

## Autism Spectrum Disorders

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A person with an Autism Spectrum Disorder (ASD) may have varying degrees of difficulty with their verbal and/or nonverbal communication, with social interactions, and repetitive behaviors.

Understand that in the event of an emergency these conditions may be made worse by the stress of the situation.

Please support the person by using calm and direct language. Whenever possible explain what you are going to do before you do it, and then give the person time to process the instructions.

### Additional Resources:

#### **Kansas Autism Resources-**

Various resources and links to websites with additional information on Autism Spectrum Disorders

<http://kansasasd.com/>

#### **Autism Internet Modules-**

Training materials for families, schools, and community members regarding individuals with Autism Spectrum

<http://www.autisminternetmodules.org/>

#### **Wandering-**

Access to caregiver and first responder toolkits

<http://awaare.nationalautismassociation.org/>

#### **Kansas Vulnerable Needs Information System-**

Statewide system for emergency planning and preparation

<http://www.helpmekansas.org/default.aspx?AspxAutoDetectCookieSupport=1>

## Emergency Preparedness for Individuals with Autism Spectrum Disorders

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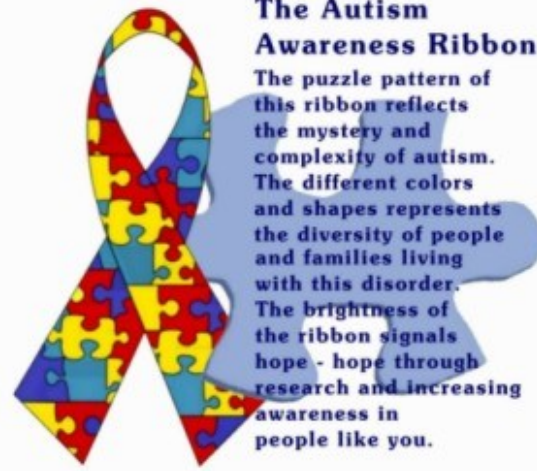
*Lansing  
School District  
~  
Special Education  
Services*

# Keeping Everyone Safe

According to recent estimates, there are roughly 3 million individuals in the United States with an Autism Spectrum Disorder (ASD). Because ASD impacts an increasing number of people in our community it is important to know how to effectively respond to an emergency situation.

First Responders can expect to receive calls related to:

- ◇ Medical Emergencies
- ◇ Fires
- ◇ Water Emergencies
- ◇ Runaways, wandering
- ◇ Other at-risk behaviors



## Effective Responses:

During an emergency a person with ASD, especially children, may hide or run away due to increased anxiety or in response to extreme sensory input (e.g. loud alarms, crowded hallways, or change in routine).

If possible, speak to the caregiver first. Have one person approach the individual and try to reduce as much stimuli as possible (e.g. turn off lights and sirens). Be aware that “reasoning” and “arguing” will not be effective in changing the individual’s behavior.

## Important Directions:

1) Speak in calm short phrases. 2) Give one command at a time. 3) Explain what you are doing and allow time for the individual to respond to your request. 4) Avoid asking a lot of questions. 5) Move the person to safety. 6) Use the support of a trusted, familiar person to assist with information gathering.

## Behaviors to Prepare for:

- ◇ May speak in a monotone voice, may appear rude or aggressive.
- ◇ May have a flat or unusual affect, or their response may seem odd given the situation.
- ◇ May have unusual conversational qualities, may be unable to change the subject, or may repeat the same word/phrase over and over.
- ◇ May be pacing, rocking, or flapping hands. May not recognize personal space.
- ◇ May have sensory difficulties, or may be unable to focus.
- ◇ May accept blame without understanding their actual responsibility.
- ◇ May appear clumsy or uncoordinated.
- ◇ May be unable to generalize from one setting to the next.
- ◇ May display escalated anxiety or aggression.

