



AFC'S GUIDE TO

Autism Spectrum Disorder and Education

April 2026



Advocates for Children of New York
Protecting every child's right to learn

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This guide to Autism Spectrum Disorder (ASD) is for parents, caregivers, and advocates of Autistic children in New York City. We hope this guide will help readers understand their rights in the education system and know where to go for help. It is for informational purposes only.

Note that throughout the guide, AFC has primarily used identity-first language (i.e., “Autistic student” instead of “student with Autism”) to reflect the preference of most Autistic adults and self-advocates, who view Autism as a key part of their identity.

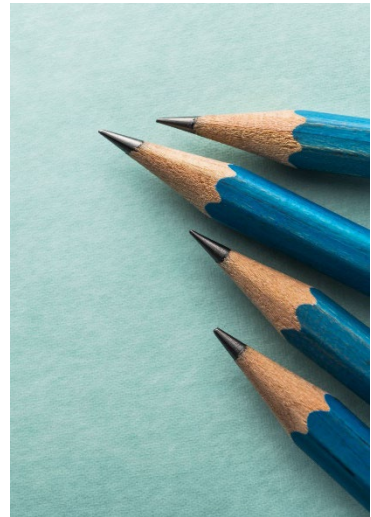
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This guide does not constitute legal advice. This guide attempts to summarize existing policies or laws without stating the opinion of AFC. If you have a legal problem, please contact an attorney or advocate.

WHAT IS AUTISM SPECTRUM DISORDER (ASD)?

Autism Spectrum Disorder (“ASD” or “Autism”) is a developmental disability that affects social interactions, communication, and behavior. Autism is common: 1 in 31 children in the United States is Autistic. It is called a “spectrum” disorder because there is a wide range in Autistic characteristics or traits. Those traits can include things like:

- Trouble knowing how to start, continue, or end back-and-forth conversations
- Difficulty interpreting non-verbal communication, like other people’s facial expressions and body language
- Difficulty understanding sarcasm or non-literal language
- Repetitive movements or speech patterns (for example: repeating specific phrases; hand flapping; lining up objects)
- Liking routine and struggling with transitions or unexpected changes, even when those changes seem small to others
- Having very intense and focused interests, which may make it hard to move on to a new activity or topic of conversation
- Sensory sensitivities (for example: disliking specific textures of clothing or certain foods; feeling uncomfortable or anxious in spaces that are noisy, crowded, or very brightly lit)
- Sensory-seeking behavior (for example: liking to spin, swing, or bounce; crashing into people or furniture; chewing on things that are not designed to be eaten)



DIAGNOSING AUTISM SPECTRUM DISORDER

Your child’s pediatrician should be watching for any early signs of ASD. They should be screening for “developmental milestones” — things a child typically does at certain ages. For example, at 3 months old, a child smiles at other people, watches faces, and follows moving objects with their eyes. See AFC’s [Developmental Milestones](#) or ask your pediatrician for a milestones checklist.

If you are worried about your child’s development, the first step is to talk to your child’s pediatrician. Be as specific as you can when describing your concerns: your child’s behavior, language, eye contact, play skills, and so on.

There are a variety of standardized assessments which clinicians can use to diagnose Autism. These assessments might include observation of your child’s behavior and communication skills, cognitive testing, interviews, or questionnaires completed by caregivers and teachers. Before diagnosing Autism, a clinician will want to rule out other possible disabilities or health concerns that might cause similar behaviors or delays. Early diagnosis is very important because the earlier a child’s needs are identified, the sooner they and their family can connect with resources and start receiving supports and services.

An ASD diagnosis will include one of three “levels,” which describe the amount of support needed:

Level 1:
Requiring support

Level 2:
Requiring substantial support

Level 3:
Requiring very substantial support

Levels do not describe a child’s abilities or individual needs, which often change over time and look different in different situations! A child could have lots of difficulty in one area while needing no support in another. Levels are broad categories that only provide a quick snapshot. They should *not*

be used to decide which services or educational programs are right for a particular child.

EVALUATIONS FOR SERVICES

If you think that your child may have a delay or disability, including Autism, you can ask the City for an evaluation about services. Which agency you ask depends on how old your child is.

Children ages 0–3 are served by the Early Intervention (EI) program, which is run by the NYC Department of Health and Mental Hygiene. See page 8.

Children ages 3–5 are served by the **Committee on Preschool Special Education (CPSE)**, run by NYC Public Schools (NYCPS). See page 10.

Children ages 5–22 who have not yet received a high school diploma are served by the **Committee on Special Education (CSE)**, also run by NYC Public Schools.

NOTE:

EI and NYCPS will sometimes take an independent evaluation instead of doing their own evaluation. However, even if EI or NYCPS do their own evaluations, they should always consider any independent evaluations that are given to them.

Information on starting the process is described in the next section of this guide.

Public and private insurance

Some insurance companies, including Medicaid, cover evaluations as medical expenses. [“Article 16” clinics](#) will provide free evaluations as part of the process to determine if a child would qualify for services through the Office of People with Developmental Disabilities (OPWDD). See page 23 for more information on OPWDD.

Types of evaluations

When a child is referred for evaluations, EI or NYCPS must evaluate the child in all areas of concern. It is important to get a thorough evaluation to make sure that your child's needs have been correctly identified. **If your child doesn't talk, be sure to ask that the evaluation includes non-verbal testing tools.** Your child may have knowledge and skills that they cannot express through spoken language.

Evaluations done through EI or NYCPS can include:

- A **social history** (a history of your family and your child)
- A **psycho-educational** evaluation (measures IQ, or cognitive ability, and academic levels)
- A **speech/language** evaluation
- An **occupational therapy (OT)** evaluation
- A **physical therapy (PT)** evaluation
- **Classroom observation**
- A review of **health records**
- A **Functional Behavioral Assessment (FBA)**
- An **assistive technology** evaluation

NOTE:

If you tell EI or the public schools that you think your child may be Autistic, they should also do a screening for Autism. If a doctor has already diagnosed your child with ASD, you should give EI or the school a copy of the diagnosis.

Other types of evaluations you may want to have done are:

- A **neuropsychological** evaluation to assess a child's cognitive functioning, academic functioning, language skills, visuomotor skills, attention and executive functioning, memory, and social-emotional and behavioral functioning. It can lead to or confirm a diagnosis and help you better understand your child's learning needs.

- A **psychiatric** evaluation to assess social-emotional functioning, mental health, and behavioral needs.
- An **audiological** evaluation, which assesses a child’s hearing and possible hearing sensitivities.
- An **assessment for allergies** to screen for underlying food or environmental allergies. Children who are non-speaking or who struggle to express themselves may communicate through behaviors when they have physical discomfort.

PARENTS’ RIGHTS IN THE EVALUATION PROCESS

For evaluations through Early Intervention or NYC Public Schools:

- ✓ You have the right to consent (agree to) or refuse to consent to special education evaluations and services.
- ✓ You have the right to receive a copy of all your child’s evaluations.
- ✓ If you speak a language other than English, you have a right to ask for evaluations to be translated into your preferred language, either in writing or orally.
- ✓ Once your child starts getting special education services, a re-evaluation should be done at least every three years. This is called the “triennial” evaluation. You do not have to wait three years before asking for a new evaluation. You can ask for a re-evaluation up to once a year. You may want to ask for an evaluation if your child is not making progress or their needs have changed.
- ✓ You have the right to ask for independent evaluations from NYCPS if you think their evaluations are not correct or if they haven’t done an evaluation.

EARLY INTERVENTION

What is Early Intervention (EI)?

EI is a program run by the NYC Department of Health and Mental Hygiene that evaluates and serves children from birth to 3 years of age who have developmental delays or disabilities and their families. EI services are free and may be provided at your home, a child care center, or an EI agency. While services should be provided in person, families may also be offered services by telehealth (by video on a phone, tablet, or computer).



Why is Early Intervention important?

The earlier a child's delays or disabilities are identified, the sooner they can get supports and services to help them learn. The brain is developing and changing very quickly in early childhood, which means services can have a big impact when it comes to developing important skills!

How do I refer my child for EI services?

If you think your child (ages 0–3) has ASD or another disability or developmental delay, you can make a referral by calling 311 and requesting EI evaluations or visiting the [Early Intervention Portal](#).

What happens if my child is eligible for EI services?

If evaluations show that your child is eligible for EI, an **Individualized Family Service Plan (IFSP)** is created. An IFSP is a written plan that states the services EI will provide and the goals of these services. The IFSP is created by a team that includes you (the parent), the service coordinator, the Early Intervention official, the evaluator, an interpreter who speaks your language if you need one, and anyone else you invite. The IFSP is reviewed every 6 months and re-evaluated every year by the IFSP team.

What services can my child get through EI?

EI services may include:

- Special instruction
- Speech therapy
- Occupational therapy
- Physical therapy
- Applied Behavioral Analysis (ABA) or other specific interventions (see page 18)
- Family training
- Assistive technology
- Nutrition services
- Respite care (short term care to give parents a break)

Where do I get more information?

Two helpful guidebooks are [Advocates for Children's Guide to Early Intervention](#) and [New York State's Early Intervention Program: A Parent's Guide](#).

What happens after Early Intervention?

Most Autistic children will be eligible for preschool special education services when EI services end. Your service coordinator should discuss this transition process and help you get started a few months before your child's third birthday.



SPECIAL EDUCATION

What is special education?

NYC Public Schools (NYCPS) provides evaluations and services for children from ages 3 to 22 who have a disability that impacts their education. Evaluations and services are free to families.

For preschoolers (ages 3–5), services may be provided at your child’s 3-K or Pre-K program, child care center, home, or a service provider’s office. For school-age students (ages 5 and up), services are usually provided at school.

How do I refer my child for an evaluation?

The [Committee on Preschool Special Education \(CPSE\)](#), run by NYCPS, evaluates and serves preschool-age children who have disabilities. If you think your 3- to 5-year-old child may need special education services, you should send an email to the CPSE where you live and ask for an evaluation. If your child is receiving EI services, you can ask your EI service coordinator for help with the transition to [preschool special education](#).

If you think your school-age child (ages 5–22) may need special education services, you should write a letter to your child’s public school asking them to evaluate your child. If your child is not enrolled in a public school or attends a charter school, you should write to the Chair of the [Committee on Special Education \(CSE\)](#). If your child is receiving CPSE services, the CPSE should refer your child to the CSE the year before your child enters kindergarten.

What happens if my child is eligible for special education services?

If evaluations show that your child is eligible for services, an **Individualized Education Program (IEP)** is developed. An IEP is a written plan that states

the services NYCPS will provide and the goals of these services. You (the parent) are an important and required member of the team that creates the IEP! The team also includes an interpreter who speaks your language, if you need one, and anyone else you invite.

On the IEP, school-age students (those in kindergarten or above) will receive one of 13 classifications of disability that are set out in federal law. One of the classifications is “Autism.” Depending on their learning needs, some Autistic children may have a different classification of disability, such as “speech or language impairment.” All preschoolers with IEPs will have a classification of “preschool student with a disability.”

NOTE: A child’s school placement and services should be based on their individual strengths, challenges, and learning needs, NOT on the classification on their IEP.

What services are available?

Students with disabilities (ages 3–22) may receive a wide range of services and supports, based on their individual skills and needs.

RELATED SERVICES & SUPPORTS

- **Assistive Technology (AT):** AT is equipment, devices, and services to help your child move, communicate, or access the curriculum. Examples include communication boards, screen readers, speech-to-text software, and switch-adapted equipment.
- **Counseling:** Counseling is a related service that helps your child learn skills to manage their behavior, express their feelings, and build relationships.
- **Hearing and Vision Education Services:** These are specific modifications, techniques, and equipment for children with hearing or vision loss.

- **Occupational Therapy (OT):** OT is a related service to help children develop fine motor skills, visual perception, and sensory processing skills.
- **Paraprofessional:** A paraprofessional (also called a “para”) is a one-to-one assistant who helps a child with behavioral needs, some medical needs, or toileting during the school day or on the bus.
- **Parent Training and Counseling:** This service teaches parents how to help their children make academic progress and address their children’s educational needs. NYCPS must offer parent training to parents of Autistic children.
- **Physical Therapy (PT):** PT is a related service that helps children develop gross motor skills, build strength, and improve range of motion.
- **School Health Services:** Health services can include things like a one-to-one nurse or support taking medicine at school.
- **Speech Therapy:** Speech therapy is a related service to help children develop receptive and expressive language and articulation.

Students with IEPs can receive related services only, or they can receive related services and one of the programs below.

PRESCHOOL SPECIAL EDUCATION PROGRAMS

Special Education Itinerant Teacher (SEIT): A SEIT is a special education teacher who works one-on-one with your child in a preschool or child care setting or at your home.

Special Class in an Integrated Setting (SCIS): A class with preschoolers with and without disabilities.

Special Class: A small special education class usually consisting of 6, 8, or 12 students, a special education teacher, and two teaching assistants.

There are also home programs and residential programs, but these are less common. To learn more read our Preschool Special Education Guide

SCHOOL-AGE SPECIAL EDUCATION PROGRAMS

Special Education Teacher Support Services (SETSS): A special education teacher works with a student individually or in a small group of students for part of the day.

Integrated Co-Teaching (ICT) Class: Students with and without IEPs are educated together in a regular-sized class with two teachers: one general education teacher and one special education teacher.

Special Class: The student is in a small special education class (a class in which *all* students have IEPs) in a neighborhood (District 1–32) school.

Special Class in a Specialized School (District 75): A separate school district, District 75, runs some special classes. These classes can be in the same building as a non-District 75 school with general education classes, or in a separate building that only has District 75 special classes. For children who need a lot of support, NYCPS often recommends a six-student class in a specialized school (i.e., 6:1:1 = 6 students, 1 teacher, 1 paraprofessional). However, Autistic children may be in larger classes depending on their needs.

District 75 Inclusion Program: Autistic students with lower support needs may attend general education classes in District

NOTE:

Every child with an IEP has the right to attend school in the **least restrictive environment (LRE)** in which they can make meaningful progress. NYCPS should only recommend a small special education class if a child could not make progress in a larger class, even with supports and services.

I–32 schools with supports from District 75, such as a paraprofessional and special education teacher who work with the student for parts of the day and help change the classroom curriculum for the student. This IEP recommendation is typically recommended after a student has attended a District 75 program, but it can be recommended when the student is already attending a District I–32 school.

Residential Placements: A student with high support needs who requires comprehensive services on a 24-hour basis may be eligible for placement in a residential program.

Home and Hospital Instruction: A student who is temporarily unable to attend school may receive instruction and services at home or in the hospital.

TRANSPORTATION

All preschool children with IEPs recommending a Special Class or SCIS have a right to busing from their home to their school.

If your child needs [accommodations](#) such as an air-conditioned bus, limited travel time, or an individual paraprofessional for the bus, your child’s doctor will need to fill out [forms](#) explaining why the accommodations are needed.

To learn more about special education process, including evaluations, the IEP meeting, available services, and your rights throughout the process, please see AFC’s [Guide to Preschool Special Education Services](#) (if your child is ages 3–5) and [Guide to Special Education](#) (if your child is 5 or older).

PROGRAMS FOR AUTISTIC STUDENTS IN NYC PUBLIC SCHOOLS

NYCPS has several specialized programs specifically designed to serve Autistic students. Each of these programs has an application process and a limited number of spots. Talk to your child's school or visit [NYCPS' website](#) to learn more.

AIMS Program

AIMS (Acquisition, Integrated Services, Meaningful Communication, and Social Skills) is a 12-month special education program for students in grades K–2 with high support needs. The program features small special education classes (six students, all of whom have IEPs) and teaches students using principles of Applied Behavioral Analysis (ABA) and Verbal Behavior Therapy (VB). These instructional methods are described in more detail on page 18 of this guide.

ASD Nest Program

ASD Nest is a program in neighborhood (District 1–32) schools for Autistic students in grades K–12 whose academic skills are at or above grade level and who need support in the area of social functioning and communication. It is an integrated program with small ICT classes (classes with a mix of students with and without disabilities, and two teachers, one special education teacher and one general education teacher).

ASD Horizon Program

ASD Horizon is a program in neighborhood (District 1–32) schools for Autistic students in grades K–12 with academic skills at or near grade level. Horizon students usually have difficulty with language, communication, and social skills and need a smaller class and more behavioral support than is available in the Nest program. The Horizon program features small special education classes (8

students with IEPs, one special education teacher, and one classroom paraprofessional), and instruction incorporates principles of ABA.

In addition to educational services provided by Early Intervention or NYC Public Schools, Autistic children may be eligible for services through the **Office of People with Developmental Disabilities (OPWDD)**. OPWDD is a state agency that serves people of all ages with intellectual and developmental disabilities, including Autism. Services offered by OPWDD can include day programs that teach independent living skills, social skills training, respite care, nursing services, and much more. See AFC's guide [Applying for OPWDD](#) or learn more on [OPWDD's website](#).



PRIVATE SCHOOLS

Sometimes there are no public school options that work for a student with a disability. There are **three ways** NYC Public Schools (NYCPS) can pay for non-public (or private) school when it has not provided an appropriate public school placement for a student with a disability. Some schools are on a list of state-approved non-public schools for students with IEPs and may be recommended by NYCPS. Other schools are not state-approved, and parents must file an [impartial hearing](#) to get tuition funding.

1 **Non-Public School (NPS) recommendation on a student's IEP** (state approved schools only)

NYCPS may decide that the public school system cannot meet your child's needs. In this case, NYCPS will make an IEP program recommendation called "defer to the Central Based Support Team" (CBST). The CBST is an office that matches state-approved non-public schools with students. Its general number is (718) 758-7713. When a child's case is sent to the CBST, a case worker is assigned to search for schools. You may also want to contact schools from the [state-approved list](#) to speed up the process.

2 **P-I (or Nickerson) letter** (state approved schools only)

NYCPS must provide the parent with a P-I letter (also called a "Nickerson letter") when a student's IEP recommends a special class but NYCPS doesn't offer a placement within the mandatory timelines. A P-I letter requires NYCPS to pay tuition for one school year at a state-approved non-public school (after March 15, the P-I will also cover the next school year). To use a P-I letter, you must find an appropriate school on the state-approved list that will accept your child and that can provide the program on your child's IEP. Due to the limited number of non-public schools, getting this letter does **not** guarantee you will be able to find a school for your child.

3 **Payment through an impartial hearing** (*either state approved or non-approved private schools*)

If you can prove at a hearing that NYCPS failed to provide your child with a “free appropriate public education” (FAPE), you may be able to win payment for tuition at a private school, whether or not it’s “state-approved.” You will have to prove that the school you have chosen is appropriate to address your child’s special education needs. An impartial hearing is the only way to have the City pay for a private school that is not on the list of state-approved non-public schools. Parents must ask for a hearing every school year they want their child to attend a non-approved school.

INSTRUCTIONAL METHODOLOGIES

Parents can ask for a student’s IFSP or IEP to include specific research-based instructional practices or interventions, but the City is not required to grant this request. The law says that the child must receive an appropriate educational program that allows them to make progress.

There are many different types of instruction and therapy for Autistic people. Every person with ASD is unique, so no one methodology or approach will be right for every student! Speak with professionals who know your child and do research to help you understand the options and decide what will work best for your child.

Below are some instructional methodologies, listed alphabetically, that are often used with Autistic students.

Applied Behavioral Analysis (ABA)

ABA is an intervention that uses the principles of behavior analysis to teach skills. This means children receive positive reinforcement (a reward) for desired behaviors, and skills are broken down into small steps, which are taught one at a

time. ABA is typically very structured and provided on an individual basis, with a teacher working one-on-one with a child.

ABA can look very different depending on the training of the provider and their approach to instruction! Here are some tips on what to look for:

- Is your child’s program individualized? It should be specific to their unique needs, not the same as what everyone else is getting.
- Are you (the parent/caregiver) and your child (if possible) included in developing the treatment plan?
- Is the therapist working with your child either a Board Certified Behavior Analyst (BCBA) or directly supervised by a BCBA?
- Is the emphasis on helping your child build new skills? ABA should be supportive and focused on improving your child’s quality of life, *not* on getting rid of behaviors without considering the purpose they serve.
- Are your child’s strengths and unique personality celebrated?
- Does the provider use positive reinforcement rather than punishment?
- Is your child’s overall well-being a priority?
An effective therapist will recognize when a child is overwhelmed, uncomfortable, or tired, and will offer a break or a calming activity.

NOTE:

While Autistic children can receive ABA through the Early Intervention program, NYCPS will not list ABA or another methodology on a student’s IEP.



To learn more about ABA, please see the Autism Society of America’s “[Making Informed Decisions](#)” resource.

Developmental, Individual-Difference, Relationship-Based (DIR) Model

The DIR intervention model, also known as Floor Time or Greenspan Method, is a play-based intervention that uses the interaction between people to teach social communication skills. The emphasis is on the emotional development of the child.

Miller Method

The [Miller Method](#) is based on the idea that many children learn better when their whole bodies are physically engaged, rather than sitting still. It uses adaptive equipment, like an “Elevated Square” that lifts children off the ground, to help build skills.

Relationship Development Intervention (RDI)

RDI is a clinical intervention designed to help children build social-emotional skills and develop strong personal relationships. It usually includes an intensive parent training component.

Sensory Integration

This intervention addresses over- or under-sensitivity to input from the five senses (sight, hearing, smell, taste, and touch/movement). Sensory stimuli like loud noises, bright lights, or strong smells can be overwhelming, distracting, or cause intense discomfort for some Autistic children. Sensory integration therapy helps children learn how to process and manage sensory input from their environment. It can also help children who struggle with motor skills, balance, or spatial awareness.

TEACCH (Treatment and Education of Autistic and related Communication Handicapped Children)

A TEACCH classroom emphasizes structure and organization in both the physical environment and the approach to instruction. This means spaces are designed to be sensory-friendly and there are clearly defined and separate areas for each task. New skills are taught by using visual/written supports. For example, there might be a visual schedule that clearly explains what will happen, when, and in what order, so children know what to expect; a checklist with pictures might be used to break multi-step activities or tasks into small, concrete steps.

A key principle behind the TEACCH approach is that the learning environment should build on common Autistic traits and strengths, including attention to detail, visual processing skills, and a preference for routine and structure.

Verbal Behavior (VB) Therapy

Verbal Behavior Therapy is a method for teaching language and communication skills. It is based on the theory that language is learned behavior and can be taught with behavior modification. The emphasis is on the function of language: why and how to use words as a tool for achieving a goal (for example, requesting a glass of water when thirsty).



OTHER POTENTIAL STRATEGIES & ACCOMMODATIONS

There are many strategies, accommodations, and modifications that can be helpful for Autistic students. Here are a few ideas for things a school can do:

- Let students wear noise-cancelling headphones or earplugs to prevent sensory overload
- Offer frequent movement breaks or flexible seating (wobble seats, yoga balls, standing desks)
- Encourage use of fidgets and other sensory tools
- Create a calming corner or quiet zone with a visual menu of coping strategies to choose from
- Provide plenty of advance warning about things like fire drills, school assemblies, special events, and any other changes to the usual routine
- Provide a visual schedule and use visual timers/countdowns before transitions to reduce uncertainty
- Explicitly teach students how and when to use organizational tools like checklists, planners, and color-coding systems
- Offer extended time on tests
- Incorporate students' special interests into lessons (when appropriate and possible)
- Use social stories to help students know what to expect, how they might feel, and how other people might feel or respond
- Provide explicit social skills training (for example, practice taking turns in a conversation or in recognizing unspoken social cues)

TRANSITION TO ADULTHOOD

It is important to plan ahead for your child's future. Do not wait until they are aging out of the school system to investigate and apply for available transition resources! Beginning at age 15, a student's IEP must include a transition plan. Contact your child's school, the IEP coordinator, the school's Transition Team Leader (TTL), the [Transition and College Access Center](#) (TCAC) for your borough, and/or the CSE to:

- (1) learn about program options, timelines, and when to put a student on waiting lists and
- (2) develop a transition plan.

You may also want to contact any external service coordinators for your child, if they have any.

A wide range of programs and services for people with ASD are provided by the **Office of Persons with Developmental Disabilities (OPWDD)**. As described on page 5, parents can apply for OPWDD services at any time and may be eligible for supports much earlier in their child's life. For adult services, apply at least 2 years before your child transitions out of the K–12 school system.

Adult Career and Continuing Education Services-Vocational Rehabilitation (ACCESS-VR), formerly VESID, coordinates adult vocational rehabilitation and related services to help individuals successfully achieve employment.

For more information, contact OPWDD (www.opwdd.ny.gov, (866) 946-9733) or ACCESS-VR (www.access.nysed.gov/vr, (800) 222-5627).

To learn more about the transition planning process and helping students with IEPs prepare for life after high school, please see AFC's [Guide to Transition Services & College Planning](#).

TIPS FOR PARENTS

- ★ Trust yourself! You know your child best—be confident and speak up for them.
- ★ Stay organized! Keep copies of all evaluations, teacher reports, IEPs, and letters from NYCPS. Make requests in writing or by email and take notes at meetings.
- ★ Ask questions! Request explanations if needed. Don't sign anything that you don't understand.
- ★ You have the right to an interpreter at meetings if you need one! You can also ask for your child's evaluations and IEPs to be translated into your home language.
- ★ Communicate with teachers, therapists, and service providers. Share how your child learns best, what you're seeing at home, and follow up if you have concerns.
- ★ If your child is non-speaking, start some type of communication system (for example, sign language or a picture board) as early as possible. Make sure it is used both at home and at school.
- ★ Speak to your child even if they do not respond or appear to be listening. Often Autistic children understand more information than it is easy for them to express.
- ★ Don't assume that a child with ASD doesn't know or can't do something until you have tried to teach them in several different ways.
- ★ Behaviors are often a way of communicating needs or feelings, such as fear, excitement, frustration, or discomfort. Don't assume everything is related to Autism — there could be more going on (seasonal allergies, food sensitivities, another disability, etc.). Observe your child at different times

of day, in different settings, and during different seasons and keep track of what you see. This can help you set up a behavior plan or discover needs for medical care.

- ★ Look for a doctor who understands and treats Autistic children and who is keeping up with the latest medical findings.
- ★ Before starting any intervention, evaluation, or medication, be sure you understand what it is, what it is supposed to do, and any possible side effects. It is usually best to try only one intervention at a time so you know what is or is not helping.
- ★ Don't forget to stop and acknowledge the progress your child makes. Celebrate their successes, their special interests, and the person they are!
- ★ Connect with other parents! You can often find information about supports and programs from other families of Autistic children. There are many parent support groups and listservs.



Our Mission

Advocates for Children of New York (AFC)'s mission is to ensure a high-quality education for New York students who face barriers to academic success, focusing on students from low-income backgrounds. AFC achieves this through four integrated strategies:

- Free advice and legal representation for families of students;
- Free trainings and workshops for parents, communities, and educators and other professionals, to equip them to advocate on behalf of students;
- Policy advocacy to effect change in the education system and improve education outcomes; and
- Impact litigation to protect the right to quality education and to compel needed education reform.

Still have more questions? Please call the Jill Chaifetz Education Helpline:

Monday through Thursday

10 am to 4 pm

866-427-6033 (toll free)

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