The Be Safe Initiative:

Victimization Prevention and Intervention Strategies for Individuals with ASD and ID/DD



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Penn State Health

Two Areas of Resource Development:

- ✓ Prevention strategies to reduce risk
- ✓ Intervention strategies for more effective care and recovery for survivors





Multiple audiences and stakeholders:

- ✓ Individuals with ASD
- ✓ Individuals with ID/DD
- ✓ Family members
- ✓ Caregivers
- ✓ Professionals
- ✓ General Public





Different developmental stages:

- ✓ Children
- ✓ Adolescents
- ✓ Adults
 - ✓ With and without intellectual and/or communication challenges



Prevention Resources

Prevention Psychoeducation

Victimization Awareness

Signs and Symptoms

PREVENTION STRATEGIES	Children	Adolescents	Adults
Individual	Gen and Rev	Gen and Rev	Gen and Rev
Caregiver	Gen and Rev	Gen and Rev	Gen and Rev
Provider	Gen and Rev	Gen and Rev	Gen and Rev
Community	Gen	Gen	Gen

Intervention Resources

Linking to Resources

Self-advocacy and Self-disclosure

INTERVENTION STRATEGIES	Children	Adolescents	Adults
Individual	Gen and Rev	Gen and Rev	Gen and Rev
Caregiver	Gen and Rev	Gen and Rev	Gen and Rev
Provider	Gen and Rev	Gen and Rev	Gen and Rev
Community	Gen	Gen	Gen

Gen=General Rev=Revised



Multiple Formats:

- ✓ Brief resources
- √ eBooks
- ✓ Social Stories
- ✓ Infographics
- ✓ Animations
- ✓ eLearning Trainings



PREVENTION



SIGNS OF ABUSE



GENERAL

PHYSICAL SIGNS

- Injuries that cannot be explained (e.g., broken bones, burns, cuts, bruising, missing
- Pain from injuries or abrasions Bleeding in the genital or rectal
- Blood on sheets or underwear
 Yeast or bladder infections
- STDs or pregnancy

INCREASED OBEDIENCE

More eager to please

MORE FEARS

- · Fear of going to school, going home, being in the dark, riding the bus, or certain people or places
- · Stop wanting to be with someone in their life

CHANGES IN SCHOOL OR DAYCARE BEHAVIOR

- · Difficulty concentrating or less cooperative · Younger kids - Stop playing and
- exploring · Older kids - Skip school

INCREASE IN SEXUAL BEHAVIORS

- Sexual acting outDraw sexual pictures that do not fit developmental age
- · Sexual aggression with others



CHANGES IN COMMUNICATION

INCREASED RISK TAKING

· Experiment with drugs, alcohol, sex, self-abusive behaviors, or run away

INCREASE IN INTENSITY OR FREQUENCY OF SELF-STIMULATING, SELF-INJURIOUS, OR REPETITIVE BEHAVIORS, OR DEVELOPMENT OF NEW BEHAVIORS

INCREASED ANGER

- · Younger children more temper tantrums or crying
- All ages More
- destructive of things
- Yelling, hitting, or throwing things

CHANGES IN FUNCTIONING

- Eat less or eat moreSuddenly lose or gain
- Sleep more, sleep less, have nightmares, trouble going to sleep at night, scared to go
- Do not wash hair or body, wear same clothes over and
- Refuse to take baths or take too many baths
- More headaches or
- stomachaches more clingy to parent or



Contact Pennsylvania Childline at 1-800-932-0313 to report suspected abuse of a child OR Pennsylvania Adult Protective Services at 1-800-490-8505 to report suspected abuse of an adult.

www.paautism.org/BeSafe

National Crime Victims Research and Treatment Center, Medical University of South Carolina. ASERT is funded by the PA Department of Human Services, Office of Developmental Programs, Bureau of Autism Services



INTERVENTION



SYMPTOMS OF **ABUSE**



GENERAL

Sexual abuse and assault leads to different symptoms depending on the person who was abused or assaulted, their relationship to the perpetrator, characteristics of the abuse or assault, and the person's psychological functioning prior to the incident.

COMMON SYMPTOMS

Some common symptoms that follow abuse and assault include:

- · Irritable mood
- Anger
- Sadness
- · Lack of interest in things that one used
- · Trouble sleeping or sleeping too much
- · Confusion or disorientation
- · Worry and anxiety
- Intrusive memories and inability to avoid thinking of the abuse/assault
- · Avoidance of reminders of the abuse/assault

SYMPTOMS OF ABUSE FOR INDIVIDUALS WITH AUTISM

- · Increased self-stimulating behaviors
- Increased self-injurious behaviors
- Decreased ability to communicate
- Wanting to stay in the place where the incident happen
- Acting as if in a favorit cartoon, movie, or story Increase in disruptive behaviors



POST-TRAUMATIC STRESS DISORDER

The most common psychological disorder that is diagnosed based on symptoms that commonly emerge after a person has been sexually abused or assaulted is Post-Traumatic Stress Disorder (PTSD). Symptoms of PTSD include:

HYPERAROUSAL: this means being nervous and jumpy, having a heightened startle response, and reacting more strongly to things that promote anxiety

INTRUSION: this means frequent, intrusive thoughts about the abuse/assault or reliving aspects of the incident, either while awake or in nightmares. Intrusion also includes experiencing the same fear response that occurred during the incident in response to reminders of the incident. So, for example, if a person felt increased heart rate and rapid breathing due to fear during abuse perpetrated by a person wearing black clothing and then later feels increased heart rate and rapid breathing when they see another person wearing black clothing, this would be an intrusion symptom.

AVOIDANCE: this means avoiding reminders of the traumatic incident or avoiding thinking about the incident altogether. A person may avoid places, people, and things that remind them of the abuse or assault. Avoidance can start to spread from things closely related to a trauma to more general things. So, a person may start by avoiding the siblings of the male perpetrator and then may begin avoiding men altogether. Avoidance can greatly restrict a person's activities and people who are developing avoidant behaviors should be provided with helpful psychological treatment.

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These resources were developed in collaboration with Angela Moreland, PhD and Grace Hubel, PhD, ASERT is funded by the PA Department of Human Services, Office of Developmental Programs, Bureau of Autism Services



INTERVENTION



LINKING TO **SERVICES**



GENERAL

When to get help

When symptoms such as depression, anxiety, or post-traumatic reactions including avoidance, hyper-arousal, or re-experiencing persist without getting better or become worse, psychological treatment can help. Another way to know when treatment is needed is when symptoms interfere with functioning at home, work, school, or in the community. It is best to seek treatment from a mental health professional trained in evidenced-based trauma treatment. Pediatricians, primary care physicians, school counselors, service providers, and other helping professionals in the community can provide referrals to mental health professionals.

Finding the right type of treatment

There is no "one size fits all" treatment for individuals who have experienced abuse or assault. A therapist may use a range of strategies to help the victim and different strategies may be more or less helpful for different people. It is important that the therapist be familiar with the research evidence for treatments that have been shown to best help individuals who have experienced trauma. What is most important to keep in mind is that treatment can help and recovery is possible. With good quality treatment, many fully recover from psychological disorders that emerge following abuse and assault.

Among individuals diagnosed with Autism Spectrum Disorders (ASD), the benefit of psychological treatment had been previously questioned. However, today it is widely acknowledged that individuals diagnosed with ASD can benefit from psychological treatment adapted to their unique needs, even if they do not communicate verbally. Locating a qualified person to provide treatment for an individual diagnosed with ASD who has experienced trauma requires locating a treatment provider trained in both trauma treatment and ASD/developmental disabilities. It is important to ask questions such as:

- Do you feel comfortable working with individuals diagnosed with ASD?
- What is your training in ASD?
- Do you feel comfortable treating people who have experienced sexual abuse and assault?
- · What evidence-based treatment options do you provide for persons who have experienced sexual abuse/assault?

A good therapist will feel comfortable answering these questions honestly.



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PREVENTION



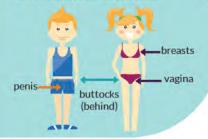
BODY AWARENESS AND BODY SAFETY



INDIVIDUAL (SCHOOL AGE)

What are private parts?

Parts of the body covered by bathing suits (penis, vagina, breasts, buttocks)



Some things to remember about your body

- Private parts are private!
- · Your body belongs to you
- NO means NO
- If you are scared, tell someone they can help you

Some things to remember about other people's bodies

- · Ask permission to touch others, even if it is an okay touch
- · You do not have to touch another person if you do not want to
- Do not touch another person's private parts

What types of touches are okay?

- · Okay (or safe) touches high fives with a friend, goodnight kiss or hug from mom or dad
- Not okay (or unsafe) touches hitting, pulling hair, touching another person's private parts, rubbing your body without your permission, kissing without your

When is it okay for an adult to touch my private parts?

- . To clean you in the bath or shower
- . To make sure you are healthy, but ONLY when it is a doctor examining you with a parent's permission

RULES FOR MY BODY

- It is not okay for others to look at my private parts
- It is not okay for other people to show me their private parts
- It is not okay for other people to make me touch their private parts
- It is okay to touch my own private parts as long as I am alone
- It is not okay for other people to say sexual things to me that I do not like

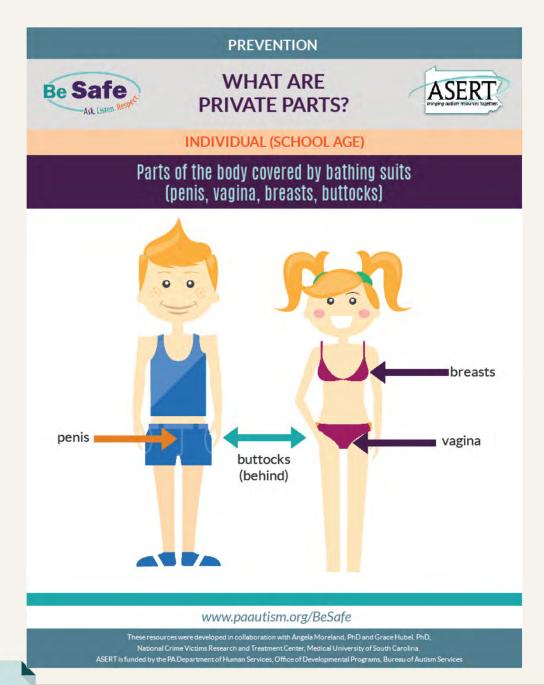
NAME 3 TRUSTED ADULTS in your home, at school, or in the community who you could tell if someone broke a rule for your body:

- (1)
- (2)

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INTERVENTION



SELF ADVOCACY AND SELF DISCLOSURE



INDIVIDUAL

STAYING SAFE:

Remember that you are important You are important. You deserve respect and help when you need it.

Know that your body belongs to you You decide who touches you or does anything to your body.

Be assertive

Say no if you do not like something that someone is doing to your body.

Ask for help if you need it

Identify someone that you trust. If you need help with your safety or feel uncomfortable about anything with your body, tell that person.

Don't blame yourself

If someone hurts you, it is not your fault - you always deserve to be treated well and with respect.

Say YES to fun, friends, and connection

Be connected to your family, friends, neighbors, or community groups, like volunteering or church groups - check in with your friends and tell them how you are doing.

Know your rights

Learn about your rights and about services for people with autism.

Be a leader

Show other people that you respect yourself and be a role model to others.

WHAT TO DO IF YOU ARE BEING

Tell: Let supportive and trusted people in your life know what is happening and how you are feeling.

Reach out: Seek help from a service provider, someone in your school, work, or community and ask for help about what to do next. See the resource "Linking to Resources" for more information.

Make a plan: Identify who you can contact and what you can do if you see the abuser again or if you are abused again in the future.

HOW TO TELL ABOUT THE ABUSE:

Identify a person to tell about the abuse. This might be a parent, a family member, a friend, a therapist, someone at your school, or someone you work with.

Keep telling until someone does something to stop the abuse.



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Social Media Campaign



Take the Pledge www.paautism.org/BeSafe

Individuals with intellectual and developmental disabilities are sexually assaulted at a rate 7X higher than those without disabilities.

This needs to change.

As part of a larger "Be Safe" campaign, we encourage you to take the pledge, spread the word, and put an end to the mistreatment of those with intellectual and developmental disabilities.

Ctrl+Click here to show your support!





Pennsylvania's leading sol of autism-related resource and information. The sausan Services, Education, Resources and Training Collaborative (ASERT) is a statewide initiative funded by the Bureau of Autism Services, PA Department of Human Services.

Social Media Campaign

Take the Pledge.

Please consider adding your support to our Thunderclap:

<u>www.thunderclap.it/projects/7036</u> <u>9-ask-listen-respect</u>

I MAKE THE FOLLOWING PLEDGE IN ORDER TO PROMOTE A SAFE AND POSITIVE ENVIRONMENT FOR ALL INDIVIDUALS:

I will always **ASK** before touching an individual I work with or support. Whether to provide medical attention, physical assistance with tasks of daily living, or provide comfort and emotional support, I recognize it is important to ask an individual for permission before touching them.

I will **LISTEN** to what individuals' tell me and work to empower them to make choices about their bodies. I understand that individuals communicate in a variety of ways, and will pay attention to all ways that an individual may communicate their choices including words, gestures, pictures, assistive technology or other communication methods.

I will **RESPECT** individuals' choices about their body and only initiate physical contact after they have given me permission.



All materials and resources will be housed on: www.PAAutism.org/BeSafe

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Website: <u>www.PAautism.org</u> Email: <u>info@PAautism.org</u>

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