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Autism Parenting Magazine

ISSUE 187

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Editor’s Letter

Dear Readers,

I hope you are all enjoying the start of the new year! Just as the snow comes down white and sparkling, creating a fresh landscape before us, we can look at that clean slate as the year’s promises of new beginnings. What better way to start anew and rebuild than by nourishing ourselves for strength?

This month’s theme is “Nourish to Flourish,” and while we often think of nourishment as something for our bodies, we also need to think about how we can feed our minds and spirits. With the variety of articles offered, you can plow through the information at once or let the ideas fall gently around you like a winter’s dusting.

May all that you learn strengthen you, gaining exactly what you need for that solid fort. Remember, each beautiful snowflake is unique, whether it falls in a blizzard or in a slow, gentle swirl.

Happy reading!

Sharon Longo

Editor
Autism Parenting Magazine

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NOURISH TO FLOURISH

Autism Parenting MAGAZINE

An award-winning publication on a mission to improve the quality of life for families impacted by autism worldwide.

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Stem Cell Therapy for Autism

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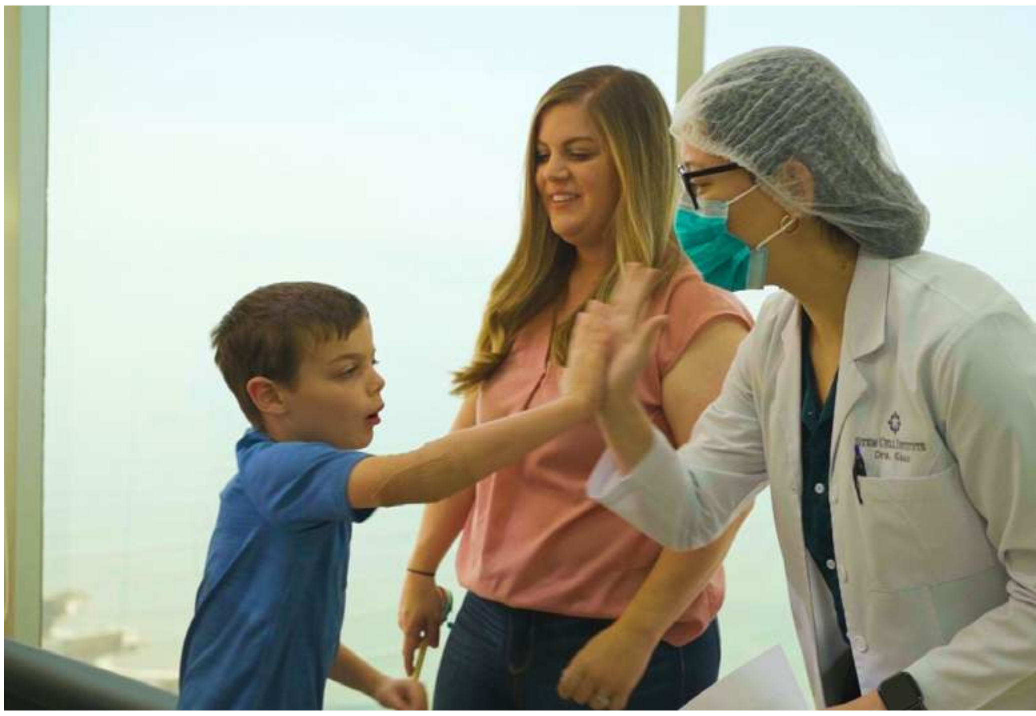
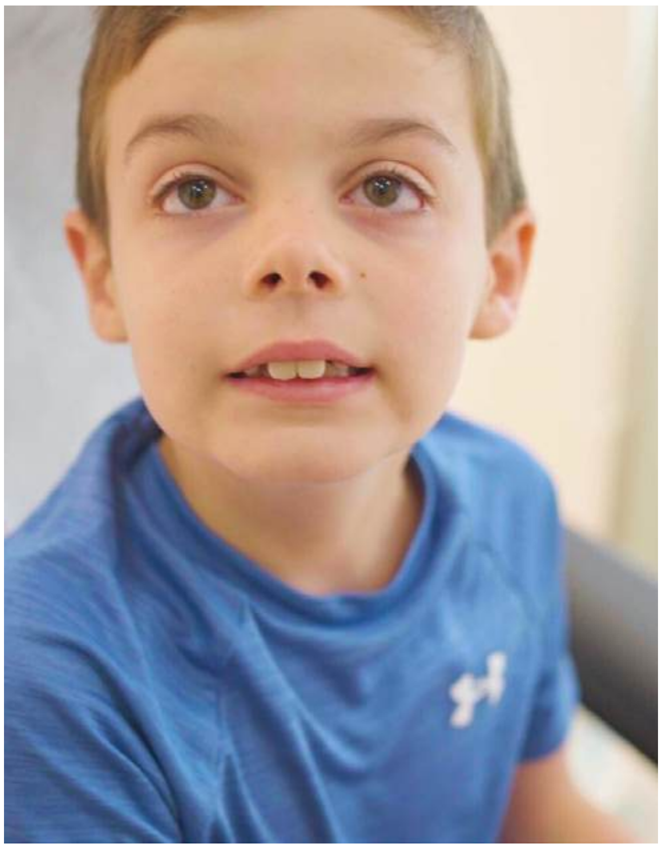
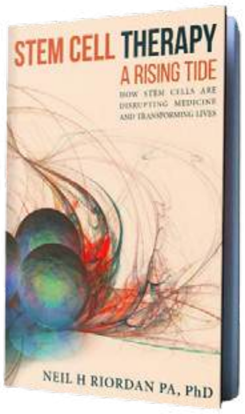




> Before stem cells, he never slept through the night, was hyper, and rarely smiled. Within a week, he began putting himself to bed. Now he sleeps, talks more, is giggly, curious, and genuinely happy. Stem cells have transformed his life.

Amber I.,
Mother of Carter, Stem Cell Institute Patient for Autism

As Carter's parents began exploring stem cell therapy, the Stem Cell Institute in Panama quickly stood out as the only clinic they felt confident considering, based on the quality of research and information they discovered.



Download a Free Book Chapter on Stem Cell Therapy for Autism!

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Dealing with Nutrition Deficiencies

By **Vicky Finlayson, BSc, FNTP Dip, CHC**

Good nutrition can help with calmness, focus, and well-being.

For many autism families, food is a challenge. Between sensory sensitivities, restricted diets, and gut issues, getting a meal on the table can feel like a marathon.

Yet, nutrition supports our children's well-being, fueling growth, energy, brain function, and mood. It helps our children feel calmer, more focused, and more able to connect and learn.

Children with autism are more likely to experience gut imbalances affecting nutrient absorption, and their bodies often have higher needs for specific vitamins and minerals.

When combined with restricted diets, picky eating, or food aversions, nutrient gaps can develop quickly.

What are nutrition deficiencies?

A nutrition deficiency means the body isn't getting enough of the vitamins or minerals it needs to run properly. When this happens, the body goes into "energy-saving mode."

It focuses on keeping the heart beating and lungs working, reducing energy for growth, focus, or emotional regulation.

A child can have bursts of energy but still struggle with sleep, focus, or communication. Their body has the fuel (calories), but not the right building blocks (nutrients).

Many processed foods give quick energy but very little nutrition. Over time, this can leave the body full but undernourished.

For a child who eats only a handful of familiar foods, the body may run low on vital nutrients that support the brain and immune system.

Common missing nutrients

The following are the most common nutrient gaps seen in children with autism:

Zinc

Zinc supports growth, immune health, behavior, digestion, brain function, and sensory processing.

When zinc is low, you might see:

- Craving or eating non-food items (pica)
- Strong food preferences or dislike of certain textures
- More anxiety or irritability
- Trouble with focus and communication
- Digestive issues like constipation or low appetite

Even small improvements in zinc intake can help calm the nervous system and improve food tolerance. Some zinc-rich foods include:

- pumpkin seeds
- beef
- chicken
- lentils

Vitamin D

Vitamin D supports the immune system, brain development, and mood regulation.

Signs of deficiency may include:

- More frequent illness
- Low mood or anxiety
- Tiredness or slow learning
- Gut discomfort

Time in sunlight and foods rich in Vitamin D can help, but many children benefit from a supplement after testing their levels. Some Vitamin D-rich foods include:

- oily fish, such as salmon
- egg yolks

Vitamin B12

B12 helps the brain and nerves send messages properly, supporting speech, focus, and energy. It also helps produce dopamine and serotonin—the “feel-good” chemicals.

Low B12 can look like:

- Speech or language delays
- Poor focus or memory
- Irritability or mood swings
- Clumsiness or poor coordination

Because B12 is mostly found in animal foods, children on plant-based or limited diets often need extra support from Vitamin B12 food sources:

- eggs
- poultry
- fish

Magnesium

Magnesium supports relaxation, sleep, and stress regulation.

Signs of a deficiency can include:

- Restlessness or hyperactivity
- Difficulty falling or staying asleep
- Teeth grinding
- Anxiety or emotional ups and downs

Adding magnesium-rich foods can improve calmness and focus. These include:

- leafy greens
- pumpkin seeds
- black beans

Iron

Iron carries oxygen around the body and powers the brain. It supports attention, energy, and learning.

Possible signs of low iron:

- Low energy or fatigue
- Short attention span
- Poor sleep

- Mood swings
- Slower learning

Iron is best absorbed with vitamin C-rich foods (like berries or oranges). **Always test iron levels before supplementing**, as too much can also cause problems.

Foods rich in iron include:

- red meat
- liver
- lentils

Omega-3 fatty acids

Omega-3s are healthy fats that build brain cells, reduce inflammation, and support a calm mood.

Deficiency may appear as:

- poor concentration
- hyperactivity or impulsivity
- irritability
- difficulty with social connection

Eating oily fish, like salmon, two or three times a week can make a noticeable difference in attention and mood.

Other high Omega-3 foods include:

- chia seeds
- flaxseeds
- walnuts

Protein

Protein is needed for growth, muscle repair, and the production of brain chemicals.

Without enough protein, children may experience:

- slow growth,
- weakened immunity,
- trouble concentrating,
- poor recovery from illness.

Offering protein at every meal, even in small amounts, helps stabilize blood sugar and energy through the day.

Some protein-rich foods include:

- eggs
- chicken
- turkey
- beef

Practical tips for families

Changing a child's eating habits can feel overwhelming, especially if they have sensory sensitivities. Here are some tips to help:

Add variety gently

Start small by doing the following:

- Sneak vegetables into smoothies, muffins, or sauces.
- Mix lentils or pureed beans into pasta sauce.
- Add seeds or nut butters to familiar snacks.
- Offer one new food at a time alongside favorites.
- Keep expectations low and celebrate tiny wins.

Work with sensory preferences

Many autistic children react strongly to textures, smells, or colors. Adjust food presentation instead of forcing new foods:

- Replace unwanted soft textures with roasted or crunchy versions.
- Offer foods in preferred colors or familiar shapes.
- Experiment with temperature, such as cold, crunchy foods or warm comfort foods.
- Avoid strong smells or seasonings at first.

Get professional support

A practitioner who understands both autism and nutrition can

- check for deficiencies through simple lab tests,
- create a plan tailored to your child's sensory and digestive needs,
- guide safe supplement use,
- provide coaching on meal routines and new food introductions.

This support can reduce the trial-and-error stress many families face.

Create a calm mealtime environment

Stress around food can cause children to shut down. Try to make mealtimes positive and pressure-free:

- Offer simple choices ("Carrot sticks or cucumber?").

- Eat together when possible—children copy what they see.
- Avoid force-feeding or bribing.
- Praise curiosity ("You touched it!" counts as progress).
- Let them help prepare or plate the food to build confidence and familiarity.

Visual schedules or social stories can also help prepare them for what's coming at mealtimes.

Helping your child to a healthier future

Nutrition is a powerful tool that supports health, learning, behavior, and overall quality of life. Addressing nutrient deficiencies can help children feel stronger, more balanced, and better equipped to engage with the world.

Nutrition is about honoring your child and giving them the best chance to thrive. Every child, regardless of diagnosis, deserves access to basic health through proper nutrition.

Yet often, when autistic children struggle with health concerns, those needs are dismissed as "part of autism" rather than signals that something can be supported.

A diagnosis is not a limitation—it is a guide. It highlights areas where targeted care can make a significant difference.

By recognizing and addressing our children's nutritional gaps, we can manage symptoms and open a path to greater well-being, connection, and joy.

> “Nutrition is a powerful tool that supports health, learning, behavior, and overall quality of life.”

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Vicky Finlayson, BSc, FNTP Dip, CHC, is the founder of The Happy Healthy Unicorn, Blossom Health, and the Flourishing Hub. With a Bachelor of Science in human biology, she became a registered, qualified naturopathic nutritional therapist. She also trained for non-pharmacological solutions to mental health and neurodevelopmental challenges. A qualified FNTP member, she is passionate about individualized nutrition and balancing the body and brain via a natural approach.

She specializes in neurodevelopmental nutrition for autism, ADHD, and other complex physical and mental health challenges, focusing on the interplay of nutrition, metabolic factors, gut microbiome, the immune system, and brain function. She is driven by her neurodiverse beginnings, her family's chronic health conditions, and her two children's health, with one child diagnosed with non-verbal autism at age four.

Managing Challenging Behaviors in Emergencies

By **Dr. Danny L. McGuire, Jr., MA, MPA, MS, PCC**

Preparation can lessen challenging behaviors in the event of an emergency.

Emergencies are stressful for everyone, especially children with autism. Sudden changes, loud noises, and crowded environments can escalate challenging behaviors, making it harder for caregivers to keep their child safe and regulated.

With thoughtful preparation and compassionate strategies, families can turn emergencies into manageable situations.

Understanding challenging behaviors

Challenging behaviors are actions that interfere with safety, learning, or social interaction. This can include aggression, self-injury, running away, property destruction, or extended meltdowns.

Importantly, these behaviors are not intentional misbehavior; they are functional responses to distress.

Emergencies often intensify these behaviors with alarms, flashing lights, or chaos overwhelming an autistic child's nervous system. Unexpected disruptions to routines, unfamiliar people, and uncertainty may trigger fear and anxiety.

All of these factors can cause behavioral dysregulation, and recognizing this helps caregivers respond to emergencies with empathy and preparedness.

Preparing for emergencies

The most effective emergency response begins long before a crisis. Preparation reduces uncertainty, equipping children with tools to navigate stressful situations.

Autistic children rely on predictability, but emergencies can undermine that. Heightened emotions can lead to panic, aggression, or shutdown. Practicing responses to emergencies builds familiarity and resilience.

Creating a personalized emergency plan

Each child's emergency plan should reflect their unique sensory, emotional, and communication needs. Families may consider:

- **Identifying triggers** such as sirens, flashing lights, or crowds.
- **Developing strategies** like noise-canceling headphones or sunglasses.
- **Documenting calming tools** for regulation, such as weighted blankets, fidget items, or deep pressure.
- **Providing a communication profile** explaining the child's preferred interaction methods: speech, AAC devices, or visual supports.
- **Building an emergency kit** with familiar sensory aids, snacks, medications, and a one-page summary for first responders.

Practice is essential. Modified fire drills, gradual exposure to alarms, and the use of social stories make emergencies less intimidating.

Families should also collaborate with schools and emergency services to ensure plans are understood and honored.

Communication strategies

During emergencies, communication can be especially challenging. Even children who are typically verbal may lose expressive or receptive language under stress.

> Challenging behaviors are actions that interfere with safety, learning, or social interaction.

Effective communication approaches

- Use concrete, literal language such as "hold my hand" or "go to the safe room," rather than vague phrases like "stay calm."
- Provide visual supports like pictorial guides, checklists, or visual schedules.
- Create social stories to explain what to expect in different emergencies, from fires to medical visits.
- Practice through role-playing, allowing children to rehearse safe responses in a supportive setting.

When communication is clear, familiar, and reinforced, children feel more secure and can respond appropriately.

De-escalation techniques

Even with preparation, emergencies may still cause dysregulation. In these moments, use trauma-informed approaches that are respectful of neurodiverse ways of thinking.

Calming tools

Autistic children often benefit from strategies that reduce sensory input and support self-regulation, including:

- Deep breathing exercises
- Weighted blankets or tactile fidgets
- Access to a dimly lit, quiet space

The caregiver's role

Caregivers set the emotional tone. Remaining calm, using a neutral voice, and avoiding sudden movements can help de-escalate a child's distress.

Conversely, caregiver panic can worsen the child's anxiety.

Whenever possible, verbal and visual cues should be prioritized over physical interventions, which should be reserved only for immediate safety risks.

Safety procedures

Emergency protocols for autistic children may require adaptations beyond standard procedures.

- **Safe people:** Identify trusted adults with autism-responsive care training.
- **Safe places:** Designate sensory-friendly spaces during drills or emergencies.
- **Identification tools:** Have items such as medical ID bracelets or emergency cards, which can be critical for first responders in identifying a child's needs.

Consistency is also key. Using the same safe places and familiar routines during emergencies helps buffer against escalation and builds predictability.

Collaboration between caregivers, schools, and community organizations ensures protocols are consistently implemented.

After the emergency

The conclusion of an emergency does not mean its effects are over. Many autistic children may experience lingering anxiety, sleep disturbances, regression, or increased rigidity.

Helping children process

Children may need support to process what happened in developmentally appropriate ways:

- Drawing or picture cards to express emotions
- Social stories or narrative therapy to "retell" the event in a safe framework
- Re-establishing routines quickly to restore predictability

Supporting caregivers

Caregivers also need time to regroup. Reflection, peer support connections, and access to mental health resources help families recover.

Revise emergency plans based on lessons learned.

Steps toward calm

Emergencies will always bring uncertainty. Preparation reduces fear and equips families with practical tools.

Caregivers who understand the unique ways autistic children experience crises—through sensory overload, communication barriers, and disrupted routines—can provide compassionate, evidence-based support.

Personalized plans and adaptive safety strategies can transform emergencies from overwhelming to manageable.

With preparation, calm, and support, families can face these challenges with confidence that they will get through them together.

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Dr. Danny L. McGuire, Jr., MA, MPA, MS, PCC, is a former board member of the Autism Society of Illinois and the father of an adult son with autism, diagnosed at age two. Danny is currently the Executive Director of a collegiate Public Service Institute. With over 35 years of public service experience, he holds degrees in Law Enforcement Management, Counseling Psychology, Public Administration, Foods and Nutrition, and Ethical Leadership. Danny is a credentialed coach by the International Coaches Federation with several areas of specialization. You can contact him at danny@crosstownwellness.com or https://crosstown.pro.

Q&A With Dr. Temple Grandin

This month, Dr. Temple Grandin answers parents' questions about children talking to themselves.

Q Armi from El Salvador says, "My son is a functional autistic child, and he tends to talk to himself. However, if I ask him something, he always responds and follows instructions. What can I do to help him reduce talking to himself?"

A I would have places where you're allowed to do it and places where you're not.

I used to talk to myself, and it's actually thinking out loud. It helped me collect my thoughts, and I used to do it at night in my room. I would tell stories to myself and then get giggling about it.

Give him some places where he's allowed to do it. Places like the dinner table or church would be where you cannot do it. The same goes for stimming and rocking.

Q&A

I was allowed to spin things after lunch in my room, but I was not allowed to spin items at the dining room table. That was the place for manners. Also, at the dining room table, I was taught about taking turns talking, where each family member would have a chance to talk about what they did that day.

A lot of families don't do as much of that. When I was a child, books and toys were not allowed at the dining room table, so let's not have phones at the dinner table. That applies to parents, too, because you have to model that behavior.

Talking to oneself can be a form of self-regulation or a way of thinking out loud. Rather than stopping it altogether, designate appropriate times and places, like alone time in his room.

Just like I was allowed to stim or spin things after lunch in my room, give him space, but teach him that the dinner table or public places are for quiet.

Q Ehiaghe of Calabar, Nigeria, says: “My 5-year-old daughter started speaking when she was 4 years old, although her tone is still quite soft.

“I’ve noticed that she often talks to herself and sometimes responds to questions with extended conversations that don’t always seem coherent. Her monologues often reference TV shows she’s watched, but other times, I struggle to understand the context. I need guidance on how to address and manage this behavior.”

A Let’s start with what the TV shows are. They interest her, so maybe you can have a conversation about the character in the show. One thing the parents need to do is watch the show. Then, try to talk about it in a more coherent way.

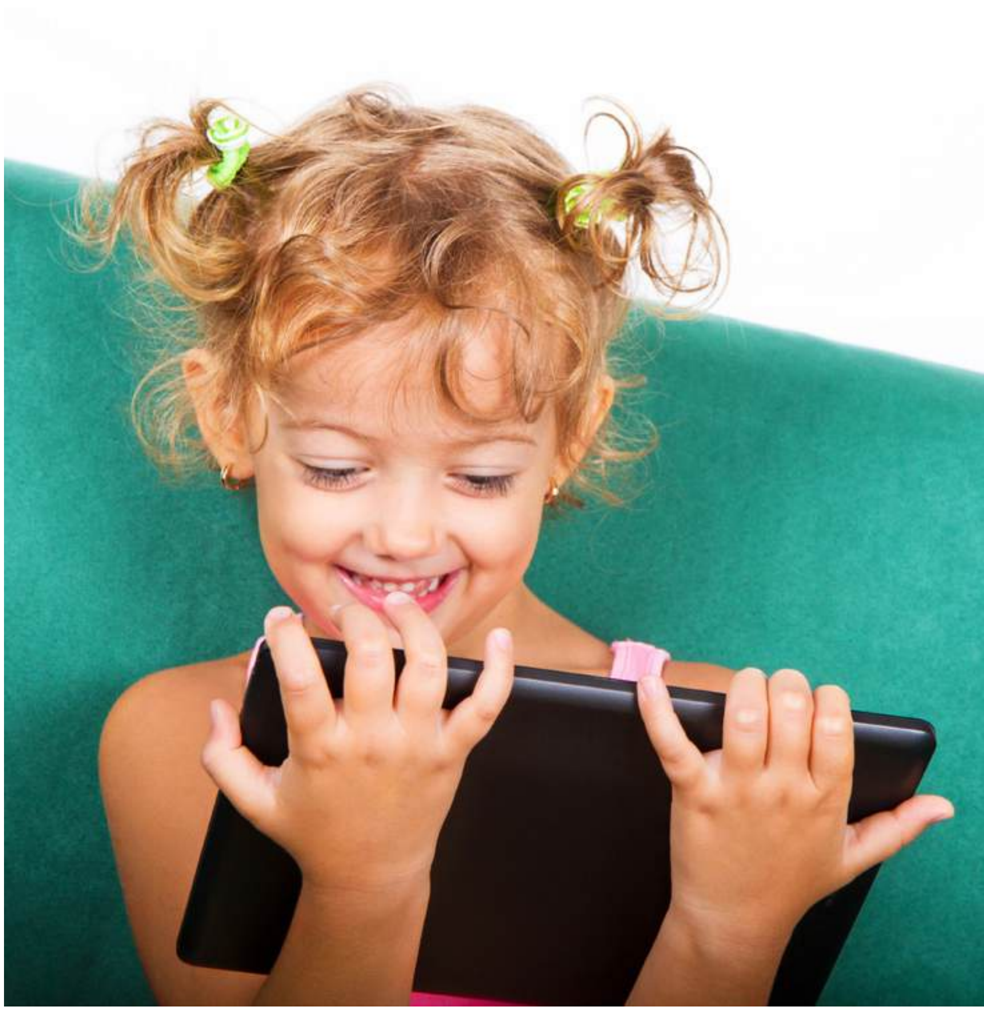
Is there a character in that show that she really likes? Say, “Tell me what the character did in the show.”

I always ask parents of very young children, “Are you making progress?” If you are, then you’re doing the right thing.

Also, you can’t let them sit for four or five hours a day, zoned out in front of a screen. Absolutely not. Get them out for a walk in the park. If you live by a beach, take them for a walk on the beach. If you live in a city, take them out for a walk and show them all the shops and talk about stuff.

When you go to the grocery store, talk about the foods you like to eat. Have the child participate in the grocery shopping. Have them get an item off the shelf.

> “I always ask parents of very young children, “Are you making progress?” If you are, then you’re doing the right thing.”



If you go into a shop, you can discuss some of the items there. If you buy something, make it into a fun activity.

Go outdoors. Look at animals and plants. If I went to the beach as a kid in the summertime, I spent time collecting shells and making things out of them.

The more of these kinds of activities we do, the more it will help with her responses.

Also, kids often become obsessed with certain items, such as a specific type of car. Well, you can read about cars or learn the science behind how cars work. How do the motors work? These are things that can turn into careers.

Take that item the kid is fixated on and expand on it. When I was little, I would draw the same horse head over and over again, and my mother would say, “Let’s draw the stable,” or “Let’s draw the saddle.” Take that fixation and broaden it.

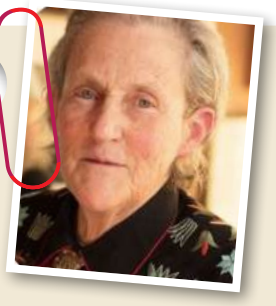
Maybe there’s something on TV, and you can ask about the character, “What kind of car would this character drive?” Try to enter their world, but do it in a more coherent sort of way.

Then the child might begin to ask “why” questions. I went through a whole phase in about third grade. “Why do the lights go out?” “Why is the sky blue?” “Why is grass green?” My grandfather and other people would answer these questions. You could read books together about it if you want to broaden it.

Now, she’s talking to herself. As I previously mentioned, I talked to myself a lot. I was allowed to do it at night when I was in bed, and I would tell myself stories and start laughing out loud. So give her a place where she’s allowed to do that.

Again, ensure she’s not spending hours zoning out in front of a screen. Take her outside, visit shops, walk on the beach—talk about the world around her.

Participation in everyday activities can build both social and communication skills. If your daughter’s making progress, even slowly, you’re on the right path.



Temple Grandin, PhD, is a Distinguished Professor of Animal Science at Colorado State University. Many companies around the world use facilities she has designed for handling livestock. She has also been instrumental in implementing animal welfare auditing programs used by McDonald’s, Wendy’s, Whole Foods, and other corporations. Temple has appeared on numerous TV shows, such as 20/20 and Prime Time. Her books include Thinking in Pictures, Livestock Handling and Transport, and The Autistic Brain. Her books, Animals in Translation and Visual Thinking, have been on the New York Times Bestseller List. Temple was inducted into the National Women’s Hall of Fame in September 2017. In 2022, she was named a Colorado State University Distinguished Professor, and in 2023, she was inducted into the Colorado Authors’ Hall of Fame.

Planning a Party When Your Child Has No Friends

By **Alicia Trautwein**

With a different mindset, your child's party can be fun and focused on them.

It's hard to know what to do when your child wants a birthday party but has few or no friends to invite. You are left with a ton of emotions and stress.

The hardest part is ensuring our children don't feel left out or disappointed on their special day.

With the right mindset, you can make their birthday absolutely incredible simply by shifting the focus to what matters most to them.

Reframing the celebration

Birthday parties don't need to be packed full of a large group of kids to be fun. Instead of focusing on a big celebration, make the day completely about your child.

What are the things they enjoy or their special interests? Build the entire day around that. It could be a dinosaur-themed treasure hunt, a trip to their favorite museum, or a family art project.

Your child will be much happier doing activities they enjoy rather than being in a room full of people they have to entertain themselves.

Creating a supportive environment

If your child doesn't have many friends, start by focusing on the people who already show up for them. They can be family, caregivers, or even neighbors.

These individuals already know and love your child for who they are. Their presence can remove that pressure of having to "fit in."

Another way to build support is with siblings and cousins. They can act as "birthday buddies" who help your child have a fun day.

Sometimes, one cousin cheering them on means more than a dozen kids in the room. Plus, it shows them these built-in buddies care about them and want to see them happy, too.

What's more important to your child is not how many people showed up, but rather the feeling of connection, love, and support, and how they felt with those people who did.

Choosing the right activities

The best birthday parties focus on what the child likes. Coming up with activities they enjoy will make the day incredible. Creating a schedule of events will help them know what to expect.

If you are struggling with ideas, here are a few activities that you could adjust to fit your child's special interest:

Craft stations

What does your child like to create? Consider things like painting, decorating frames, or making sensory toys, which can be fun and relaxing. Plus, the kids get to leave with something they made—a built-in party favor.

Be sure to have cleaning supplies nearby if your child struggles with messes.

Interactive games

What type of games does your child enjoy? Consider board games, scavenger hunts, video games, or even puzzles. These are great, easy tasks that can be fun.

However, if competition is difficult for your child, consider cooperative games where everyone works together.

Outdoor activities

If the weather is good, consider taking the fun outside for a backyard picnic, bubble station, or chalk session. If you're seeking something unique that also aids sensory development, consider a sandbox for tactile play.

Another fun but simple idea is a bubble wrap stomp path. All you have to do is tape down a strip of bubble wrap and let kids jump, stomp, or walk across it.

Creating traditions

Birthdays are about tradition. In our family, we let the kids pick what they want to do for their special day. They enjoy having their favorite meal, going on a shopping trip to their favorite store, or even watching the same movie every year.

These traditions give them something to look forward to, even when the guest list changes.

Creating a comfortable environment

Small changes in the environment can make or break a special day. While decorating is great, you want to consider what works for your child.

Keeping music to a lower level, avoiding sudden noises, and using soft lighting can all make a huge difference. Having your child help with the decorations is also a great way to help them feel in control of their environment.

Consider designating a calm space, such as a quiet corner, for them. This can be any small space with blankets, pillows, stuffed animals, or sensory items like stress balls and fidgets, noise-canceling headphones, and sunglasses.

It can be in their room or another place in the home, but it is a space where they can go when they become overwhelmed.

Also, keep in mind the flow of the party itself. While having a schedule is ideal, make sure to give your child plenty of time to transition between activities.

Incorporating technology

Video calls have drastically changed the game for events. If your child struggles with large crowds or has out-of-town friends, this is a great way to interact with others while also taking a break from bigger activities.

They can sing Happy Birthday (if your child wants that), talk with them, or even watch them open gifts.

> “Having your child help with the decorations is also a great way to help them feel in control of their environment.”

Another option to explore is a virtual party. These can be online games, watch parties, or group video calls, allowing more people to share the day.

Incorporating technology into parties is a unique but helpful option for many children.

Planning for potential challenges

While it is supposed to be a fun day, birthdays can also bring about strong emotions. You will need to be prepared for the possibility of meltdowns or shutdowns. Even positive emotions like excitement can lead to emotional dysregulation. This is why having a calm space for them to go to is important.

Also, be flexible. If a game feels overwhelming, switch to something calmer. If your child needs a break, give them one, even if it's in the middle of an activity.

The goal isn't perfection, but for your child to feel supported on their special day.

Post-party reflection

Once the party is over, take a moment to reflect. Ask your child what they loved most and if there was anything they'd change for next year.

These conversations give them a voice in shaping their future celebrations and help them decompress from the excitement.

Also, consider what you observed. What worked, what caused stress, and what brought your child joy? Keep these thoughts in mind when planning next year's birthday celebrations.

No birthday will be perfect, but you can learn what works and what makes your child happy.

Celebrating the child

At the end of the day, birthdays are about your child feeling loved and celebrated. The size of the guest list doesn't determine that, but how they felt does.

Keeping these ideas in mind, your child's next birthday will be amazing!

Alicia Trautwein, an advocate for autism and neurodiversity, intertwines her personal experience as an autistic mother of four, three of whom are on the autism spectrum, with her professional work. She founded "The Mom Kind," a platform that provides insights on parenting neurodiverse children, and extends her advocacy through a podcast and public speaking. Through her multifaceted efforts, Alicia seeks to educate and support families, promoting a more inclusive society.

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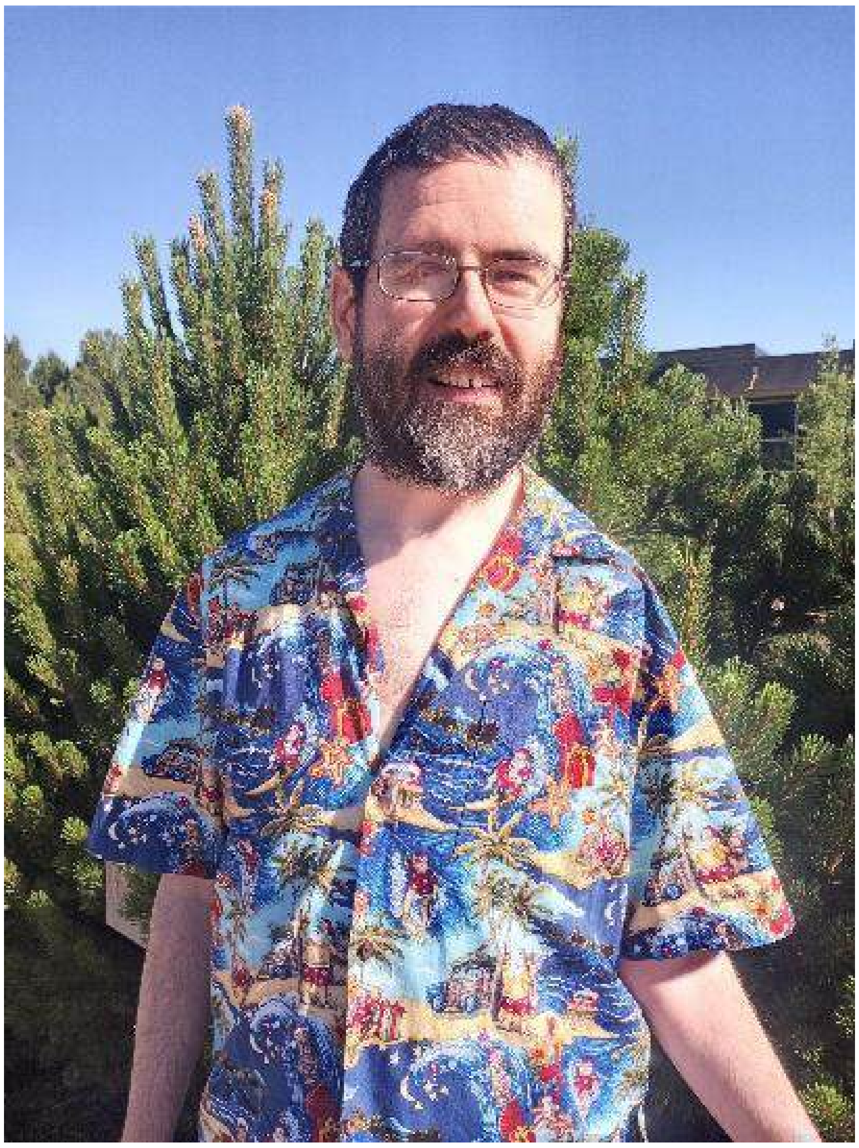
Success Stories: A Beautiful Success and From Nonverbal to Runway Model

Deb Streff describes her son's thoughtfulness, and Norma Turino shares her nonverbal son's modeling journey. Have a success story you want to share? Click here.

A beautiful success



This is our autistic son, JR.

He was born with autism, a mental disability, hemiplegia (the left side of the body is weaker than the right), and without his right eye and optic nerve. Thankfully, I had enough knowledge to help him progress in many different ways.

He was able to start in a program for students with physical disabilities in the public school system in Iowa at the age of one year and ten months. His disability was renamed multiple times depending on his greatest need.

He was first identified as physically disabled. He was placed in a preschool developmental class and then a classroom for students with an IQ under 50. We knew that wasn't accurate, but the school didn't listen.

The classroom, however, was a good fit because the teacher was beyond wonderful.

He was then placed in a program for students with an educable mental disability and was provided with an associate to accommodate his physical disability.

He was never categorized as autistic, even though I recognized some very strong characteristics at birth. He did not like to be touched; whenever I picked him up, he cried, and when I put him down, he would stop.

He was finally diagnosed as autistic at the age of 3, although that diagnosis was never used in school placement. Today he is 45 years old.

Every year, we attend a music and dance camp in Aspen, and JR chose to dress as Cruella de Vil.

Each year, JR has grown and matured, and he is always excited to return to camp.

Back when he was 13, I remember being thrilled when my son stated that he was happy to see his friends again. He had never called anyone a friend before, and with tears in my eyes, I smiled.

This year, there was a disco dance, but my son was sitting on the sidelines. Someone on the staff said he had been asked to dance but refused.

When I tried to bring him to the dance floor, he also told me "No!"

Finally, he danced with one of the staff as I sat with his friend, and he joined us after the song.

My son explained his reason for not dancing. He had chosen to stay with his friend, Robin, because she was told not to dance, as her buddy was concerned she might fall. JR wanted to keep her company.

My loving and compassionate son surprises us often, and this was one more thoughtful act that makes him who he is.

From nonverbal to runway model

I'm the proud mother of an 18-year-old young man named Athan, who was diagnosed with autism and speech delays at the age of three. Like many families, we initially felt lost and unsure of how to navigate his diagnosis.

After researching ways to support him and exploring various services, we held onto one guiding principle: Never give up.

As a family, we introduced Athan to a diverse range of therapies and activities, including traditional and alternative options such as hippotherapy, surfing, swimming, Taekwondo, and music.

We believe that the more exposure he receives, the better prepared he will be for his future. These therapies and activities don't yield instant results; they require time and commitment.

One of the most remarkable outcomes has been his success in Taekwondo. He has earned the World Champion title twice in the American Taekwondo Association, a testament to his years of dedicated training and commitment.

Recently, Athan embarked on a new journey in modeling. At Phoenix Fashion Week, he was chosen as one of the Top 40 models out of 400 applicants. Now, he's competing with his peers for the title of Model of the Year.

I hope that Athan's story inspires at least one family. The journey of being a special needs parent can be incredibly challenging, but never lose hope. With dedication, consistency, patience, and a wealth of love, our children can grow in extraordinary ways.

Be your child's voice, especially when they struggle to ask for help. They face a world with obstacles yet choose to persevere every single day. That resilience deserves our deepest respect and admiration.

Athan, Photo by William Almendarez of Tritek Solution, LLC

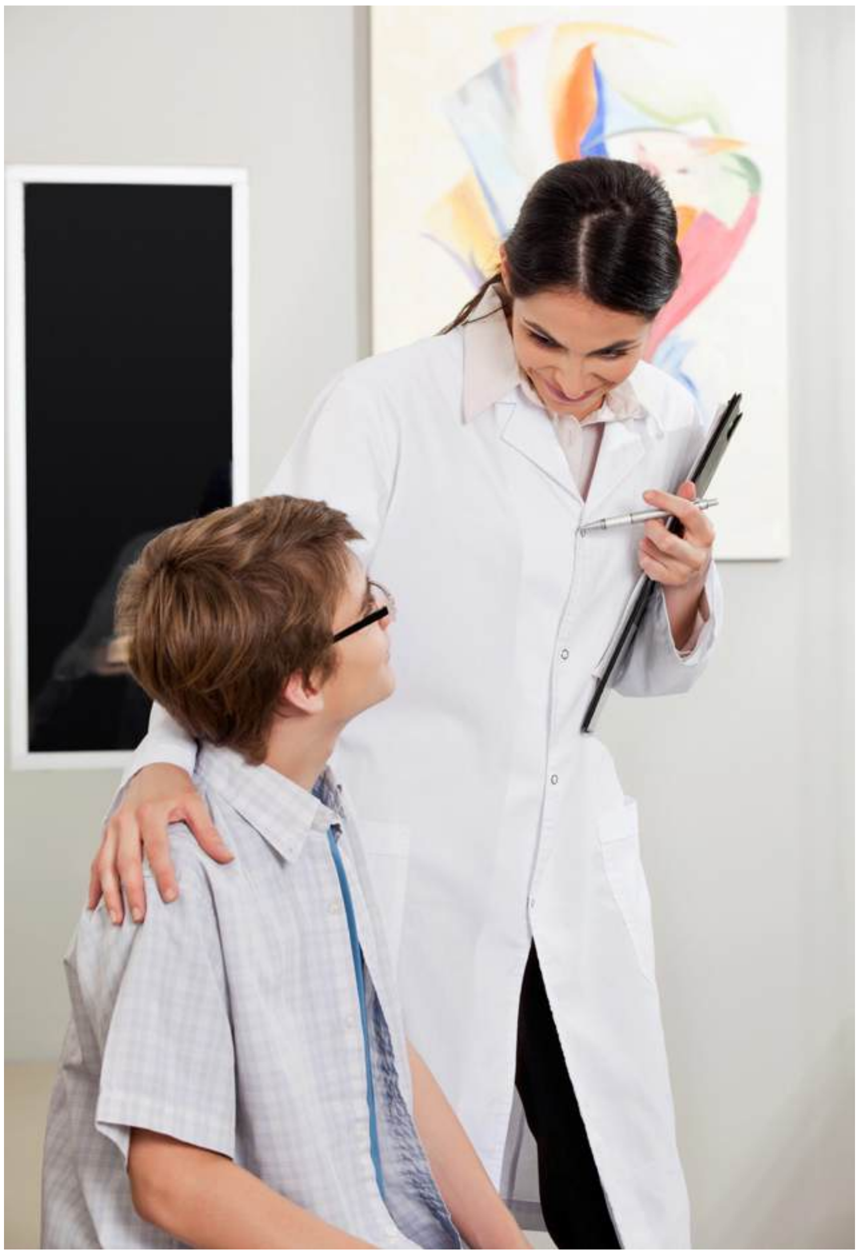
Improving Healthcare Communication for Teens

by **Susan M. Tatem, LPTA, CGIP**

Why helping teens communicate with healthcare professionals is important.

Medical visits can be overwhelming for teens with autism and for the parents who love them. Bright lights, new faces, unfamiliar words, and rushed decisions can quickly shut down communication.

When we slow the process, use clear language, and prepare together, teens gain skills, confidence, and better health outcomes.



Understanding the communication barriers

Knowing what to say or ask at a medical appointment can be difficult, especially if there are communication or other challenges. Here are reasons teens may need more tools to advocate for themselves.

Sensory sensitivities

Healthcare settings are designed for efficiency, not always for sensory comfort. Many teens with autism experience sensory overload the moment they walk in: fluorescent lighting, echoing hallways, cold exam tables, chemical smells, or the sudden sting of a blood draw.

There is also the unpredictability of not knowing when you will be called back from a waiting room or how long this process will take.

For some teens, just going out in public is extremely challenging, let alone under these circumstances.

Oftentimes, communication can quickly move from "I'm listening" to "I'm just trying not to have a meltdown."

Anxiety

Teens may worry about pain, unexpected procedures, or being judged for not knowing the "right" answers. When anxiety rises, expressive and receptive language can drop—words get stuck or instructions sound like static.

Even highly verbal teens might miss key details when stressed. Sometimes I get overwhelmed, and I'm a neurotypical healthcare worker!

Medical jargon

Then there's the language of medicine. "We'll check your vitals, do a rapid strep, and send a referral for imaging" can sound quite foreign.

Teens may nod to move the visit along, even when they're unsure what's happening or why. That compliance is often mistaken for understanding.

Social communication challenges

Finally, social communication expectations in healthcare can be tricky: reading body language, knowing when to speak up, and how to ask for a break.

Masking (appearing fine while feeling overwhelmed) is common. They just want to get done and get out.

Without systems that account for sensory, language, and social load, we risk misunderstandings, missed symptoms, and poor follow-through.

The good news is that small, intentional changes before, during, and after appointments can transform the experience.

Strategies for parents

Here are some tips so parents can help their teen get the most from their healthcare:

Prepare together

Before appointments, walk through what will happen in plain steps:

check-in → vitals → questions → exam → plan

Role-play each part at home. Be the clinician while your teen practices answering.

- "What brings you in today?"
- "Where does it hurt?"
- "Any allergies?"

Use written scripts, visual sequences, or a simple "First-Then-Next" chart. If your teen uses AAC or prefers typing, rehearse with that tool.

Create a visit plan

Make a one-page "Teen Health Snapshot" to bring along that includes the following:

- diagnoses, allergies, and meds (with doses)
- key supports (e.g., extra time to process, allow typing, no surprises)
- sensory needs (dim lights if possible, minimal touch, headphones, blanket, numbing options if appropriate—ask the clinician)
- communication preferences (plain language, visual aids)

Desensitize the setting

Call ahead to request accommodations, such as waiting in the car until a room is ready, scheduling first-of-the-day appointments, dimming lights, or requesting a quiet room.

If possible, schedule a brief "walk-through" visit to meet the staff and see the space, ensuring the real appointment isn't the first exposure.

Encourage questions

Build a personal question bank together. Keep it on a phone or cue card:

- "What is this test for?"
- "What will it feel like?"
- "How long does it take?"
- "What are my options?"
- "What happens if we wait?"
- "Can you show me a picture or model?"

Normalize pausing: "I need a minute to think," or "Can you say it another way?"

After the visit, debrief: What worked? What was difficult? Update the snapshot accordingly.

Strategies for healthcare providers

While parents and individuals on the spectrum must advocate for healthcare, providers should also be aware of how they can support neurodivergent patients.

> Without systems that account for sensory, language, and social load, we risk misunderstandings, missed symptoms, and poor follow-through.

Start with awareness

Autism-informed care is a skill set, not a specialty clinic. Training for all staff from the front desk to clinicians is important.

Use clear language

Replace jargon with everyday terms and short sentences. Chunk information in three parts: what we'll do, why it matters, and what it might feel like.

Example: "We'll take your temperature with a small device that touches your forehead. It takes a few seconds and may feel cool."

Offer choices when possible: "Right arm or left?" "Sitting or lying down?"

Give extra time to process each question before asking the next. However, ensure you are not inadvertently talking down to them. Keep the same tone you would with a neurotypical adult.

Adopt teach-back

After explaining, ask the teen to share back the plan in their own words or by typing.

"Just to be sure I explained it well, can you tell me what you'll do when you get home?"

This checks your communication, not their intelligence.

Provide visual aids and predictability

Some individuals on the spectrum need visual examples. They may also need to know what will happen next.

- Use diagrams, photos, or models for procedures.
- Show a tool before using it, stating and demonstrating if it makes a sound. Let them hold and become familiar with it.
- Provide a paper or digital summary with next steps in bullets and icons.

Invite self-advocacy

Ask directly:

- “What helps you during visits?”
- “Do you want me to talk you through it step by step?”
- “Do you want extra time to answer?”

These questions communicate respect and unlock better data and better care.

Empowering self-advocacy

Self-advocacy is a life skill teens can learn with practice. The goal is to help them name needs, weigh options, and make informed choices at a pace that respects their processing style.

Build a personal “communication toolkit”

Encourage your teen to choose two or three reliable tools:

- a “pause” card or script (“I need time to think”)
- a preferences card (“no surprise shots,” “explain step by step,” “okay to show pictures”)
- their preferred note-taking method (phone, paper, voice memo, AAC, or typing app)

The 3 A’s

Teach them to do the following:

Ask: “What is this? Why do I need it? What are the choices?”
Access: “Can I have that in writing? Is there a video or picture?”
Act: “Here’s what I will do next. If I feel worse, I will call.”

Practice outside the clinic

Rehearse at home or during low-stakes visits (e.g., a sports physical). Rotate who speaks first: Sometimes the teen leads; sometimes the parent models.

Praise specific skills: “You asked for a break. That was great!”

Use supports that fit your teen

Some teens prefer direct questions; others prefer yes-or-no or multiple-choice options. Some prefer minimized eye contact; others want extra time to process.

Self-advocacy isn’t one script. It’s a custom fit.

Resources

Look for clinics with autism-informed training, child-life services, or sensory-friendly policies.

Many hospital systems offer visual schedules and procedure videos.

Communication for better health

When healthcare communication works for the teen, the parent, and the provider, appointments become calmer, information gets clearer, and follow-through improves.

Start with a one-page snapshot, rehearse likely questions, request simple accommodations, and invite your teen to use a tool that helps them speak up.

Providers can reinforce this by using plain language, visual supports, and the teach-back method.

Together, we can transform “get it over with” into “I can do this.” That’s how teens grow skills, confidence, and health ownership, one respectful, well-supported visit at a time.

Susan M. Tatem, LPTA, CGIP, is the CEO and founder of Bright Path 4 Autism, where she supports parents of children with autism aged 12 and older in preparing for independence and adulthood. As a mother of an adult daughter with autism, Susan brings both personal insight and professional guidance to every family she serves. She is also the creator and host of Puzzled Parents, a talk show focused on the autism journey.

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Raising a Superhero

By **Anthony Sisler**

One parent draws parallels between a superhero and his son.

Growing up in the 90s was the golden era for boys. G.I. Joe, Teenage Mutant Ninja Turtles, ThunderCats, and of course, superheroes. These were the characters my brothers and I pretended to be in our imagination.

Jumping off our beds with makeshift costumes and kitchen utensil props, saving the day from imaginary villains all before dinner time.

But there was one superhero who has always been my favorite. He was the ultimate one.

Superman

He didn't need special gadgets or vehicles. He was just **born** that way—with unimaginable strength, super speed, X-ray vision, laser eyes, and the ability to fly.

While most superheroes put on a mask to become someone extraordinary, he puts one on to become someone ordinary.

That idea hit me more powerfully than a locomotive when I became a dad—especially once we learned our son had the superpower of autism.

In so many ways, my son is just like this superhero. He didn't have to become someone special. He already is.

He sees the world differently. He hears it differently. He feels it differently. And sometimes

the world doesn't know what to do with someone who's wired a little differently.

So he puts on his "mask" to blend in and make the world around him more comfortable.

Raising a superhero

The popular superhero character was raised by parents whose lives changed the day a spaceship crash-landed in their field, carrying a baby from another world.

They could have been afraid or turned him in, but they didn't. They chose love.

As he grew, they realized he was different from other kids.

They faced struggles and challenges that parallel those of parents raising their own superheroes.

Their child saw the world differently. He felt things more deeply. He had abilities that others couldn't understand, and in some ways, couldn't even see.

So they made it their mission not to change him, but to help him navigate a world that wasn't built for someone like him.

They taught him to use his powers for good.

They taught him how to love others, even when he felt misunderstood.

They taught him how to be kind in the face of cruelty, how to lead with empathy, and how to use his powers not for praise, but for purpose.

> "In so many ways, my son is just like this superhero. He didn't have to become someone special. He already is."

Learning to take off our masks

As parents to children with autism, we find ourselves walking a similar path.

We do our best to nurture and guide this extraordinary little soul—a boy full of boundless love, endless curiosity, and powerful energy that sometimes even he doesn't quite know what to do with.

We're learning how to help him harness his gifts, how to protect his tenderness in a world that can be harsh, how to teach him when to let his powers shine.

We're not trying to change who he is. We're trying to help him navigate Earth.

As parents of these otherworldly superheroes, we have to develop superpowers of our own. It takes more than love. It takes intention, patience, and persistence.

We have to be willing to take off our own masks—letting go of pride, fear, and expectations—and meticulously study our child and become experts in who they are.

Because our job isn't to mold them into who the world thinks they should be. Our job is to learn who they already are and help them thrive in a world that doesn't always make space for their kind of powers.

We can relate to some of the stories Superman's parents may have had: smashed walls, broken toys, sensory overloads, laser-eye burn marks in the carpet… okay, maybe not that one.

The meltdowns and frustrations when the trip to a favorite restaurant gets canceled, the superhuman energy at 3 am, the ability to run "faster than a speeding bullet" through the grocery store.

These are the moments when we feel like we're raising a child from another planet.

"Neurotypical" parents may not be built for this type of responsibility—and that's okay. Raising a child with autism isn't about being like everyone else.

It's about showing up with courage, patience, and a willingness to see the world through different eyes.

It takes superhumans to raise superheroes.

Watch them fly

Here's to the superhumans who tirelessly, thanklessly, and lovingly teach superheroes how to live fully as themselves.

We give our little superheroes the confidence and space to be who they are.

To explore the world around them, exactly how they experience it.

And then—

We watch them fly.

To my little dude, my superhero, and my best friend. I love you, buddy.

Anthony Sisler is a superdad, data analyst, and writer based out of South Carolina. He blends storytelling with personal experience to shed light on the everyday realities of parenting, neurodiversity, and modern life.

STEM: Unlocking Brilliance Through Structure and Creativity

By **James Watts, MEd**

Here is how STEM can provide confidence and self-expression.

STEM education (Science, Technology, Engineering, and Mathematics) is more than a buzzword. It's an interdisciplinary approach that blends academic learning with real-world, problem-based experiences.

STEM can offer children with autism a life-changing path to confidence, discovery, and self-expression.

Learning that fits their brains

Many autistic learners prefer the structure and predictability found in STEM. They may enjoy number patterns, coding challenges, or the mechanics of machines or ecosystems.

Children with autism often have distinctive learning profiles. They might be visual or tactile learners. They might need more time to process spoken language. They might be sensitive to noise or light. STEM's hands-on, structured, and visual nature aligns well with these needs.

In early education, activities such as kids' coding programs or sink-and-float experiments help build curiosity and engagement. Predictable routines, visual instructions, and sensory-friendly materials all support greater success.

When these activities incorporate a child's special interests, such as trains, animals, or video games, they become even more motivating.

Older students can explore with robotics kits, analyze personal data, or create 3D models. Self-paced digital platforms allow students to work at their own pace, reducing stress and increasing accessibility.

Supporting executive functioning

STEM activities naturally support the development of executive functioning skills such as planning,

focus, and organization. These are areas where children with autism often require extra support.

To complete a bridge-building challenge using popsicle sticks, students must

- plan,
- follow steps,
- manage materials,
- adapt to setbacks,
- reflect, practicing essential executive skills in a motivating context.

Unlike abstract drills, these concrete projects help students persist and engage more fully.

Coding also builds working memory, planning, and initiation skills. Writing a simple program involves logic, troubleshooting, and patience—essential traits for success in school and life.

The predictability of STEM routines eases anxiety. Knowing the day's agenda, whether building, testing, or presenting, helps students stay regulated and organized.

Social interaction: Structure that supports connection

Traditional social situations can be overwhelming for children with autism. STEM provides an alternative path to interaction through structured collaboration around shared goals.

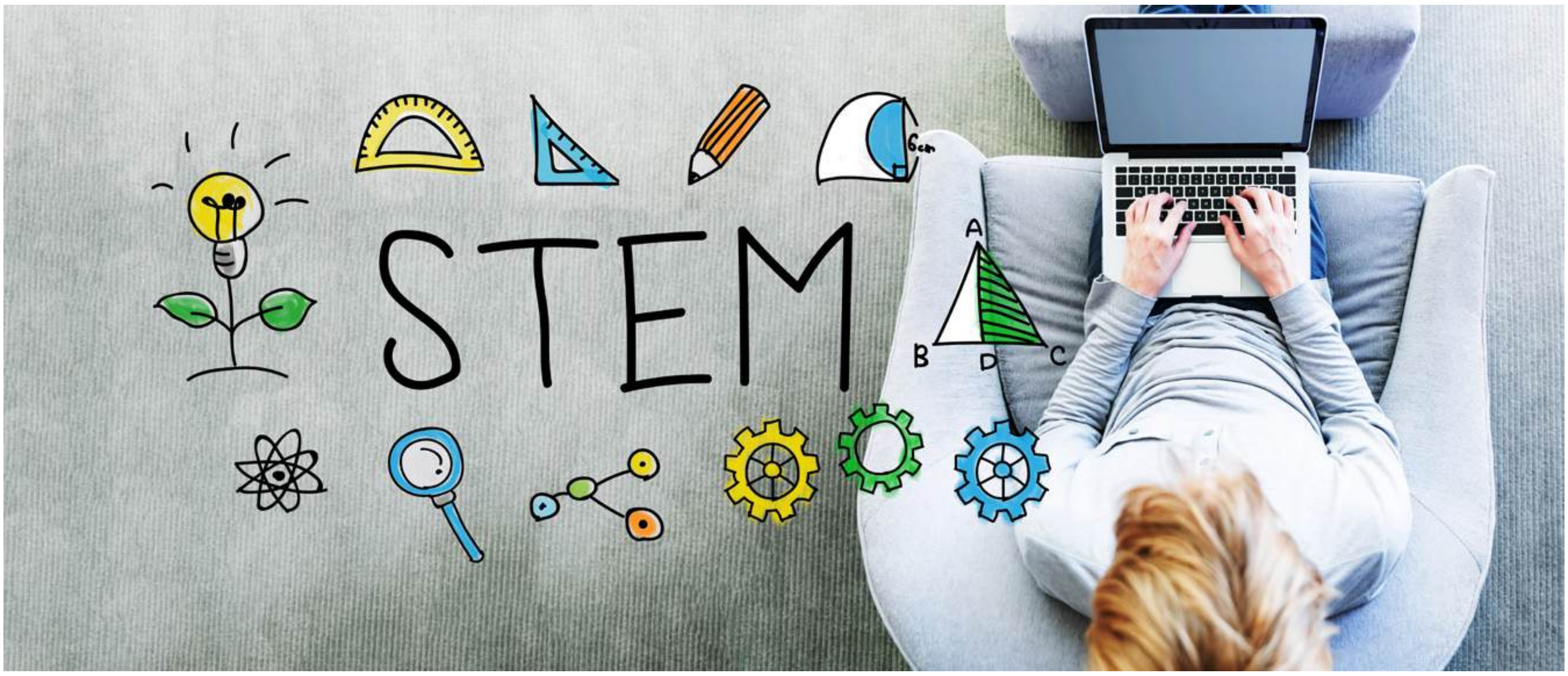
In STEM, group tasks have clear roles and expectations. A rocket-building team, for example, might include a researcher, a designer, and a recorder. These defined roles reduce uncertainty and increase comfort with communication and teamwork.

Educators can support these interactions using visual prompts or scripts. Over time, students develop social confidence in a safe and purposeful environment.

Shared interests also create social bridges. A student passionate about coding may find connection and belonging in a robotics club. These communities value knowledge over social skills, allowing neurodiverse students to shine.

A story of growth: Alex and his engineering project

Alex is a high school student with autism who struggled with traditional academics and group work. He rarely spoke in class, avoided eye contact, and often became overwhelmed during unstructured activities. Although he enjoyed tactile tasks, his engagement was limited by sensory sensitivities and anxiety.



Things began to shift when Alex was given the opportunity to build a model representing a scene from a book he was reading. The project required him to read the text, sketch a design, create a materials list, and collaborate with others to bring the model to life.

He was paired with two classmates. While initially hesitant, he gravitated toward the design aspect. The task's structure—with clear roles, predictable steps, and a defined outcome—gave him a framework in which he could succeed.

To everyone's surprise, Alex became animated as the project progressed. Because it was his vision, his peers naturally sought his input.

The turning point came when Alex, unprompted, asked if he could present their work to the class. He did—clearly and confidently.

By the end of the semester, Alex was applying the skills he had developed to new projects across different subjects. STEM didn't just help him learn; it helped him grow into himself.

Creativity through a new lens

Although often mislabeled as rigid, many students with autism are intensely creative, especially when working within systems that allow them to express ideas logically or visually. STEM encourages creativity through experimentation, design, and innovation.

This creativity may not look like painting or storytelling. It might emerge in building an efficient water system, creating a programming game, or hypothesizing based on observed data.

With their attention to detail and pattern recognition, students with autism often notice what others miss.

STEM validates divergent thinking. Designing a dream city or programming a custom robot are open-ended projects that welcome unique perspectives and reward originality.

By redefining creativity and aligning tools with autistic strengths, we can empower students to become effective problem solvers and innovators.

Acknowledging challenges

Despite their strengths, autistic learners may face the following barriers in STEM settings:

- Group work can be stressful without communication support.
- Loud noises, harsh lighting, and other sensory challenges can disrupt focus.
- The trial-and-error nature of STEM may feel unsettling for students who crave predictability.

Many also fear making mistakes, yet failure is central to STEM; it's how discovery happens.

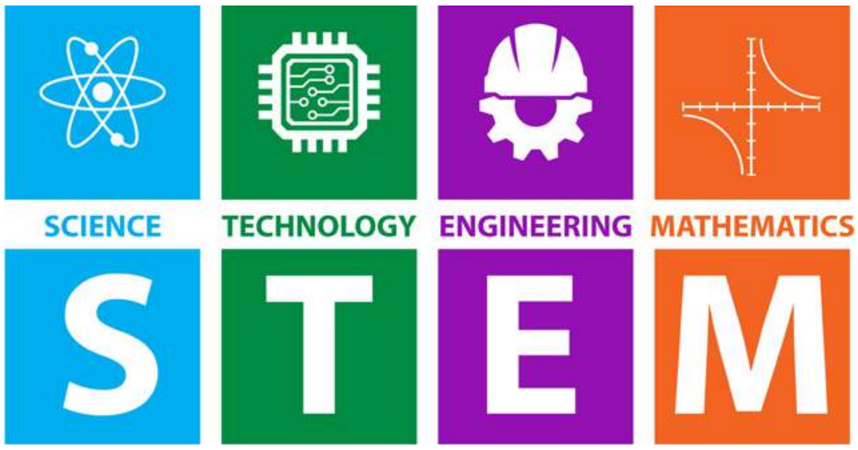
Educators can help students handle uncertainty by giving

- clear instructions,
- visual supports,
- smaller tasks,
- options to show understanding.

These aren't lowered expectations; they're bridges to participation.

Building a supportive STEM environment

Inclusive STEM environments don't need dramatic changes—just thoughtful design. Routines build



predictability, reducing stress. Framing failure as learning is critical.

Many students with autism fear getting things "wrong." But in STEM, mistakes are data. They point the way forward. Encouraging risk-taking builds resilience and a growth mindset.

A bright future in STEM

For learners with autism, STEM offers more than academic challenges—it provides meaning. Whether building a bridge, coding an animation of a favorite animal, or analyzing climate patterns, these students bring unique insight and brilliance to their work.

When we remove barriers and create purposeful, inclusive environments, we don't just teach, we open doors. We show students that their abilities matter.

STEM is not just a subject. For neurodiverse learners, it's a chance to shine.

(Alex is a pseudonym to protect the student's identity.)

James Watts, MEd, is a principal and teacher with an MEd from McGill University. He is also a PhD candidate in the Department of Education at Concordia University. The focus of his studies is nature-based pedagogies. He founded Education Plus – an alternative high school "for students who experience the world differently." He is the recipient of the Prime Minister's Award for Teaching Excellence and the Roger Bider - Ecomuseum Zoo Natural History Award. He and his wife have raised two young adults. In his spare time, he runs, bikes, kayaks, and tries to get lost in forests.

Biomarkers in Autism Diagnosis: Empowering Clinicians, Supporting Families

By **David Elkin, PhD, ABPP**

A new tool helps researchers identify specific biomarkers to aid in autism diagnosis.

For many parents, obtaining an autism diagnosis is anything but simple. It often involves navigating long waitlists, repeated appointments, and extensive observation periods.

Through it all, there is the emotional weight of wondering what's really going on and what could happen next.

Yet, with new technology and research initiatives, there's finally an opportunity for change.

The importance of early intervention

We know that signs of autism can appear as early as 18 months. Yet according to new research, the median age of the earliest known autism diagnosis was approximately four years (47 months). In areas with limited access to specialists, families may wait even longer.

This isn't a reflection of clinical failure; behavioral assessments remain the gold standard for autism diagnosis. But the system is under strain: high demand, limited specialist availability, and a process that's both nuanced and essential lead to long wait lists and a complicated path to timely evaluations.

These delays affect not only timelines but also lives. Decades of developmental science show that children's brains rapidly change before age four, making them especially responsive to therapeutic input and intervention.

Each month without answers is a missed opportunity for early and proactive support, which adds to caregivers' stress.

Early intervention can help children build skills in communication, learning, and social connections. In fact, research shows that autism-specific interventions initiated in the first one to three years of life are associated with significant improvements in IQ, language development, and social skills compared to children who receive interventions later.

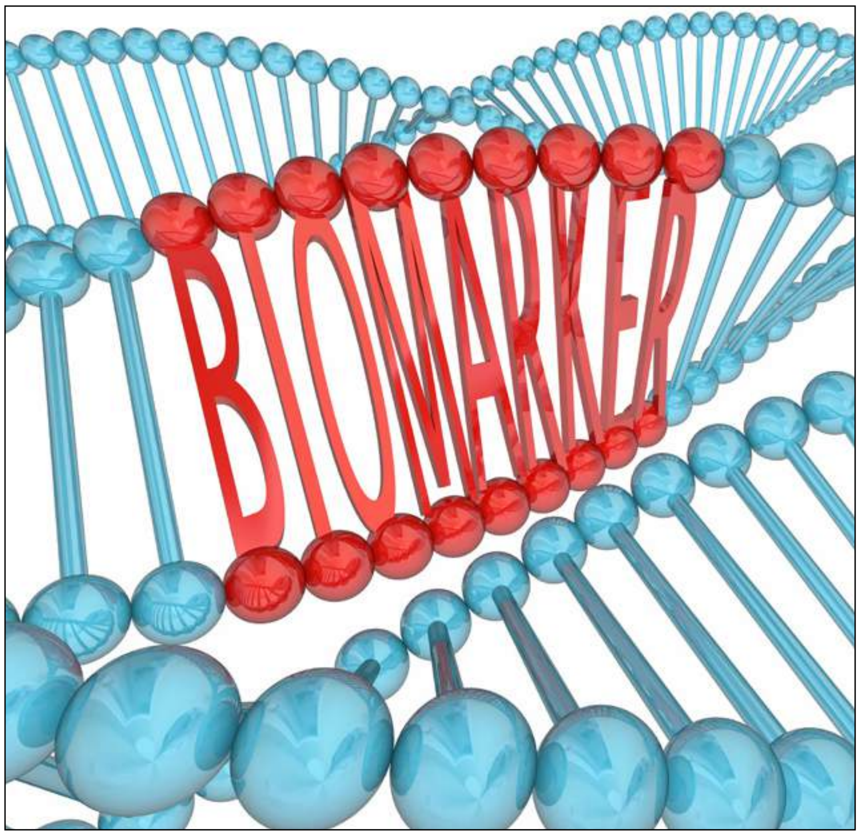
These early gains can alter a child's developmental trajectory and provide families with a stronger foundation for long-term growth.

This is why timing matters so much. The earlier we can identify signs of autism, the earlier families can take action.

Biomarkers offer new insights into autism

For decades, conditions like autism were considered too complex to be understood through biology alone, but that's starting to change.
One of the most promising developments is the emergence of biological tools that work alongside traditional diagnostic methods.

These new tools rely on **biomarkers**—measurable molecular patterns found in blood, saliva, tears, or hair, that provide insight into what is happening inside the body.



One tool is helping researchers identify specific biomarkers that are more common in individuals with autism. This biochemical test analyzes a single strand of hair to assess how a child's body processes key nutrients and elements over time.

It's not about how much of these elements are present, but how the body metabolizes them. The pattern of this metabolic activity forms a biomarker that can help rule out autism as early as one month of age.

Hair is especially useful to analyze because it captures this activity over time. Unlike blood or saliva, which reflect a single moment, hair holds a biological record. Using hair, we can see how these patterns unfold gradually, sometimes before any behavioral signs have emerged.

It's important to note that this type of tool doesn't provide a diagnosis. Instead, it offers a prediction:

- "Negative": No biomarker associated with autism was detected.
- "Non-negative": A biomarker was detected that may be associated with autism, and a follow-up evaluation is recommended.

Think of it like a cholesterol test: It won't diagnose heart disease, but it gives your doctor a key piece of data to consider alongside everything else.

For families and clinicians, that kind of objective insight can help make a meaningful difference, especially in cases where behavioral signs are subtle.

These tools aren't designed to replace the expertise of specialists or clinicians. Instead, they help clinicians make more informed decisions, intervene and prioritize faster, and support the individual development of every child.

The power of interventions

Here's what this might look like in practice: A pediatrician sees a child with mild speech delay and subtle social differences. The child doesn't clearly meet ASD criteria, but the provider wants more data. They order a biomarker test.

If the result is non-negative, they can confidently refer the child to a specialist. If the result is negative, they can explore other developmental diagnoses. The tool becomes part of the clinical reasoning process, not a replacement for it.

These tools aren't here to replace clinical judgment. They're here to support it. The goal is faster, more confident decisions and earlier access to care.

There is growing clinical and anecdotal evidence that early support can make a profound difference.

One child I evaluated at two and a half years old was completely nonverbal at the time. Her family committed to a comprehensive early intervention plan, including ABA therapy and developmental support.

Two and a half years later, her grandfather sent me a video of her performing in a school play. She was smiling, expressive, and connected to the children around her. It was a moment that conveyed more than any clinical report ever could.

Finding the right path sooner

Every child's path is different. Yet, when families gain access to clear, actionable information earlier, they're better equipped to make decisions aligned with their child's strengths and needs.

Finally, having a biomarker for autism will open the door to a new era in developmental care. This isn't a threat to clinical expertise, but rather, a way to enhance it. Biomarkers help us ask better questions, sooner. That means more opportunities to help families act early, with confidence.

Science is evolving. Our tools are evolving. So is the way we care for children on the spectrum. The earlier we start, the more we can support each child's potential. Every parent deserves access to that kind of possibility.

If you're concerned about your child's development or want to better understand what new tools are available, talk to your pediatrician. Ask about testing options. With the right support and guidance, you can find the path forward that best suits your child.

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David Elkin, PhD, ABPP, is a Child Clinical Psychologist and the Vice President of Clinical Education and Autism Programs at LinusBio. Before joining LinusBio, he was the Executive Director for the Center for Advancement of Youth (CAY) and a tenured professor at the University of Mississippi Medical Center. Dr. Elkin has more than 20 years of experience in the field of child psychology.

Ask Dr. Malcolm

By **Ronald I. Malcolm, EdD**

Dr. Malcolm answers parents' questions and concerns about their autistic children. You can submit your questions here.

Jen of Ottawa, Canada, asks:

My 10-year-old nonverbal son has been having an increase in self-harm and others at school, mostly. The sensory room, his bike, and other sensory items no longer work. He's also in early puberty.

I had to pick him up today as he kept asking for home on his iPad and was knocking over items in class. As soon as he was in my car, he was happy. Other times, it takes a lot for him to come down from crying and looking very dysregulated. I'm overwhelmed.

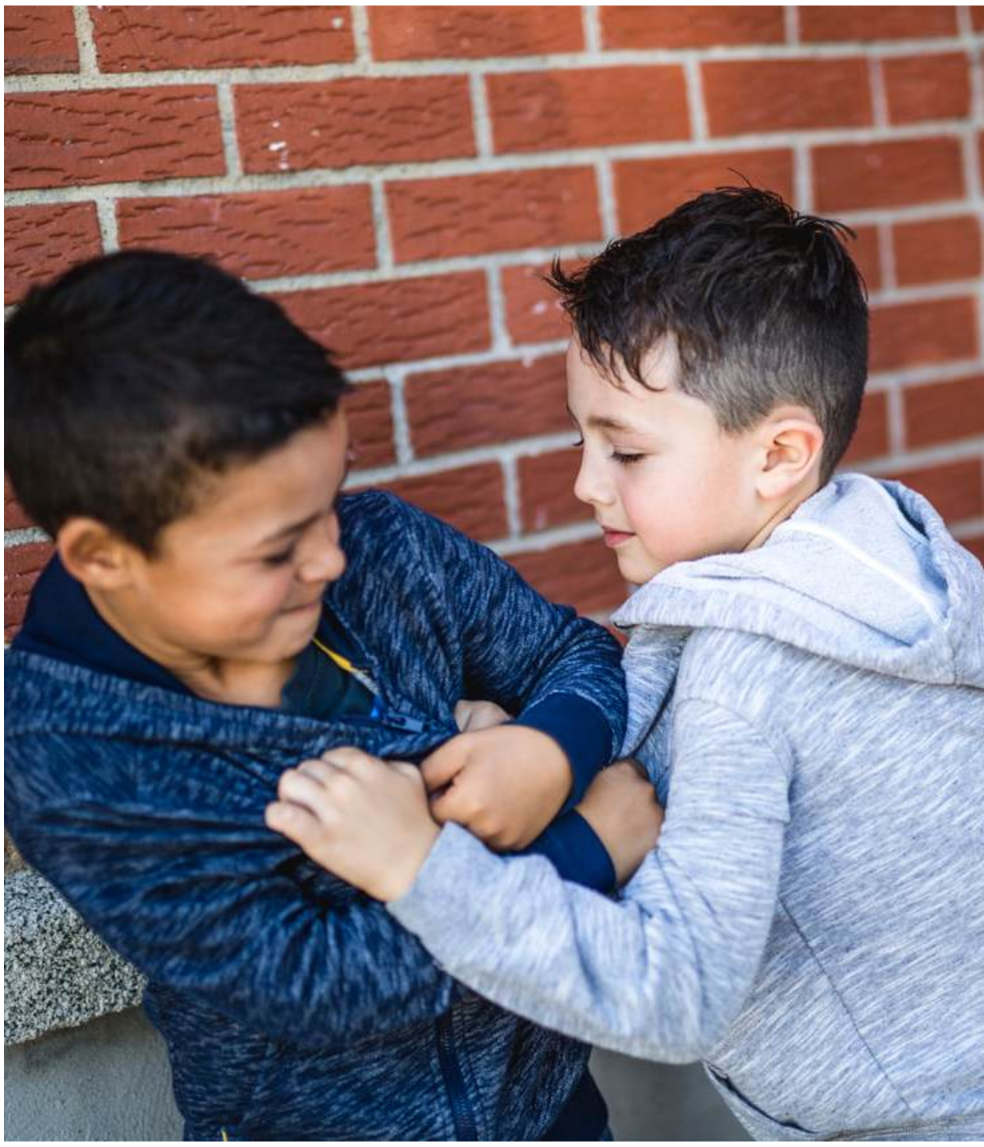
What is self-harm?

Children with autism who are nonverbal may cause self-harm in various ways to themselves or others. They may engage in the following behaviors:

- Head banging
- Biting themselves or others
- Picking at their own skin
- Spitting on individuals
- Throwing items at others
- Kicking their caretakers
- Physically attacking others

Self-harm is often a form of communication that nonverbal individuals are unable to engage in verbally. It can also occur for various reasons.

- Some children may be in pain and unable to convey this.



- They may be attempting to gain someone's attention or access an item.
- They may be triggered by a sensory overload or a change in their routine.

Puberty

You mentioned that your son is entering early puberty. Puberty can involve changes that occur in your child's body, which can cause confusion for him. Chemical imbalances may also be occurring that can cause your child with autism to act out or meltdown.

Consultation with a doctor

It will be important for you to consult with your child's doctor about these new behavioral changes. Your doctor may want you to monitor your child's appetite, sleep patterns, and daily behavioral patterns.

He may want to prescribe a medication or a specific therapeutic approach, such as Applied Behavioral Analysis (ABA).

Preferred items

You mentioned that the preferred items that have been used in the past seem no longer interesting to your son. Preferred items and access to them can change over time. What was "preferred" by your child last month may no longer be effective this month. It may be time to change to his new preferred items.

> "Puberty can involve changes that occur in your child's body, which can cause confusion for him. Chemical imbalances may also be occurring that can cause your child with autism to act out or meltdown."

Preference assessment

Teachers of autism and Board Certified Behavioral Analysts (BCBAs) can conduct a new Preference Assessment on your child. This will help you and your child's teachers understand his new preferences and how to effectively integrate them into his daily schedule at school and at home.

Function of the behavior

Since the new behaviors appear to be occurring at school rather than at home, a BCBA or an autism teacher can conduct a Functional Behavior Assessment (FBA). Your child can be observed in a variety of school settings to help understand the function of his new behaviors.

He may be trying to get his educators' attention at school. Also, schools often place demands on children that do not occur at home. Your child may be attempting to avoid these demands by involving himself in a meltdown, injuring himself, injuring others, or throwing items.

Additionally, some children with autism may be displaying certain behaviors based on experiencing pain. They may have a toothache, an upset stomach, the flu, etc., but since they are unable to communicate this need verbally, they may respond inappropriately instead.

Behavior Intervention Plan (BIP)

Once the function of the behavior has been determined, it will be time to share the information with the school team and parents. Everyone can work together to develop a Behavior Intervention Plan (BIP) and implement strategies to assist with your nonverbal son's behaviors.

Safe places

Your child with autism needs to know where he can have a "safe place" at school. This will be a place where he can access his preferred items and begin regulating his behavior. Gaining access to a safe place will reduce the amount of verbal interaction that may heighten your child's dysregulation.

Safe places should not involve any "triggers" that you are aware of that will upset your child. If loud noises trigger him, he may need to wear noise-canceling headphones there. He may also require reduced lighting, music, a weighted blanket, or access to fidgets or preferred items, etc.

Social stories

The school's regular and special education staff members can work with you to develop an appropriate social story that addresses your child's self-injurious behaviors or injuries to others. This can be read daily at school, emphasizing his need to use his coping skills to have his daily needs appropriately addressed.

Reinforcement

Removing your child from school for his behaviors may reinforce the wrong behaviors. You mentioned that as soon as he enters your car, he is calm. It is possible that he now believes that the way to access going home or something else he wants is to hit himself or another individual.

He may also be using his behavior to avoid a demand being made on him at school by one of his educators. Rather than complete the non-preferred activity at school, he acts out and is rewarded with going home for the day. This may cause the behavior to recur at school the next day.

The school staff needs to develop a safety plan for your child that includes his staying at school. Otherwise, you may be picking up your child from school every day because of their behavior.

Dr. Ronald I. Malcolm, EdD, is an Assistant Director of Student Services and Special Education for a public school district. He is an Associate Faculty Member with the University of Phoenix and a Special Graduate Faculty Member at the University of Kansas. He holds bachelor's degrees in English and special education, and master's degrees in counseling, special education, and school administration. His doctorate is in educational leadership, and his post-graduate degrees are in positive behavior supports and autism spectrum disorders. He has worked with students between the ages of 3 and 21 with autism and various medical needs in school and community-based settings for the past 41 years.

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How to Advocate for Your Autistic Adult's Medical Needs

By **Jeremy Brown**

How can parents help their adult child access available health services?

There are many healthcare services available for people with autism, but how do you navigate this system once your autistic child has grown into an adult? This presents new challenges not previously faced.

There are steps parents and caregivers can take to make it easier for their loved ones.

Understanding the healthcare system

In the United States, the healthcare system can be broken down into three units:

- Primary care
- Specialty care
- Insurance

Primary care

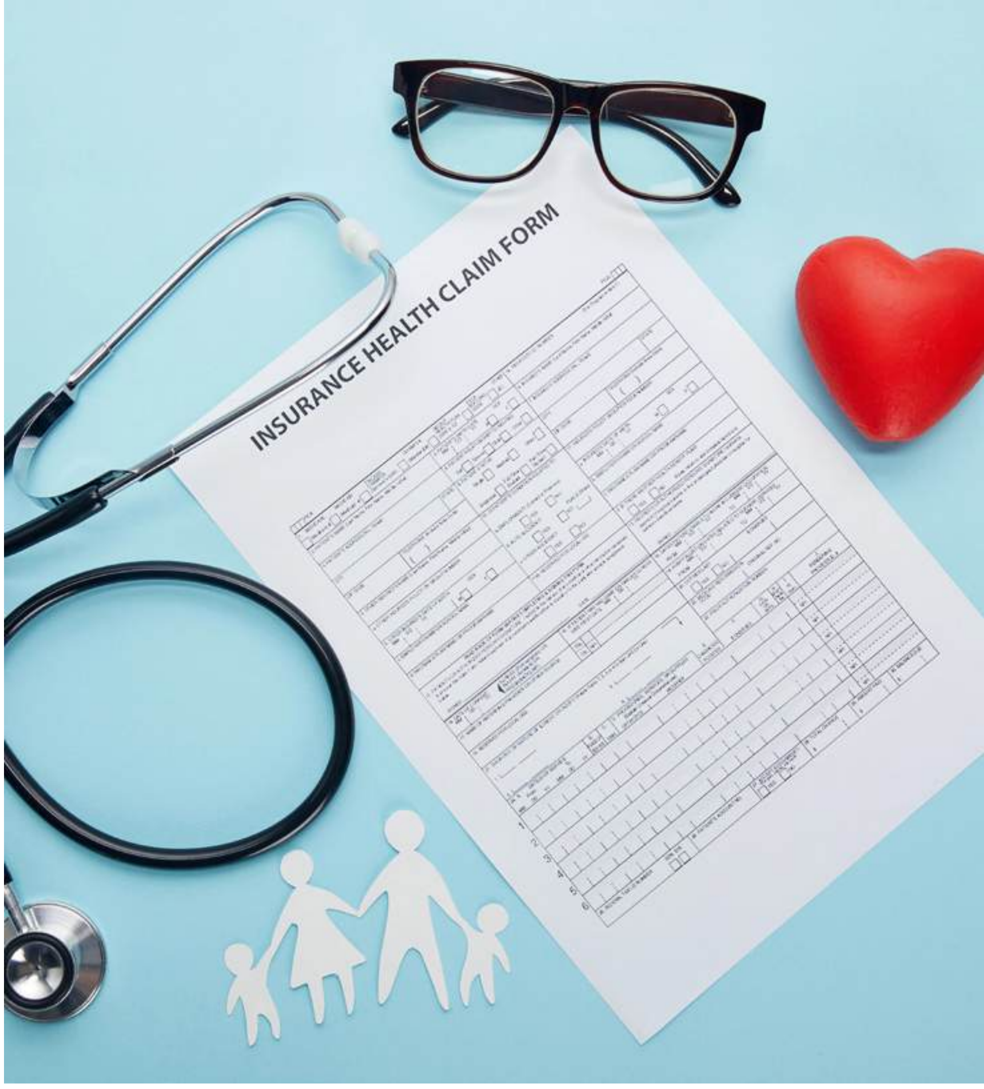
Primary care focuses on the patient's overall health, covering yearly physicals, family medicine, and pediatrics. Oftentimes, the primary care physician is the first point of contact for health concerns. They can diagnose or recommend a specialist for more specialized care.

Specialty care

Specialists offer patients highly focused care. Their field is narrower, but their vast knowledge equips them to handle complex cases and procedures. Specialists may focus on autism services if they are speech, occupational, or physical therapists.

Insurance

Unfortunately, it takes a lot of money to run the healthcare system. Health insurance can provide financial coverage to families, so they don't have to pay too much out of pocket.



Common healthcare challenges

Navigating the healthcare system may be challenging for an autistic adult patient. Depending on their support needs, autistic adults may struggle to communicate effectively with their primary care physician. Their sensory sensitivities can also make undergoing routine testing even more difficult.

Parents who searched to find a specifically trained pediatrician to treat their autistic child must now find a physician to treat their adult. Socio-economic and geographical barriers can also challenge that search.

Paying for healthcare services is difficult, and if insurance doesn't cover the necessary treatment, they may not get it. If it does cover the cost, there may not be a doctor who provides the necessary services.

Unfortunately, autistic adults often have co-occurring conditions that may require more comprehensive care.

Building a support network

When navigating the healthcare system, autistic adults will need a strong support network of those they can trust to help guide them. Often this will include family members and close friends.

Autistic adults might also use community services to help with transportation and filling out paperwork. These services can play a major role in building a supportive community that can help navigate the healthcare system.

Effective communication with healthcare professionals

From the pre-appointment paperwork to the treatment needs, effective communication is key. Yet for many autistic adults, communicating with their doctors is challenging.

There are ways to help autistic adults and their support systems communicate with their doctors more effectively.

Preparing for appointments

Gather the necessary documents for the appointment, including the patient's relevant medical history and any medications they may take.

Creating a physical or electronic public health record that is easily accessible to the caregiver, the doctor, or the patient for each appointment can be helpful.

The autistic adult may struggle to collect these documents on their own, especially if parents did this when the individual was younger. It may be necessary for the caregiver or an appointed individual, such as a sibling or trusted friend, to handle this task.

If the autistic adult is able, there are self-advocacy tools to help them prepare for their appointments. Some tools will generate customized accommodations or a mental health advance directive that outlines treatment and trusted health representatives.

Communicating needs

The support system can also create an “all about me” document listing vital information beyond medical documentation to relay to the doctor. This can include communication preferences and sensory sensitivities.

Depending on the patient, these documents can include written summaries or visual aids that improve communication between the patient and doctor.

Some autistic adults may be able to clearly speak about what they need. Others may need to have it written, enlist an interpreter, or use an AAC device to communicate.

Understanding rights and resources

Know your rights and which resources can help you advocate for them.

Patients’ rights

In the U.S., the Americans with Disabilities Act grants all autistic adults:

- **Right to reasonable accommodations:** Healthcare providers must make adjustments within reason to ensure accessibility, including communication aids, flexible scheduling, and access to telehealth appointments.
- **Right to make healthcare decisions:** Autistic adults are entitled to informed consent, alter or refuse treatment, and create an advanced healthcare directive, if able.
- **Right to make decisions with support:** An autistic adult has the right to have a guardian or helper make decisions for them if they are unable to make the decisions on their own.
- **Right to medical records:** Every patient has a right to access their own medical records and treatment plans.

> “There are ways to help autistic adults and their support systems communicate with their doctors more effectively.”

Insurance navigation

Understand what the insurance plans will cover and what will be paid out of pocket. Does the individual have a private or government-funded plan, such as Medicaid?

The type of insurance will determine how much is covered, though any insurance provider covers certain treatments.

To ensure an autistic adult receives the most coverage their plan offers, it’s important to gather necessary documentation and consult the summary of benefits.

Documentation of a formal diagnosis, plus a treatment plan with prescriptions for medications and referrals to necessary therapies, will help ensure coverage if offered under a plan.

Caregivers (and autistic adults) must understand their right to appeal any denial of coverage issued by the health insurer. A strong appeals case must be presented with comprehensive documentation in accordance with the appeals process.

There are advocacy organizations and assistance programs to help the designated support person and the autistic adult file the appeal and help make the case for coverage.

Advocacy strategies

Navigating the healthcare system is not easy. Autistic adults need to be strong self-advocates or have a strong advocate to be their voice.

The advocate must be firm but respectful when presenting their case for the patients’ treatment, communication, therapies, and insurance coverage to ensure the best possible healthcare.

Technology, such as apps and online tools, can help schedule appointments, advocate for communication preferences, and access necessary medical records for a new treatment or an insurance appeal.

Advocating for better health

While navigating the healthcare system can be daunting for the parent of an autistic adult, there are steps to make this a little easier. Advocacy is an important aspect of the journey.

If an autistic adult can advocate for themselves, they can push for their preferred communication and assert their rights as a patient. If they need a support network, their designated advocate can make that push for them.

Autism often comes with co-occurring conditions requiring many different types of healthcare treatment. Working together, autistic adults and their advocates can fight for what is best for them.

Resources:

https://www.ada.gov/topics/intro-to-ada/

Autism Healthcare Accommodations Tool from the Academic-Autism Spectrum Partnership in Research and Education
https://researchautism.org/healthcaretoolkit

https://www.medicaid.gov/medicaid/benefits/autism-services

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Jeremy Brown is a writer, editor, podcast co-host, Emmy-winning local news producer, husband, and father. His work in local TV news left him with a yearning for a more creative outlet, and the coronavirus pandemic and his wife’s caregiver burnout presented him with the opportunity to stretch his creative muscles while also helping others. Jeremy and his wife, Sarah, launched the podcast Caregiver Chronicles together in August 2020. While Sarah is the lead, Jeremy is a co-host for many episodes and edits every episode of Caregiver Chronicles.

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Autism Warrior - Acting and Achieving

By **Sharon Longo, BA**

A young actor explains how his work serves as encouragement for others.

Owen Himfar is in eighth grade, and he lives with his parents, older sister, and dog named Rocky. He's also an actor in the movie, The Short Game, playing an autistic character.

When referring to the character he plays, he states, "I felt connected to him because he sometimes felt like a burden. This role was important because the character, Ethan, showed that people with disabilities aren't always a burden—they can also help others."

Owen enjoyed playing the role and seeing himself "on the big screen." He also had this to say as someone with autism being chosen for the part.

"The casting also shows that autistic people are capable of working hard, collaborating with others, and bringing their own perspective to how roles are portrayed.

"I hope other kids with autism who watch the movie will see that, whether you're a savant or not, you can still do anything."

Impacting other families with autism

When asked how he views his work impacting other autism families, he states, "I think my film work shows autism families that as long as you set your mind to something, you can do it—even if it's difficult.

"When families watch the movie, I hope they see that autistic kids aren't always born with some amazing intellectual gift.

"In fact, most kids with autism are just like everyone else. They have to work for what they get. They get to where they are by working hard and overcoming challenges."

He referred to his role, explaining, “My character, Ethan, might help families understand that autistic kids—while sometimes hyper-focused—still learn things just like other kids and work hard to achieve their goals.”

Becoming an actor

Owen explained how he began his career as an actor. “I first got interested in acting when my mother saw an open casting call for an autistic character. Out of curiosity, we worked together and filmed a self-tape. I got a callback, and I was very excited.

“Even though I didn’t get that role, I wanted to keep auditioning and improve my acting skills.”

While Owen enjoys acting, he also has other interests, such as “learning about the weather and chess strategies.” He also plays soccer and enjoys reading novels. He comments, “If my parents would let me, I could read all night!”

Owen, Photo by Lydia Canbakal, Bymayasplanet Inc.

Facing and overcoming challenges

While facing challenges as someone on the spectrum, Owen also had to deal with some climate issues while filming the movie.

“One challenge … was working outdoors in triple-digit heat during the shoot of this movie in Texas. I’m more sensitive to high temperatures, and it’s harder for me to stay focused and calm.

“I needed to take breaks and push myself to keep going, even when it was very uncomfortable. My parents also helped me stay focused and kept me going.”

He continues with another “more personal” challenge he felt was “worth mentioning”, stating, “I’ve had to work hard on my speech because I have a hard time pronouncing certain letters—especially when I’m excited or tired.

“For this role, I had to work, not only on learning my lines, but also on pronouncing them clearly so people could understand me.”

He adds, “Also, maybe because I’m autistic, I sometimes have trouble reading people’s emotions and might say or do the wrong thing.

“When I read for auditions, I really need to focus on what the characters might be thinking. This kind of helps me get a better perspective when I talk to my friends and other people.”

Accomplishments, inspirations, and goals

One of Owen’s greatest accomplishments, he states, “is being cast as Ethan in The Short Game because it shows that someone with autism can really become an actor.

“I felt proud that I was able to memorize my lines and stay focused in character during filming, even with a lot of distractions I wasn’t used to.”

He adds that he also met and worked with some “great actors who gave me tips.”

When asked about what inspires him to keep going, he responds, "What inspires me to keep going is that I'm showing other kids with disabilities that even if they're not perfect, you just need to set goals and keep trying."

Speaking of goals, he mentioned this: "A goal I'm working toward is earning more money for college.

"I'm very interested in the national weather forecast and spend a lot of time on my computer researching weather phenomena, like tropical storms—tracking their path, strength, and any damage that results.

"One day, I'd like to become a meteorologist and forecast the weather to help others."

While he's only in eighth grade, he states, "Right now, I'm focusing on getting more auditions. I would love another opportunity to come my way."

Advice for families affected by autism

What advice does Owen have for other families? "My advice for families is: Do not set limits on what people with disabilities can do. Autistic kids can reach their goals and learn just like anyone else.

"The support and encouragement from my family has always helped me. I would tell other autistic kids to be yourself and not feel like you have to fit in with everyone. You can do anything with hard work."

This is great advice for all of us!

> "When I read for auditions, I really need to focus on what the characters might be thinking. This kind of helps me get a better perspective when I talk to my friends and other people."

Sharon Longo, BA, is the editor of Autism Parenting Magazine, as well as the mother of three children: one on the autism spectrum, one who had selective mutism, and one with ADHD. She is a former educator with over 18 years of experience working with students, Pre-K through high school, and she was named Catholic School Teacher of the Year in 2014. Her work has been published in numerous newspapers and magazines, and she has written and published a specialty children's book, My Friend Daniel Doesn't Talk (Routledge; 1 edition; March 1, 2007), which won the recognition of Highly Commended in the British Medical Association (BMA) Patient Information Awards (Printed Materials). She enjoys spending time with her family.

What's New On The Bookshelf?

To My Little Onion

By **Dr. Roxana Maffei Burciago, PhD, MSN, RN**

What if your child's milestones came quietly, like whispers instead of shouts?

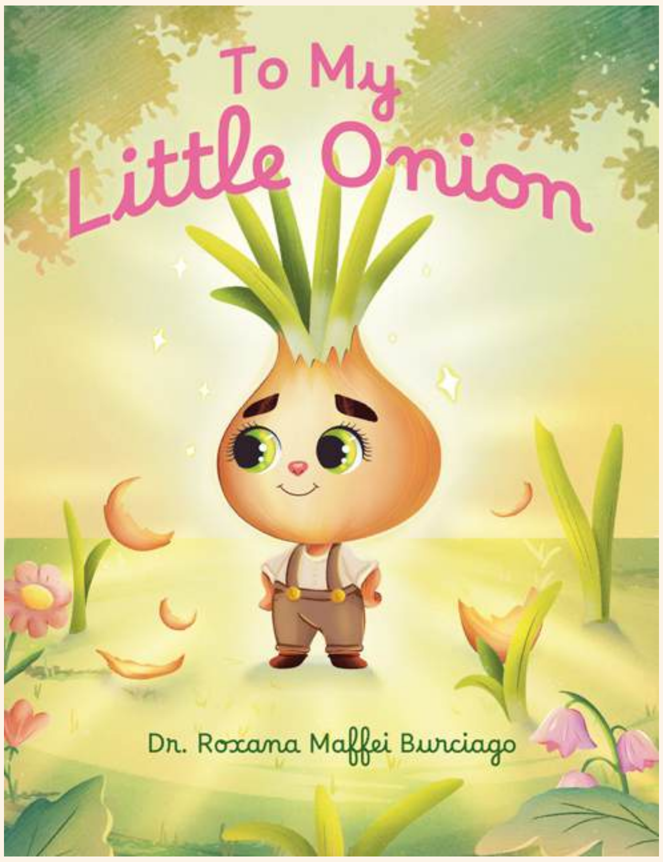
To My Little Onion is a tender, metaphor-filled children's book inspired by a mother's journey raising her son with autism. It tells the story of a little boy's growth—layer by layer—through the eyes of his parent, who watches with equal parts wonder and worry as her child slowly reveals who he is inside.

At first, everything felt overwhelming. Every tiny victory—eating a vegetable, sleeping through the night, making eye contact—was hard-won. But each of those moments peeled back another layer. Beneath the struggle was a boy full of strength, sweetness, and incredible insight. He just needed time. And someone to believe in him.

This book is a love letter. A love letter to the children who don't always meet expectations on time, in order, or in public view. A love letter to the siblings who walk beside them with fierce loyalty. And most of all, a love letter to the parents who stay up late googling therapies, wiping tears (sometimes their own), and celebrating the tiniest steps like Olympic gold.

To My Little Onion is both personal and universal. Written from the author's experience but meant for anyone walking a similar path, it's a story about hope, patience, and the magic of slow progress. The kind that creeps in quietly—then suddenly takes your breath away.

Now that her son can communicate more clearly, the author hears stories from years ago—memories he never spoke of, but never forgot. Proof that even when our kids are silent, they're taking in everything. They're listening. They're learning. And when the time is right, they'll show us who they are.



For any family touched by autism, this book is a gentle hand on your back, reminding you: Don't give up. The layers are there. Keep peeling.

Dr. Roxana Maffei Burciago, PhD, MSN, RN, is a devoted mother of two—a bright and determined son and a loving, spirited daughter. When her son was born with significant developmental delays, her family's journey became one of unwavering support, tireless interventions, and boundless love. Inspired by this experience, Roxana wrote To My Little Onion for her children and for families on similar paths. She believes children are incredibly perceptive—they hear our words, feel our love, and sense the effort we make. In addition to being an author, wife, and mother, Roxana is a nurse with a PhD in biomedical informatics from the University of Pennsylvania, UT Health Science Center, and Columbia University postdoctoral. She and her family live in Connecticut, embracing each step of their beautiful journey.

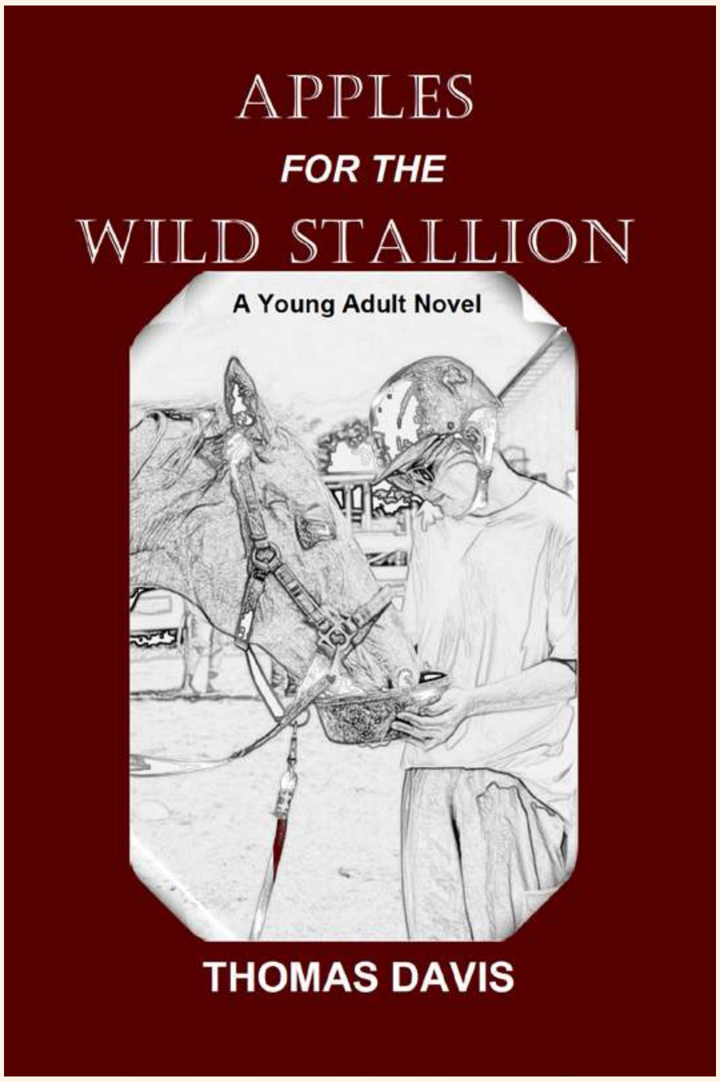
Purchase Link: To My Little Onion

What's New On The Bookshelf?

Apples for the Wild Stallion

By **Thomas Davis**

A book about a hero with autism and the adventure awaiting him.



My daughter looked up at me as I watched her read Harry Potter to Joey, who could only communicate with his iPad. "Dad," she said. "I've been looking for a book with a character that Joey can relate to as a hero, and I can't find one." The next day, my wife and I, on our long drive home, decided that I would write a book for Joey.

In Apples for the Wild Stallion, Austin loves horses, including those on the family ranch in the Zuni Mountains of New Mexico. One night when he couldn't sleep, he stood silently beside his bedroom window:

"He saw the wild stallion then. The same color as the large white moon in the night sky, it stood just beyond the corral's wooden enclosure. It was looking toward the shed where Brownie and Silver, the quarter horses the Jacks family used for work and pleasure, were in their stalls. A huge horse, much bigger than either Brownie or Silver, he somehow knew it was a wild horse, not one escaped from another ranch higher up the Zuni Mountain's slopes."

Austin becomes obsessed with attracting the beautiful stallion back to the ranch by using apples his mother buys for him. Then, during the Christmas season, an adventure begins that helps him achieve what none of his family believed possible.

Cattle rustlers, problems as he starts high school, friendship with a Navajo girl, gun battles in the night at the ranch, and a plot by rustlers who believe they can gain mystical power by killing the white stallion, lead to a night when Austin proves he is a hero with immense courage.

This is a book about a hero who has autism.

Thomas Davis has won literary awards, like the Edna Ferber Fiction Award, and has been a Door County Wisconsin Poet Laureate. As an educator, he has been president and chief academic officer of three tribal colleges and one tribal university, and the World Indigenous Nations University awarded him an honorary doctorate for global leadership in indigenous education.

Amazon: Apples for the Wild Stallion

Unveiling Our 2025 Contributor Awards Winners

by **Sharon Longo, Editor**

Every year, we at Autism Parenting Magazine (APM) feel blessed and thankful for all the contributors who share their time and expertise to write helpful, informative articles for our families around the world. By doing so, we can provide you with the current advice and information in each issue, as well as at our Autism Parenting Summit.

We present these awards in several categories to showcase these selfless and inspiring individuals, and to express our heartfelt gratitude. Choosing among the many worthy candidates is challenging, and we wish we could present an award to each of them.

We are so grateful to every contributor who shared their writing with us, and we hope you all continue to submit your work for our future issues. We could not do this without you.

With pleasure, we announce the autism experts who have been chosen for this year's APM 2025 Contributor Awards:

Top APM Contributor

2025 AWARDS
Autism Parenting MAGAZINE
Dr. Ronald I. Malcolm, EdD
Top APM Contributor

Dr. RONALD I. MALCOLM, EdD

Dr. Malcolm contributes a monthly column to Autism Parenting Magazine, sharing his knowledge and expertise to answer parents' questions. He has also written articles and participated in our webinars. Dr. Malcolm is an assistant director of student services and special education for a public school district. He is also an associate faculty member and a special graduate faculty member at two universities. He has over 41 years of experience working with students aged 3-21 with autism and various medical needs in school- and community-based settings.

in https://www.linkedin.com/in/dr-ronald-malcolm-11983539

Top Parental Advice Contributor

2025 AWARDS
Autism Parenting MAGAZINE
Dr. Danny L. McGuire, Jr., MA, MPA, MS, PCC
Top Parental Advice Contributor

Dr. DANNY L. MCGUIRE, Jr., MA, MPA, MS, PCC

Dr. McGuire has written for our magazine and blog and has shared his expertise by presenting for our webinars and Summit. He is a former board member of the Autism Society of Illinois and the father of an adult son with autism, diagnosed at age two. Dr. McGuire has over 35 years of public service experience, and he holds degrees in law enforcement management, counseling psychology, public administration, food and nutrition, and ethical leadership. He is also a credentialed coach by the International Coaching Federation with several areas of specialization.

✉ danny@crosstownwellness.com

🌐 https://crosstown.pro

Top Tools and Support Contributor

2025 AWARDS
Autism Parenting MAGAZINE
Dr. Temple Grandin, PhD
Top Tools and Support Contributor

Dr. TEMPLE GRANDIN, PhD

Dr. Temple Grandin has given her time and talent to provide presentations and Q&A sessions for our Autism Parenting Summit, as well as for the Q&A with Dr. Temple Grandin column for APM. She is a Distinguished Professor of Animal Science at Colorado State University. Many companies worldwide use facilities she has designed for handling livestock. She has also been essential in implementing animal welfare auditing programs used by major corporations. Dr. Grandin has appeared on numerous TV shows, including 20/20 and Prime Time, and is the subject of the new documentary, An Open Door. Her books include Thinking in Pictures, Livestock Handling and Transport, and The Autistic Brain. Her books Animals in Translation and Visual Thinking have been on The New York Times Best Sellers list. Temple was inducted into the National Women's Hall of Fame in September 2017. In 2022, she was named a Distinguished Professor at Colorado State University, and in 2023, was inducted into the Colorado Authors' Hall of Fame.

Top Autism Advocacy Contributor

2025 AWARDS
Autism Parenting MAGAZINE
Karen Kaplan, MS
Top Autism Advocacy Contributor

KAREN KAPLAN, MS

Karen has contributed numerous articles to APM, offering our readers her expertise across many areas of autism. She has served as an instructor in the Autism Spectrum Certificate program at Alliant University and has sat on nonprofit boards to help build capacity for those with special needs. Karen founded and directed a residential school in Sacramento for nearly 20 years. She has also directed schools for students on the spectrum in the San Francisco North and South Bay Areas for 15 years. As an author and speaker, she has helped non-governmental agencies in Indonesia and Africa globally. She currently consults with families, schools, and adult programs.

✉ karensupportsu@comcast.net

in www.linkedin.com/in/karen-kaplan-51104aa

🌐 www.karenkaplanasd.com

Top Behavioral Solutions Contributors

2025 AWARDS
Autism Parenting MAGAZINE
Dr. Rochelle Manor, PhD
Top Behavioral Solutions Contributor

Dr. ROCHELLE MANOR, PhD

Dr. Manor has shared her knowledge by writing several articles for APM and co-writing others with Dr. Wolff. She changed her path from studying to become a special education teacher to one in neuropsychology. She grew up in a family of educators, physicians, and nurses, learning about the brain-body connection. With three generations of disabilities, her family legacy includes helping everyone, of all abilities, to learn and be as healthy as possible. She co-founded BRAINS with Dr. Wolff in 2007, and she cherishes people of all abilities, making a positive mark on the world with compassion and expertise.

2025 AWARDS
Autism Parenting MAGAZINE
Dr. Michael Wolff, PsyD, ABN, ABPDN
Top Behavioral Solutions Contributor

Dr. MICHAEL WOLFF, PsyD, ABN, ABPDN

Dr. Wolff also shared his expertise, co-writing articles for APM with Dr. Manor. He is a clinical neuropsychologist specializing in pediatric neuropsychology and has been a faculty member at several universities. Dr. Wolff has received awards for his contributions to psychology, and he has several professional publications and an extensive professional speaking career. Dr. Wolff serves on several boards, is an advisor to students in pediatric neuropsychology for the American Academy of Pediatric Neuropsychology, and is a Professional Advisor for the Epilepsy Association of Michigan.

Top Education Contributor

2025 AWARDS
Autism Parenting MAGAZINE
Maggie McGarvie, SLP
Top Education Contributor

MAGGIE McGARVIE, SLP

Maggie has written several articles for APM, sharing her 16 years of experience as a neurodiversity-affirming pediatric speech-language pathologist. She specializes in helping families connect and understand their autistic children. She also shares her insights on language, sensory needs, behavior, and play on her YouTube channel to help families who feel lost.

https://www.instagram.com/yourathomeslp/

https://www.youtube.com/@YourAtHomeSLP/playlists

Top Communication Skills Contributor

2025 AWARDS
Autism Parenting MAGAZINE
Marci Melzer, MEd-SLP
Top Communication Skills Contributor

MARCI MELZER, MEd-SLP

Marci has shared her talent with our readers, contributing several articles to our magazine. She is an intuitive SLP, author, speaker, and consultant. She uses her platform to provide training and support for parents, caregivers, and professionals so they can teach individuals who are late talkers to use the words they need to share their insights with others.

WavesofCommunication.com.

Top Social Skills Contributor

2025 AWARDS
Autism Parenting MAGAZINE
Nikki McRory, MA CCC-SLP, BCBA, CAS
Top Social Skills Contributor

NIKKI McRORY, MA CCC-SLP, BCBA, CAS

Nikki has shared her expertise with our readers on several occasions. She is a dedicated pediatric speech-language pathologist and board-certified behavior analyst with over 25 years of experience with autism spectrum disorder (ASD). The owner and executive director of a pediatric therapy service center in Los Angeles, she has developed specialized center-based programs to enhance communication skills in children with autism. Nikki contributes to the autism community through trainings, podcast appearances, and writing.

Facebook: https://www.facebook.com/mcrorypediatricservices/

@mcrory_pediatric_services

www.mcrorypediatrics.com

Top Transitioning to Adulthood Contributor

JACLYN HUNT, MA, ACAS, BCCS

Jaclyn has shared her time and talent with our readers through several articles and at our Summit. An educator, author, and speaker on autism, she has also served as a coach since 2013. Jaclyn wrote the book Life Coaching for Adults on the Autism Spectrum: Discovering Your True Potential. She is the owner and head coach of a life coaching service provider, where she focuses on developing self-awareness, problem-solving, and executive functioning skills, helping clients to achieve goals that increase their well-being. She has dedicated her entire professional life to helping neurodivergent adults unlock and reach their full potential.

Top Parent Support Contributor

ANDREA GRANT, BA PGDip and PGCert

Andrea has contributed many articles to APM, sharing her life experience and talent. A qualified teacher with 14 years of experience, she currently works at a high school. She is also a writer and has three children of her own, two of whom are on the spectrum. She wants to highlight ASD's "intricacies" while educating parents, individuals, and communities, empowering them with knowledge and hope.

@Hexagons in a World of Circles

@parentingonthespectrum

http://www.parentingonthespectrum.co.za/

Top Sensory Solutions Contributor

SHARON ALCOCK, OT

Sharon has written articles for our magazine and blog, sharing her knowledge as a neurodivergent occupational therapist. Based in the UK, she works with children and adults. As a mom to two children, one neurodivergent and one neurotypical, she brings her lived experience and professional knowledge into all that she does. Sharon's work aims to help families and educators understand their children's sensory needs through a neuroscience lens. She works to make the world more accessible and peaceful for those who experience it differently.

@sharonbsensoryspecialist

www.thesensoryot.com

Top Sleep Solutions Contributor

ROBYN SAJESKI, RN, BSN

Robyn has lent her expertise to APM with a co-authored article and one of her own. A certified special needs sleep coach, sleep consultant, and co-founder of a sleep consulting business, she has a professional background in nursing and experience across various areas of patient care. A mother of two, including a child with autism, Robyn uses her healthcare knowledge and lived experience to provide compassion and support for each family's unique challenges. She is also an advocate for education, support, and acceptance of individuals with special needs in her community.

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www.SleepAbilityConsulting.com

Top Diet and Nutrition Contributor

VICKY FINLAYSON, BSc, FNTP Dip, CHC

Vicky has shared her knowledge through written articles and as a presenter at our Summit. A qualified naturopathic nutritional therapist, she specializes in neurodevelopmental nutrition for autism, ADHD, and other complex physical and mental health challenges. She focuses on the correlation between nutrition, metabolic factors, the gut microbiome, the immune system, and brain function. Vicky hopes to help others due to her own neurodiversity, her family's chronic health conditions, and her two children's health, with one child diagnosed with nonverbal autism at age four.

Top Bullying Contributor

Dr. BRETT J. NOVICK, MS, EdD, LMFT

Brett has written numerous articles for APM and our online blog, sharing his expertise. He has worked as a school social worker and counselor for the last 23 years and is an adjunct instructor at two universities. Brett has also spent over 25 years as a licensed marriage and family therapist in private practice, community mental health, and substance abuse settings. He has supervised family and school counseling, centers for abused and neglected children, adults, and children with developmental disabilities, and has been a licensed foster parent. Dr. Novick has authored educational, self-help, and children's books and created therapeutic games for youth. He has also won numerous awards for his work in education.

www.drbrettnovick.com.

Top Autism Blog Contributors

CAROL TATOM, BA.HSE, CHW

Carol has written numerous times for our blog and magazine and participated in our Summit, sharing her expertise. She is a licensed community health worker in Texas, where she serves as an area operations director. Carol is also an autism parent, writer, and advocate for special needs. She enjoys working with families and helping them connect to support and resources for improving their well-being.

https://www.linkedin.com/in/carol-t-baa07a152/

2025 AWARDS
Autism
Parenting
MAGAZINE
Cory Morrison
Top Autism Blog Contributor

CORY MORRISON

Cory has written many articles for our blog and magazine, sharing lived experience with our readers. He has lived in the Toronto area his whole life and was diagnosed with autism at 3.5 years old. A college journalism graduate, his interest in writing and publishing has grown over the years. He also has special interests in weather, music (listening and playing), motivational quotes, and autism advocacy.

https://www.facebook.com/CoryBradleyDennisMorrison/

https://www.instagram.com/corybdmorrison93/

https://ca.linkedin.com/in/cory-morrison-8ba0b2182

https://twitter.com/corymorrison93?lang=en

www.asdtoday.com

Top Personal Narrative Contributor

2025 AWARDS
Autism
Parenting
MAGAZINE
Lisa Candera, Esq., CLC
Top Personal Narrative Contributor

LISA CANDERA, Esq., CLC

Lisa has shared her expertise and lived experience to write several articles for APM, both the magazine and blog. A full-time single parent of a teenage son with severe autism and OCD, she is also a lawyer and a certified life coach for moms raising kids with autism. As the host of her own podcast and with her 1:1 coaching program, Lisa helps moms manage their stress and anxiety, allowing them to parent their child without burning out.

lisa@theautismmomcoach.com

https://www.facebook.com/theautismmomcoach/

https://www.instagram.com/theautismmomcoach/

[The Autism Mom Coach]()

Top Success Story Contributor

2025 AWARDS
Autism
Parenting
MAGAZINE
Jaime Hrobar, BA
Top Success Story Contributor

JAIME HROBAR, BA

Jaime's Success Story appeared in the October issue of APM. She is a writer, a balanced living enthusiast, and a spiritual seeker. A wife and mother of two children, one of whom is her 20-year-old son with severe autism, Jaime advocates voluntarily for families of children with special needs. She shares her family's journey through her Facebook page, including some of her most difficult challenges.

https://www.facebook.com/HomeboundandHealing

https://www.instagram.com/jaimehrobar/

https://www.jaimehrobar.com

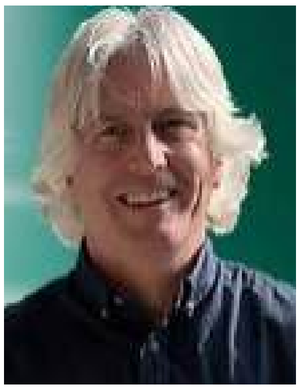
Special Mention for Autism Advocacy Contributor

2025 AWARDS
Autism
Parenting
MAGAZINE
Jan Stewart
Special Mention for Autism Advocacy Contributor

JAN STEWART

Jan has written several articles for APM, sharing her experience as an autism and neurodiversity advocate and author. She received the Mom's Choice Award® and wrote a best-selling memoir, Hold on Tight: A Parent's Journey Raising Children with Mental Illness. Her book describes parenting two children with multiple mental health and neurodevelopmental disorders, including autism. Jan is chair of the board of directors for Canada's largest autism services provider. She works to empower parents to persevere, have hope, know they are not alone, and educate others, including their families, friends, employers, healthcare professionals, and educators.

Special Mention for Education Contributor



2025 AWARDS
Autism
Parenting
MAGAZINE
James Watts, MEd
Special Mention for Education Contributor

JAMES WATTS, MEd

James has written a couple of articles for APM, sharing his expertise as a principal, teacher, and PhD candidate focusing on nature-based pedagogies. He founded an alternative high school "for students who experience the world differently," and he received the Prime Minister's Award for Teaching Excellence and the Roger Bider - Ecomuseum Zoo Natural History Award.

Special Mention for Communication Skills Contributor

2025 AWARDS
Autism
Parenting
MAGAZINE
Dr. Monica Hudnall, EdD, CCC-SLP
Special Mention for Communication Skills Contributor

Dr. MONICA HUDNALL, EdD, CCC-SLP

Dr. Hudnall has used her expertise to write several times for Autism Parenting Magazine. Her extensive experience, education, and training include Autism Spectrum Disorders, Augmentative and Alternative Communication (AAC), and culturally responsive practices. Her research has been published in the American Journal of Speech-Language Pathology (AJSLP), and she has lectured at several universities.

Special Mention for Social Skills Contributor

2025 AWARDS
Autism
Parenting
MAGAZINE
Alicia Trautwein
Special Mention for Social Skills Contributor

ALICIA TRAUTWEIN

Alicia has written numerous articles for Autism Parenting Magazine and has presented at our Summit, sharing from her lived experience. An advocate for autism and neurodiversity, she uses her personal experience as an autistic mother of four, three of whom are on the autism spectrum, in her professional work. Alicia is the founder of "The Mom Kind," offering insights on parenting children with neurodiversity. She also advocates through a podcast and public speaking engagements. Through her varied efforts, Alicia hopes to educate and support families and promote a more inclusive society.

Special Mention for Transitioning to Adulthood Contributors

2025 AWARDS
Autism Parenting MAGAZINE
Jeremy Hamburgh
Special Mention for Transitioning to Adulthood Contributor

JEREMY HAMBURGH

2025 AWARDS
Autism Parenting MAGAZINE
Ilana Hamburgh
Special Mention for Transitioning to Adulthood Contributor

ILANA HAMBURGH

Jeremy and Ilana have written articles for our magazine and presented at our Summit and webinar, sharing their expertise. With 15 years of experience as a social coach, Jeremy founded their friendship and dating program, where he and Ilana, a former special education teacher, help autistic and neurodivergent adults. Together, they teach individuals how to meet new people with confidence, form friendships, start dating, and build meaningful relationships.

🌐 MyBestSocialLife.com

Special Mention for Bullying Contributor

2025 AWARDS
Autism Parenting MAGAZINE
Robin Rettie, MEd
Special Mention for Bullying Contributor

ROBIN RETTIE, MEd

Robin shared her knowledge with our parents, writing an article on bullying for APM and presenting at our Summit. In 1976, she worked in Ohio to deinstitutionalize individuals into residential homes through a highly regarded and progressive program for individuals with differing abilities.

With 34 years of experience working directly with divergent thinkers, Robin founded her educational consulting company in honor of her sister, Laurie Lorraine Rettie (LLR), who passed away in 1969 while residing at Willowbrook State School. Robin finds great joy in supporting individuals like her sister.

🌐 www.senso-science.com

Special Mention for Autism Blog Contributor

2025 AWARDS
Autism Parenting MAGAZINE
Dr. Divina Lopez, MD
Special Mention for Autism Blog Contributor

Dr. DIVINA LOPEZ, MD

Dr. Lopez has written articles for our blog and our magazine, sharing her expertise. She is a board-certified pediatrician, school physician, autism expert, and advocate. A mother of a child on the autism spectrum, she draws from her professional expertise and personal experience to support families who are navigating autism.

🌐 Drdivinalopez.com.