

The background features a light gray gradient with several realistic water droplets of varying sizes scattered in the corners. The text is centered and rendered in a bold, red, sans-serif font with a subtle drop shadow.

# **Autism Class & Support Group Introduction**

## **Disclaimers:**


**If you attend this class in-person or via a video/audio-conferencing app for any length of time, it is assumed that you have already read and agreed to the following:**

The information in this class curriculum is strictly for educational purposes and is designed to aid participants in doing their own research. By participating in this class at any level, participants are agreeing to hold harmless Greg Handleton, any/all guest speakers, any/all co-facilitators (any Clermont County employee or any community member), Juvenile Court of Clermont County (Ohio), all elected officials, and all employees/officers employed in or by Clermont County (Ohio) or any of its departments, offices, officials, affiliates, or subsidiaries in relation to a participant's use/misuse of any/some/all of the information, data, advice, input, resources, products, medications, examples, stories, strategies, suggestions, tools, or any related information obtained during the course of their active or passive participation in this class. While information is being made available through this class pertaining to specific treatments, resources, and strategies for assessing, handling, resourcing, and treating Autism Spectrum Disorder in some/any/all of its variations, this information is not medical advice or treatment, nor is it meant to be used in place of actual medical advice or treatment, nor is it meant to turn parents into licensed or qualified treatment providers at home. Unqualified providers always practice at their own risk. Before using any of the information in this curriculum it is incumbent upon the participant to seek direct input and professional support from a licensed treatment provider who specializes in treating people with Autism Spectrum Disorder (and, ideally, other related developmental and neurological conditions) through in-office/face-to-face treatment and consultation sessions. Some of the protocols and/or products described herein have not been approved by the U.S. Food & Drug Administration (FDA). These just-mentioned caveats and limitations, above, are especially applicable when it comes to strategies and/or treatments and/or interventions mentioned and described in this course that are or might be considered to be controversial, un-vetted, or otherwise anecdotal or hypothetical. Your course facilitator will do their best to point out which strategies or interventions are considered to be controversial, un-vetted, or otherwise anecdotal or hypothetical, however, it is incumbent upon the participant to make sure, before utilizing a strategy or intervention, if that strategy, intervention, or resource is considered by the majority of the medical and/or mental health treatment professions to be controversial, un-vetted, or otherwise anecdotal or hypothetical. All information provided is based on information available at a particular moment in time, understanding that it is not possible to access and/or share all relevant information available today, including information that might go against and possibly refute some/all of the information being presented in this class. None of the entities named in the first few sentences, above, are responsible or liable for negative consequences pertaining to participants sharing information with others at home, online, via social media apps, or in the community or pertaining to their attempts to guide others with information gleaned as a result of participation in this class. Participants accept that it is also possible that this curriculum contains errors of inclusion and/or errors of omission, meaning that certain pieces of information might be erroneous, incomplete, or both. Participants understand that nothing about this class prevents them from seeking out second opinions in relation to any/some/all of the information contained herein. Participants are 100% responsible for all outcomes based on the use/misuse of information contained herein.

**Note:** The thoughts, teachings, and opinions of Greg Handleton, the PESI.com Autism Summit presenters, various websites, guest speakers, and other sources are not necessarily known to, agreeable to, or shared by the officers, administrators, commissioners, supervisors, employees, elected officials, or others in the employ of Clermont County, Ohio.

**Before trying any supplement-type products or other products** listed throughout this course, it is **highly recommended** that you first consult with your child's Pediatrician or other qualified medical expert. Consulting a nurse, nutritionist, self-taught herbalist, non-M.D. naturopathic "doctor" or PhD (e.g., Dr. Eric Berg is a doctor of Chiropractic who also promotes various natural remedies), or other non-M.D. practitioner may put you and/or your child at greater risk for malpractice and/or negligence. When consulting with any practitioner, it is recommended that you find out exactly what training they have received. It is never OK for any practitioner to refuse to explain, in detail, what their "Scope of Practice" is and is not. For example, even though I am licensed by my state to diagnose and treat any/all mental and emotional disorders, I would never claim to be adept at treating someone with Anorexia Nervosa simply because I lack specific training in that area and have no supervised experience in working with Anorexic clients.

# Topics to be Covered Throughout This Class/Discussion Group/ Support Group:

- 1) Introduction (Note: There's a video covering all of these introductory slides at <https://clermontcountyohio.gov/Clermont-county-juvenile-community-resource-center>. Please watch this video before attending your first class).
    - This slide looks different in the video
    - All of these “chapters” used to be in one PowerPoint, now they're divided into separate PowerPoint/PDF files
  - 2) Autism Causes, Traits, & Definitions
  - 3) Foundations for Parenting *All* Children
  - 4) Autism & Juvenile Justice
  - 5) Autism Success Stories
  - 6) Autism & Trauma
  - 7) Are Autistic Kids More Prone to Violence?
  - 8) Autism & Gut Health
  - 9) Leveraging Autistic Kids' Strengths & Interests
  - 10) Autism Treatments & Interventions
  - 11) Reducing or Possibly Eliminating Autism Symptoms
  - 12) Autism Products & Resources
  - 13) Helping Autistic People 18 and Older
  - 14) Autism Parent Self-Care
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[PESI] Re: PESI US - new ticket



PESI <support@pesi.zendesk.com>  
To [REDACTED] Gregory

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As long as none of it is for profit, you would be able to share the materials as long as properly cited.

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## 2022 Autism Symposium

What's New & What's Next in  
Supporting Clients on the Spectrum

FOR THE COMPLETE RECORDING PACKAGE VISIT

**PESI.COM**

**Note:** Any slide that is not referenced to a speaker from PESI.com's 2022 Autism Symposium source is a slide that has been developed by Greg Handleton MA, LPCC-S, TRCC either with original content or with content that is referenced to a non-2022 Autism Symposium source. Some of Mr. Handleton's comments will also appear inside of slides being referenced back to other speakers. Also, because this is a living document, please know that some slides as presented might be incomplete.

## From a video by Tom Galperin, founder of Galperin Autism Consulting LLC:

### Trauma for family members

- ▶ Social
  - ▶ Can't go out
  - ▶ Shunned by friends
- ▶ Employment
  - ▶ Job at risk
- ▶ Financial
  - ▶ Paying for services
  - ▶ Parent(s) staying home
- ▶ Exhaustion
  - ▶ Emotional
  - ▶ Physical

What is it *REALLY* like to be the parent or custodial grandparent of an autistic child? Even “mild” Autism and AD/HD present challenges for caregivers that can often drain them so much that they themselves begin to struggle with symptoms of depression, begin to use substances for stress relief, or begin to default to anger and irritation because of just how discouraged they feel in the face of relentless problems that don't seem to have a solution. The cry, “*I've tried everything!*” is often heard, and for many, it does feel like they've tried everything under the Sun for their child, from medication to therapy to special camps and home-based interventions. Well, hopefully this class will provide you with **at least one more “puzzle piece”** that will make it possible for more and more puzzle pieces to be put in place as well.

# Because this class is also something of a “support group” for parents, we need to take a moment to establish some reasonable expectations for our time together:

- 1) **The first thing** is that everyone should be able to feel emotionally and physically **safe and respected**.
- 2) **No one is going to be asked** to share personal information that goes deeper than surface-level disclosures. If you want, you can sit in this class, listen, take notes, but never say a word if you don't want to! Therefore, no one should feel pressured to share anything they're not comfortable with.
- 3) **Confidentiality:** Trust between members is the foundation of group success. To develop trust, people must feel sure of confidentiality. Confidentiality is defined as: *“What's said in group, stays in group”* ... unless **abuse or neglect needs to be reported** as a result of a particular disclosure. Let's consider the level of confidentiality this group would like to adhere to:

- Confidentiality also means that if someone shares their phone # &/ or email address with you, it is not OK to assume that they would be OK with you passing that information along to other group members without their permission.

Working as a group, take a minute to read aloud these questions regarding confidentiality.

1. Can group members talk to each other outside of the group regarding something heard in the group?
2. Can shared material be discussed outside the group if the member's name is not used?
3. Can information be shared with spouses or roommates?
4. Should the member speaking need to ask for confidentiality in each specific case?

Now working with your group, take a few minutes to discuss the issue of confidentiality and questions 1-4. Ensure that every member shares his or her definition of confidentiality with the group.

After your group discussion, the level of confidentiality is set by the most conservative member's definition and recorded below.

The level of confidentiality set in my group is:

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From a class called: *The Parent Project: Changing Destructive Adolescent Behavior*



# Sounds Like This

Facilitator:

*Gee Mike. It sounds like you had a rough week. Did you just want to vent tonight, or did you want to hear any advice the group may have to offer?*

Parent:

*Just wanted to vent / I'd like any advice I can get.*

Facilitator:

*Before anyone says anything, tell us Mike, what concrete steps have you already taken? What have you tried?*

**Remember:**

Classroom-support groups are not Social Media platforms!  
**Here, we actually have to use social skills!**

# A Few More Rules

- Right to Pass
- Time Limits
- Democracy
- Active Listening

From a class called: *The Parent Project: Changing Destructive Adolescent Behavior*

**A word of caution:** Because this topic hits people right where they live every day, and because each participant has most likely experienced intense emotions throughout their Autism journey with their own child/children, it is vital that – when offering input to other parents – that the person offering any input/advice be sure to not be coming across as trying to “get” or “force” the other person to see things a certain way or do things a certain way. **The best way to avoid this pitfall** is to use “I” statements regarding the things you’ve done, tried, and have had success with. *If one of the goals of this group is to foster supportive relationships, then remember, feeling supported begins with HOW people talk to and with one another.*

**Also remember:** If people do form supportive relationships outside of class, there is **no obligation** to continue those connections forever. People are always free to pause or end any such connections without having to give a reason and without expecting to experience retribution through social media ... and without having to feel afraid to return to class. In other words, everyone participating should expect to be able to always feel emotionally (and physically, of course!) safe, respected, and valued. And let's remember, we ourselves are most likely guilty of having ended relationships in our own lives in a less-than-ideal manner, too! Our very human tendency is to always try to come across as holding the higher moral ground when, in reality, we have also messed up in the past, too. This non-retribution rule applies every bit as much to social media as it does to in-person meetings.

# Giving Feedback &/or Advice:

Everyone knows how it feels when someone has given them unwanted advice! So, for the good of everyone, let's look at some guidelines real quick:

Two slides back, the Facilitator asks Mike what concrete steps he has taken BEFORE opening the floor for other group members to provide feedback/advice. This is important, so that everyone is listening to what he has already tried BEFORE jumping in with, "Well, have you tried this? ... or this? ... or this?"

All feedback/advice should be given on the basis of the following principles:

- **Does the Person Want Advice/Feedback?:** Is the person ready and willing to hear and receive the feedback/advice? If you're not sure, go ahead and gently ask. If a group member asks, "What should I do?" and then waits for a response and seems to be listening, then yes, he/she is willing to hear and receive feedback and advice. But, if they ask this question and then responding to feedback/advice with, "Yes, but ...," then no, they're not really asking for feedback/advice. They said they want it, but their response shows that they're still not ready.
- **Is What You are Going to Say Factual AND Appropriate to the Facts They Have Already Shared?:** Before giving advice, be sure you've truly listened to all of the relevant facts. Also, are you getting ready to share factual information or information that's more opinion, wishful, creative, etc.?
- **Have You USED the Same Advice Successfully?:** Is your advice something you yourself have actually tried and been successful with, or practiced and learned as part of this course?
- **Are You Being Kind, Empathetic, & Supportive in HOW You're Sharing?:** Does your advice show a strong understanding of, respect for, and compassion for the other group member's struggle, feelings, and problems? Remember, most problems are not "fixed" with just one step, one ingredient, or one intervention.

*“Most people do not listen with the intent to understand; they listen with the intent to reply.”*

Stephen R. Covey

Author of the international bestseller, *The Seven Habits of Highly Effective People*

**When it comes to parenting, most parents also default to:**

- Giving orders without listening.
- Assuming they already “know” their child and don’t need to learn anything new.
- Telling their child what they think/feel and don’t think/feel.
- Expecting compliance without first working on skill-building.

*Unfortunately, these kinds of habits often spill over into our **adult** relationships!*



## How This Class Will Work:

- ❑ Sometimes going through the PowerPoint curriculum slide-by-slide.
- ❑ The class facilitator will take questions from participants, and then find relevant sections within the curriculum that address the expressed questions/concerns.
- ❑ Your facilitator will do his best to get answers to questions ASAP if unable to provide sufficient information from the curriculum in its current form.
- ❑ Parents may come to the Clermont County Juvenile Community Resource Center at any time during regular business hours (except during Monday and other standard holidays) to read any of the class resource materials in order to take notes. Paper and pen will be provided!
- ❑ If/when a Parent Support Partner (peer-mom or peer-dad) is present, they will also do their best to answer questions from their own experiences and perspectives.
- ❑ Parents may do their own research – whether through books, articles, or online - and then share the results of that research with the class in a non-directive manner.

- ❑ Because this is an open class/group, some participants may find that some material gets repeated for the benefit of newcomers.
- ❑ Parents are free to share phone numbers with one another in order to provide information and/or relational- and emotional-support to one another outside of class (see next slide). **Suggestion:** Get [Google Voice](#), & share *that* number.
- ❑ I am no one's "boss," but I am the class facilitator. If at any point I feel that someone is speaking in a way that is harmful to the group or any individual in the group, I will first ask them to please take a break. If they choose not to, I will have to ask them to leave. I also reserve the "right" to change the course of a conversation at any time. If a ship is heading into a storm, a good captain will take action to move the ship away from danger!
- ❑ If we're reading through a slide, let's try to do our best to read through all of it, saving comments and questions for the end. The reason for this suggestion is because sometimes certain questions will be answered later in the same material being covered.
- ❑ The best way to approach this class and your entire journey with Autism is with: **Joy, Curiosity, Love, Teachability, Grit**, and the idea that progress is achieved in a way similar to when building a **puzzle ... one piece at a time!**

# Parent Support Partners (PSPs):

If you would like to help out as a PSP, especially as this group grows and especially as my two PSPs right now are not going to be available in class each and every week (life gets busy!), please let me know, and we can talk.

It's OK if a PSP limits themselves to "helping out" only during class time, if that's all the time/energy that they can realistically commit to.

## The main things I'm looking for are people who are:

- Full of kindness and thoughtfulness towards others,
- Secure in not having to always be right or always be in control,
- Willing and able to be supportive without being pushy or intrusive, and
- Willing and able to keep their own verbal contributions to the class shorter rather than longer.
  - The fact is, it's totally understandable when a helper is sharing a longer narrative with the group – i.e., Autism is a complex thing, and the gold nuggets are scattered throughout the entire story, right!? At the same time, if a PSP talks for 5-10 minutes or longer, while *what* they are saying is great stuff, the longer parents have to sit and do nothing but listen, the more likely they won't come back next week.

# Mental Health Crisis at Home?: (Clermont County, OH):

Sometimes situations with your child may develop that have you feeling concern for your safety, the safety of your non-ASD child/children, or other household members; or, you may simply recognize that your child is experiencing a mental health crisis that is beyond your expertise. Clermont County now has a **24/7/365** service called **Mobile Crisis**, which is part of a statewide **MRSS initiative (Mobile Response & Stabilization Services)**.

Whenever someone calls Mobile Crisis, both a **therapist** and a **police officer** will be dispatched to your residence. The officer comes to make sure that the home environment and situation are safe for the therapist to be able to do their job. The therapist will work with you to see if there's a way to **(1)** de-escalate the situation, to **(2)** see if coming up with a Safety Plan will be sufficient, or to **(3)** help you figure out options for possible hospitalization.

**Mobile Crisis: 513.752.1555 or 513.528.SAVE.**

Because your child in crisis might be your child with Autism, **it will be vital for you to share this information with both the officer and the therapist**, even if your child has not been formally diagnosed but you feel strongly that they do suffer from mild, moderate, or severe autism. Just know that you as the parent always have the power to **advocate (respectfully!) for your child in any/all situations** and, in fact, you should be prepared to do so ahead of time. One idea is to type up a one-page fact sheet about your child's Autism based struggles and sensitivities, laminate it, and have three copies ready for any crisis: One for you, one for the officer, and one for the therapist. Some of the slides in this presentation will surely be helpful to you as you decide what information to share ... bullet points are best!

# Regional Psychiatric Hospitalization Options:

- Cincinnati Children's Hospital (CCHMC)
  - PIRC (Psychiatric Intake Response Center): 513.636.4124
- SUN Behavioral (Northern Kentucky): 859.308.3712
  - They do accept Ohio Medicaid. I've heard both positives and negatives about SUN.
- The Lindner Center of Hope (Mason): 513.536.4673
  - Last I knew, they take private insurance only
- Glenwood Behavioral (near CCHMC's College Hill campus): 877.707.2612 - however, our Juvenile Court administrators have recently encouraged our P.O.'s to not suggest the use of Glenwood when helping the families they work with ... I'm not sure why.

# Ohio's Parent Guide to Autism Spectrum Disorder

This manual provides an overview of the world of autism spectrum disorders (ASD). It was developed by Ohio parents of individuals with ASD who have a broad range of experience with interventions, resources, and services. The group's work began with the question: *What do you wish you had known the first year your child was diagnosed?* The manual covers a wide range of topics of interest to families, and each chapter contains rich reference materials, including books, websites, and names of organizations where additional information on each topic may be obtained.

[Download the full Ohio's Parent Guide to ASD \(PDF\)](#)

## Chapters

- [Introduction](#)
- [What is an Autism Spectrum Disorder?](#)
- [Screening and Diagnosis](#)
- [Living with ASD](#)
- [Interventions](#)
- [Accessing Educational Services](#)
- [Social Service Programs](#)
- [Advocacy and Disability Awareness](#)
- [Future Planning](#)
- [Definition of Autism Spectrum Disorder](#)
- [Useful Forms](#)
- [Navigating the Rough Waters](#)
- [Letter to Request a Multi-Factored Evaluation](#)
- [Process for Determining Eligibility for Special Education Services](#)



[https://ocali.org/ohio\\_parent\\_guide\\_to\\_ASD](https://ocali.org/ohio_parent_guide_to_ASD)

**If you're joining us via Microsoft Teams**, please know that we fully acknowledge that virtual attendance is not ideal ... for a number of reasons. For these reasons, your class facilitator will do their best to:

- 1) Make sure you can hear, or will repeat, questions and comments being made in the live classroom.
- 2) Turn the camera so that you can see specific slides that are up on the TV or laptop screen.
  - You can also access the PDF versions of the curriculum chapters on the Resource Center webpage.
- 3) To make sure that you are included in any/all conversations.

Please bear with us, as it is certainly a challenge to make sure that virtual participants can also have the best experience possible!

Parents:

*“If you think you can, or think you  
can't, you're right.”*

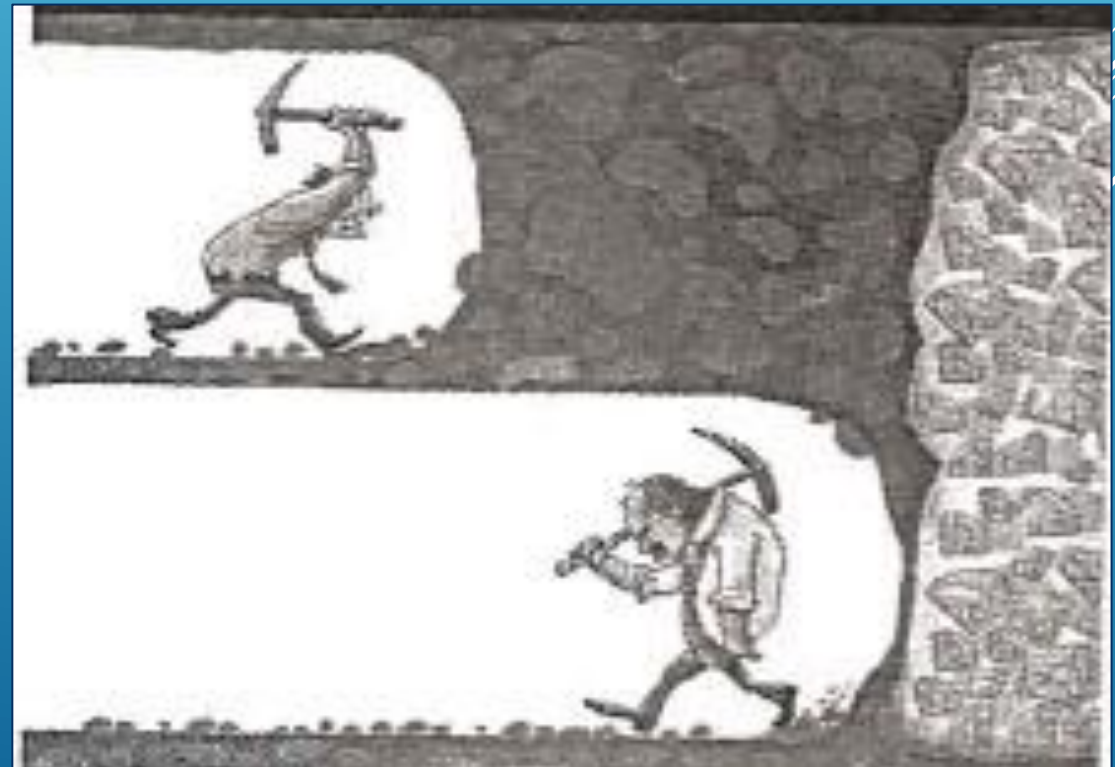
Henry Ford

Consider just how true this quote might be true both for neurotypical people as well as for people with ASD, people who also want to do well and succeed at anything they're trying to do or accomplish. Obviously, an ASD child's initial goals might be extremely simplistic, childish, and even meaningless to others, but as they get older, many will begin to experience increasing levels of frustration if they are not helped to believe that they can accomplish meaningful goals.



... and ...

*“Don’t Quit 5  
Minutes Before  
Your Miracle!”*





**In this image the skier represents the parent of an Autistic child.** The many trees represent all of the many barriers, challenges, and seemingly insurmountable problems. Our human tendency, of course, is to get so focused on the trees that we (1) fail to see the gaps between them, and (2) we tend to crash into them and get stuck in a place of hopelessness and even despair.

**But the better way to tackle challenges and problems is to:**

- (1) Focus on them long enough to get a proper understanding of them,
- (2) While at the same time looking for options, solutions, partial solutions, baby-steps, resources, information we haven't had before, wisdom from others, etc.

**The key** is to (A) **slow down** when you're skiing through a forest so that you don't crash into the trees and, of course, to (B) **FIND THE GAPS** and ski around the trees so that they do not stop you in your tracks.