert Systems

[Map of the United States with states marked in different colors]
DID YOU KNOW?

5.4 million Americans of all ages currently have Alzheimer’s disease. That could be as many as 16 million by 2050.

First responders need to become skilled at effective interactions with people with Alzheimer’s disease:

“Do’s”
- Introduce yourself and explain you are there to help
- Remain calm, smile, and use a friendly voice
- Speak slowly and ask simple questions
- Check for a tracking device or MedicAlert ID
- Change the topic to something pleasant if the person becomes agitated
- Provide security and comfort (i.e. blanket, water, or someplace to sit)

“Don’ts”
- Don’t take comments personally
- Don’t correct the person
- Don’t approach from behind without warning
- Don’t argue
- Don’t touch without asking/explaining
- Don’t repeat a question too many times as it may provoke agitation

To help law enforcement protect this special population, IACP’s Alzheimer’s Initiatives program is committed to helping first responders improve their knowledge and skills, and interact appropriately with persons with Alzheimer’s disease and their families and caregivers.

For more information, please visit: www.theiACP.org/alzheimers.
Summary

- Wandering/elopelement is still an urgent issue in need of federal support
- Less notifications to NCMEC due to age, but more cases overall
- Major differences in Alzheimer’s versus autism, but similar resources needed
- Increase in average age of lethal cases
- More agencies requesting training, especially centered on interaction
- Mental health and other conditions adding complexity to the issue, more discussion needed
LORI McILWAIN
National Autism Association
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Wandering/Elopement in ASD: 2019 Update
The Justice and Mental Health Portfolio

Maria Fryer
Policy Analyst for Mental Health and Substance Addiction

Programs, Policy Initiatives and Improved Responses
Today’s Discussion:

IMPROVING RESPONSES TO PEOPLE WITH AUTISM/IDD AND ALZHEIMER’S DISEASE

THE JUSTICE AND MENTAL HEALTH COLLABORATION PROGRAM

OTHER LAW ENFORCEMENT INITIATIVES THAT BUILD COLLABORATION AND IMPROVE RESPONSE
BJA’s role is to assist law enforcement at the state, tribal and local levels: Programs and Initiatives that provide the foundation to operationalize Kevin and Avonte’s Law. What have we learned? And, How can we build this together?
National Center on Criminal Justice & Disability (NCCJD) and Serving Safely

• **NCCJD:** In 2013, BJA recognized the need to take a closer look at the prevalence of people with IDD in the Justice System and through the National Arc, the Pathways to Justice Program was established.

• **Serving Safely:** In 2017, BJA recognized the need to increase products and services to support law enforcement in their response to people with MHD and IDD and the first National Center, focusing on the delivery of expert TTA in both areas, was established.
National Center on Criminal Justice & Disability (NCCJD)

- Created in 2013 with funding from Bureau of Justice Assistance
- Advocates at the intersection of criminal justice reform and the advancement of disability rights
  - Serve as a bridge connecting the criminal justice and disability worlds
  - Build capacity to respond to gaps in existing services
Why Pathways to Justice?

Victims/Witnesses
- Not considered credible witnesses
- Targeted for victimization
- Difficulties reporting
- Confuse actions for friendship
- Lack of inclusive services

Suspects/Defendants
- Account for mental state (competency)
- “Cloak of competence”
- Eager to please
- High risk for false confessions
- Confused about who is responsible

Achieve with us.
Disability Response Teams

Multidisciplinary Teams of Community Stakeholders
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<tr>
<th>Objectives</th>
<th>Practical Benefits to Your Agency</th>
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<tr>
<td>Facilitate greater access to mental illnesses (MI) and intellectual</td>
<td>Ensure safe interactions with persons with MI/IDD</td>
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<tr>
<td>developmental disabilities (IDD) training, technical assistance,</td>
<td>Facilitate clear and effective communication between your agency, MI/IDD service providers,</td>
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<td>resources, research, and subject-matter experts to enhance practice</td>
<td>and community stakeholders</td>
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<tr>
<td>Equip police and their service partners with tangible tools and knowledge</td>
<td>Identify partnership strategies and models to refer MI/IDD cases to professionals and community</td>
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<td>to safely respond to and resolve incidents involving persons with MI/IDD</td>
<td>supports rather than jail, when appropriate</td>
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<td>Build and support a national community of practice</td>
<td>Promote the destigmatization of MI/IDD across your agency and in community</td>
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<td>Promote a no-wrong-door approach to MI/IDD training and technical</td>
<td>Support planning, deployment, tactics training, and other operational priorities through the</td>
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<td>assistance</td>
<td>use of data and technology</td>
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<th>Contributions to the Field</th>
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<td>Expose police agencies to a wide range of response models</td>
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<td>Streamline access to other BJA- and federally-funded MI/IDD training</td>
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<tr>
<td>and resources</td>
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<tr>
<td>Identify gaps and recommend an agenda to inform future police-</td>
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<td>oriented MI/IDD research</td>
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Serving Safely

“Local law enforcement is most effective when it has the necessary guidance and tools to ensure the safety of all residents, particularly those who come into contact with the system at higher rates,” said Ron Serpas, Retired Police Chief and Professor of Practice at Loyola University, New Orleans.

“Smart initiatives like Serving Safely will be an invaluable source to any department committing to building and maintaining trust between law enforcement and the communities they serve.”

To Request Technical Assistance:
www.vera.org/projects/serving-safely/training-and-technical-assistance
The Justice and Mental Health Collaboration Program (JMHCP) supports innovative cross-system collaboration to improve responses and outcomes for individuals with mental illnesses or co-occurring mental health and substance abuse who come into contact with the justice system.
Grantees in Category 1, 2 and 3

Nearly 122 million dollars in grants to 482 Awardees from across the nation

Representing 49 states and two U.S. territories, American Samoa and Guam

JMHCP also provides resources for unfunded communities with Training and Technical Assistance.
The JMHCP Program

• Category 1: Collaborative County Approaches
  ▪ ID and train stakeholders, SIM mapping, service gap analysis, data collection, process evaluation, validated screening and assessment, connections to treatment.

• Category 2: Law Enforcement Strategies
  ▪ Law enforcement response model, review of policies and procedures, MOUs with behavioral health, baseline data, peer to peer learning.

• Category 3: Implementation and Expansion
  ▪ Enhancing Law Enforcement, Courts, Pretrial, Corrections, direct services, wrap around services.
The Law Enforcement-Mental Health Learning Sites

The sites serve as national learning sites to expand knowledge, by providing peer-to-peer learning for law enforcement agencies; and respond to technical assistance requests from the field.

1. Arlington (MA) Police Department*
2. Houston (TX) Police Department
3. Jackson County (OH) Sheriff's Office*
4. Los Angeles (CA) Police Department
5. Madison (WI) Police Department
6. Madison County (TN) Sheriff's Office*
7. Portland (ME) Police Department
8. Salt Lake City (UT) Police Department
9. Tucson (AZ) Police Department*
10. University of Florida Police Department
A comprehensive online reference that provides resources for law enforcement agencies to partner with mental health providers to effectively respond to calls for service, improve outcomes for people with mental illnesses, and advance the safety of all.

www.bja.gov/pmhc
• Draws upon the experience of most advanced PMHCs in the nation

• Articulates the core components of a comprehensive and robust PMHC that can produce improvements in communitywide outcomes

• Shifts the focus away from stand-alone training or small-scale programs/teams toward agencywide collaborative responses and metrics-driven performance management
The Stepping Up Initiative

Launched in May 2015

Vision:
There will be fewer people with mental illnesses in jails than there are today
Almost 461 counties across 43 states have committed to reduce the number of people with mental illnesses in jails.
Guidance for Implementing The Stepping Up Initiative

The Six Questions Guide

1. Is our leadership committed?
2. Do we conduct timely screening and assessments?
3. Do we have baseline data?
4. Have we conducted a comprehensive process analysis & inventory of services?
5. Have we prioritized policy, practice, and funding improvements?
6. Do we track progress?
Implementing the Six Questions and Getting Guidance

Project Coordinator’s Handbook

Reducing the Number of People with Mental Illnesses in Jail: Six Questions County Leaders Need to Ask

The Role of the Project Coordinator

Online County Self-Assessment

Sign In
Email Address
Password
Create Your Account
Login

Welcome
The Stepping Up County Self-Assessment is designed to assist counties participating in the Stepping Up initiative or other counties interested in evaluating the status of their current efforts to reduce the prevalence of people with mental illnesses in jails and in determining their needs for training and technical assistance to advance their work.

Take Assessment

More on Your Results

Series of Briefs

IN FOCUS
Implementing Mental Health Screening and Assessment

Why it’s important
To reduce the number of people who have SMH in jail, counties need to have a clear and accurate understanding of the idea of the population that has SMH. Prior to being booked into jail, some people who have SMH may have been diagnosed and may be unaware of their mental illness, while others may have been diagnosed with a mental illness and received discontinuous treatment. Screening and assessment are essential to identifying who should be connected or reintegrated to services and treatment to address their behavioral health needs, which may decrease the likelihood that they return to jail. Having this information will help counties better to determine the treatment resources required to address this population’s behavioral health needs. Moreover, having the ability to understand and accurately identify the number of people who have SMH will help counties to track progress toward their goals.

Why it’s challenging
Implementing a screening and assessment process can be difficult, especially for counties that do not have a behavioral health and criminal justice system to work with. With many people being housed in the jail, it can be difficult to complete the process within the allotted time. This requires a collaborative approach to involve community agencies, providers, and the jail staff.
Enhanced Prevention and Response to Vulnerable Populations

Going Forward:

• Exploring what has been done: what works, what doesn’t work
• What do we know/ don’t know?
• Gaps in knowledge
• Gaps in service
• How can we leverage what we have and help each other?
Additional Resources:

- Justice and Mental Health Resources list
- Law Enforcement-Mental Health Resources
- Justice and Mental Health Program Brief
- Serving Safely one-pager
- PMHC/Effective Community Responses P-C
- Pathways to Justice Handout and Information
Contact Information:

Maria C. Fryer.....Maria.Fryer@usdoj.gov

Thank you!
NCMEC’s Response to Children Missing with Autism

IACC Meeting 2019
National Center for Missing & Exploited Children

- Founded in 1984
- Nonprofit, non-governmental organization
- National resource center for families, law enforcement and other professionals
- Assistance to more than 18,000 law enforcement agencies
- Headquartered in Virginia, with regional offices in California, Florida, New York and Texas

Learn more at missingkids.org
Data reported to NCMEC: January 1, 2007 and December 31, 2016

- 952 children with autism reported missing to NCMEC
- A majority of missing children with autism were male (74%)
- Endangered Runaways made up 61% of intaked cases of children with autism
- The second most common case type was the Lost, Injured or Otherwise Missing (20%).
Additional NCMEC Data

Recovery time:
- 48% of children with autism reported missing to NCMEC were recovered within one day of going missing
- 74% were recovered within one week

Deceased children:
- 43 missing children with autism were recovered deceased (4% of the total 952).
- 72% of the time, manner of death was described as accidental
- For 65% of deceased missing children with autism, drowning was listed as the official cause of death.

Data reported to NCMEC: January 1, 2007 and December 31, 2016
Texas City, TX - 2019
NCMEC’s Response
Building Awareness

- Law Enforcement Checklist, Questionnaire, Search Considerations
- Call Center Protocol
- “Train the Trainer”
- Awareness materials and publications
- Focus Group
- Sensory Friendly First Responder Event
- Partnerships and Trainings
Notifications

NCMEC Call Center

NAA

NIXLE

NEXT DOOR
Lafayette, LA - 2018

SEARCH FOR MISSING 9-YEAR-OLD BOY
EVANGELINE PARISH
SSING 9 YEAR BRYSON THIBODEAUX. AUTHORITIES SAY BRYSON HI
HEADLINES

FOUND!!!
Team Adam Consultants

Team Adam will deploy on cases of missing children with special needs

- Specialized Team Adam search personnel may also deploy

Quickly provide law enforcement with the following recommendations:

- Investigative measures
  - Sex Offenders/Attempted Abductions
- Search and rescue measures
- Recovery and reunification measures
- Other supporting resources
  - Families: Victim Services Support referrals
Team Adam & CART Initiative
Sensory Friendly First Responder Events

How to Host a Sensory Friendly First Responder Event for Children with Autism

According to survey data published in the journal Pediatrics, nearly half of families reported that children with autism wandered or eloped from safe environments, and more than a third of the children who wandered or eloped were unable to communicate their name and/or address. Finding and safely re-recovering a missing child with autism presents unique and difficult challenges for families, law enforcement, first responders and search teams. This failing away or wandering behavior puts these children at risk of accidental drowning, traffic injury and other dangers. As police and EMS personnel are often the first to respond to these situations, it is important that autistic children are comfortable with the various types of first responders, and not fearful or overwhelmed by their presence.

The goal of hosting a sensory friendly event is to familiarize children with autism to the sights and sounds associated with different types of law enforcement, fire and rescue units. This includes introducing them to police officers, firefighters and EMT personnel, demonstrating how different equipment looks, functions and sounds, and other things they may see in the case of a wandering incident, like special K-9 units. Making these resources more familiar may help alleviate some of the fears children may have with rescue and rescue situations.

1. Find the right partners: If you have a school for children with autism in your community, approach them to see if they’d like to participate. Check with public schools and other community groups to find programs for children with autism. Approach local law enforcement/fire/rescue through crime prevention or community policing units to see if they’d like to be part of the event.

2. Assemble a planning committee: Determine a date, time and agenda for the event. Find out from the school/community group personnel if they want it tight and stress-free, or if they wish to keep it more loose key for the kids. Arrange to have ChildEco provided that include maps of existing hazards including water. Distribute NEMC Autism Wandering Tax to participating students and families.

3. Keep it simple: Sometimes less is more, especially with a population that can be overwhelmed with too much stimulation. Make sure the assets are positioned in a way it's easy for kids to access and not too much for the experience.

4. Publicize the event: Let local media know, and follow up, so the event gets good coverage. Make sure the host school/community group has obtained signed permission slips from student parents or guardians before posting any photographs or videos of students.

5. Mobilize social media: Letting your followers know what's happening is a great way to spread the word. And remember: a picture is worth a thousand words.

6. Observe what works: The kids will let you know their favorite part. At one event, a custom police microphone might be a hit. But could other incentives stimulate children at another event? Children with autism activity engage all five of their senses in order to process the scene. Ensure that if the reach out to touch something, it’s not too hot, sharp, or sticky. If they want to race it.

7. Make the event a learning experience for first responders: Remember, they may not have a lot of experience dealing with children with special needs, so it may be new to them all. Gather the first responders on the day of the event and ask an administrator from the school/community group to share some of the coping behaviors that may be observed while interacting with the kids.

8. Get feedback: Once the event is over, talk to parents and teachers to find out how the kids reacted. You’ll want to gather as much feedback as possible to make the next event an even bigger success.

9. Be ready for different responses from the kids: Having adequate support from teachers and aides helps manage the kids and keep the event on track.

10. Thank everyone who participated: It takes cooperation and commitment to pull off an event like this. With the right partners, you can have a great and memorable event for the kids.

WHAT SYMBOL-SUPPORTED RESOURCES ARE AVAILABLE TO USE DURING THE EVENT?

Vocabulary Strips, Helper Bingo, Sensory Communication Board, Word Definitions, and the First Responders social narrative

COMMUNICATION AND SENSORY BOARDS: Consider providing communication and sensory symbols supports throughout the event. Have laminated familiar supports available for attendees to receive or re-read as needed. Any of the symbol-supported materials teachers and facilitators have used for planning could be helpful. Just specifically the Sensory Stacks and communication boards may need to be readily available on the day of the event.

WHAT SYMBOL-SUPPORTED RESOURCES ARE AVAILABLE TO PREPARE FOR THE EVENT?

Participant Survey: Encourage all attendees to complete the 2-page Participant Survey with trusted adults and return to a central location or contact person for compiling. Make a plan to share the results of the survey and your observations of what worked with the original planning meeting for future events.

Paragraph Completion: This symbol-supported Paragraph Completion activity assists attendees with processing and internalizing the lessons taught that day.

The Class Newspaper Activity: This small group discussion activity template is designed to help event attendees learn from each other and have dialogue about their experiences. Consider looping, binding, and classroom publishing a completed work that remains a constant in a classroom library or home reading collection.

The Personal Story Activity: This activity helps event attendees define narratives, and process their personal thoughts and experiences from the day’s events. If laminated and bound as a book, this can be a self-published work by an individual student that is kept, re-read, and shared with home care providers.

All Symbol-supported Materials: Observe any printed materials or digital PDFs to first responders, parent caregivers, media, and attendees with the goal of communicating effectively to children with autism during a safety event.

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OTHER RISKS
Case Illustrations
Children with Autism in Foster Care

- Fifteen percent of reported children with autism were missing from foster care. They were more likely to be Endangered Runaways (79%) and older teens (a mean age of 15)

- A little over half (54%) of children with autism who were missing from group or foster care were recovered within a week after they went missing.

Data reported to NCMEC: January 1, 2007 and December 31, 2016
Results: “Train the Trainer” State Trooper Participant
Thank you! Questions?

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