

Child Victims with Disabilities

Working with Children with Autism Spectrum Disorder



Overview and Strategies



Autism Spectrum Disorder (ASD) is "a developmental disability significantly affecting verbal and non-verbal communication and social interaction, generally evident before age 3, that adversely affects a child's educational performance. Other associated behaviors include engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences." According to Autism Speaks, in 2020 (9/25/2020) the CDC reported approximately 1 in 54 children in the United States are diagnosed with ASD.

Common Characteristics

- Deficits in expressive communication
 - > May have little to no affect
 - > Speak with monotone voice
 - > May speak very little
 - > May only speak in certain situations or to particular people
 - > May not speak at all
- Referential communication deficits
 - > May assume that the interviewer knows all of the same things as the child (including abuse)
- Deficits in detecting deception
 - > May not recognize that they were tricked or lied to
 - > Will likely not be able to recognize sarcasm
- Increased anxiety under new or overstimulating experiences
 - > May have increased stimulus regulating behaviors (hand flapping, rocking, repeating, fidgeting, etc.)

If possible, ask the following questions of a trusted caregiver or source:

1. How does the child best communicate?
2. What does the child know about being here today?
3. Does the child have any sensory needs I should be aware of?
4. What accommodations, if any, can we make to the environment to make the child most comfortable?
5. Does the child persevere about a particular topic? If so, what topic?
6. Are there any specific redirection techniques that the child is familiar with?
7. Is there anything else you think I should know about communicating with the child?

Effective Communication

If possible, gather information from more than one source about how the child communicates:

- Parents
- Non-offending caregivers
- School personnel
 - > Teachers
 - > One-to-one aides
 - > Speech therapists
 - > Occupational therapists
 - > Physical therapists

Strategies to Consider

DO

- Be clear and predictable with the process
- Keep disruptions to the child's daily routine to a minimum
- Be concrete and literal in communication
- Use short and simple phrases
- Spend time reducing anxiety
- Take breaks as needed
- Consider a multisession approach
- Consider using a social script or social story to familiarize the child with the CAC process

DON'T

- Don't assume that new or concerning behaviors are attributed to their ASD diagnosis and miss potential signs of abuse or neglect
- Don't assume that a child with ASD also has an intellectual disability
- Don't assume that a child with ASD is being deceptive because they are not making eye contact or looking at the person they are speaking with.

For both children with and without disabilities, there should not be an expected reaction or response to disclosing abuse. A study reviewed 124 recorded interviews of children **without** disabilities and graded emotional response during the disclosure phase of the interview: 75% of the children were neutral during disclosure, and the number of abuse events was inversely related to a negative emotional response (Sayfan, L. et al., 2008).

This training is supported by the National Criminal Justice Training Center, Fox Valley Technical College with funds awarded through OJJDP grant #2017-MC-FX-K002.

