

Executive Summary: Minnesota Autism Spectrum Disorder (ASD) Needs Survey 2015 – 2016

Survey Overview

The Minnesota Department of Education (MDE) and the Autism Society of Minnesota (AuSM) conducted a statewide survey November 2015 - 2016 for the purpose of identifying training needs to improve delivery of services through focused professional development and training as well as get feedback from parents to identify statewide educational needs and strengths in order to improve delivery of services for students with Autism Spectrum Disorders (ASD) in Minnesota schools. As Minnesota's child count for children with ASD now stands at 18,483 individuals from birth to 21 years old with a primary disability of ASD, and which represents 13.4 percent of all students who are receiving special education services, it has become more critical to identify targeted professional development needs and continue preparing educators to provide needed services.

This final report represents an analysis of the results collected from this ASD Survey completed with educational professionals and parents living in Minnesota. This Executive Summary includes two sections. Part I, the Educator Survey, represents results from 1,515 professionals in all 11 regions of the state. The largest groups responding were professionals with a learning disabilities license (41.4 percent), emotional or behavioral disorders license (31.6 percent), related service providers (34.9 percent) and/or autism spectrum disorder license (22.9 percent). Responses were generally representative of the percentages of students with ASD served in the metro area and greater Minnesota regions. In Part II, the Parent Survey includes and summarizes the perspectives of 512 parents/caregivers throughout the state of Minnesota whose children receive services from public school districts, intermediate districts, and other schools (charters, private, etc.).

Part I - Educator Survey

Selected Findings:

1. Professionally licensed educators reported they are accessing a wide range of professional development activities. They identified "in district workshops" as the predominant source where they have received training (59.8 percent) followed by regional workshops (49.8 percent) and professional learning communities (26.8 percent). Only 7.9 percent of responders reported receiving coaching opportunities on evidence-based practices.

2. Topics professionals reported receiving training from 2011-2015 include, social skills instruction (80.8 percent), behavioral strategies (69.7 percent) and functional communication training (50.5 percent).
3. Responders indicated that the barriers to implementing information learned at trainings most often were related to planning time (79.0 percent), sufficient practice (36.8 percent) and administrative support (35.6 percent).
4. 87.2 percent of responders indicated that they are able to use the red flags of ASD to screen and make referrals for a comprehensive evaluation, while 65.9 percent agreed that they have the skills to conduct comprehensive evaluations, including determination of eligibility.
5. Educators reported having the knowledge, resources, and ability to prepare students aged 14-21 in the following transition areas: transition-related IEP and assessment requirements (90.9 percent), Strategies for facilitating active student involvement in their Individualized Education Program (IEP) development (75.3 percent) and graduation credit requirements (57.0 percent). Areas of need included receiving more information on Minnesota Olmstead planning, person-centered thinking/planning and guardianship and conservatorship.

Evidence-Based Practices (EBPs):

Evidence-based practices (EBPs) are interventions that research has proven to be effective. Survey responders reported having a high knowledge of EBPs. Questions were asked to determine the degree to which professionals are implementing evidence-based practices for ASD and the support needed to be successful. Descriptions of these practices and the research supporting their use are outlined by The National Professional Development Center on Autism Spectrum Disorder.

The table shows the number of responders implementing EBPs using an implementation/ fidelity checklist, with or without coaching/ modeling support.

Evidence Based Practice	Degree of implementation	
Additional information on each of these practices can be found at http://autismpdc.fpg.unc.edu/evidence-based-practices	I have had training or have studied and am implementing this practice using an implementation checklist WITH coaching/modeling	I have had training or have studied and am implementing this practice using an implementation checklist WITHOUT coaching/modeling
Functional Behavior Assessment (FBA)	285	177
Behavioral Interventions (prompting, reinforcement, task analysis)	227	198
Picture Exchange Communication System (PECS)	197	171
Video Modeling (VM)	105	126
Visual Supports (VS)	221	210

Table shows the number of responders trained in the following EBPs and implementing to the best of their knowledge or not implementing.

Evidence Based Practice	Degree of implementation	
Additional information on each of these practices can be found at http://autismpdc.fpg.unc.edu/evidence-based-practices	I have had training or have studied and am implementing this practice to the best of my knowledge	I have not yet implemented this practice
Antecedent-Based Interventions (ABI)	112	105
Discrete Trial Teaching (DTT)	197	578
Parent-Implemented Intervention (PII)	105	781
Peer-Mediated Instruction and Intervention (PMII)	136	727
Self-management (SM)	300	470

Conclusion:

Four predominant “need” areas for educators were identified:

1. Professional development: given these results, targeted professional development opportunities should be developed at the state and regional levels to address educators need to better understand the use of antecedent based interventions, discreet trial training, parent Implemented Intervention, peer-mediated instruction and intervention and self-management.
2. District coaching infrastructure: a continuum of coaching supports (may include mentorship, modeling, one to one in-classroom coaching, observation and feedback, etc.) are essential to ensuring skills learned at training are translated with fidelity into the work environment. Evaluate your current training and coaching model and determine if resources can be allocated to increase systematic classroom coaching opportunities.
3. ASD team evaluation: professionals report the need for support in acting as the primary evaluator during an ASD eligibility evaluation. Pair seasoned evaluators with those acquiring and/or sharpening their evaluative skills. Creating a culture of collaboration will positively

impact students and families and lead to more comprehensive evaluations and programming.

4. Transition planning: identify opportunities for staff to learn and use person-centered thinking and person-centered planning when creating transition plans for students of all ages.

Part II –Parent Survey

MDE and AuSM carried out a survey of parents of children with autism. A total of 512 families from across Minnesota responded to the survey; this follows a similar survey conducted in 2012.

Selected Findings:

Parents (33 percent) were the first to suggest their child had autism, followed by suggestions by school professionals (25 percent), others (16 percent), primary care physician (12 percent), a family member (7 percent), neuropsychologist (4 percent), psychologist (5 percent), psychiatrist (2 percent) and county social worker (2 percent). Psychologists (40 percent) outside the school district are the primary professionals who diagnosed children of those surveyed, with school psychologists (25 percent) being the next largest group. Parents reported that 70 percent of children with autism have co-occurring conditions, such as Attention Deficit Disorder or Attention Deficit Hyperactivity Disorder (37 percent); anxiety (36 percent); intellectual disability (15 percent); depression (13 percent); learning disabilities (8 percent); seizure disorder (6 percent); other conditions (20 percent).

Parents (72 percent) use other services or interventions outside the school district. Those services are speech therapy (94 percent); occupational therapy (81 percent); behavioral intervention (19 percent); family education (25 percent); nutrition services (19 percent); and respite care (18 percent).

Autism-focused groups or organizations with which families are associated include: Autism Society of Minnesota (54 percent); parent groups (18 percent); and support groups (13 percent). Twenty-nine other organizations also were listed. Fifteen percent said they are not associated with an autism-focused group.

Parents (54 percent) report that their children with autism receive sex education classes. For those whose children receive sex education, their parents (77 percent) said the curriculum was not modified to meet their child's autism needs. The other 23 percent said they did not know

whether the curriculum was modified to meet their child’s autism needs. Parents (33 percent) of student’s ages 18-21 report that the school was not effective in preparing their children to apply for employment, interview for employment, or retain employment.

Table shows selected items, grouped by strengths and needs.

Survey Questions	Strengths	Needs
Parents were asked to rate services. Areas of strength scored 75% or above. Areas of need scored below 75%	Special Education Teacher (86%) Autism Specialist (83%) DAPE (82%) Life Skills (81%) Para-professionals (81%)	Behavioral Intervention (72%) Extended School Year (69%) Family Education (70%) Mental Health Services (50%) Respite (67%)
How effective school was in meeting their child’s needs in Academics, Behavior, Communication, Social, Physical, and Extended School. Areas of strength scored 75% or above. Areas of need scored below 75%	N/A	Academics (66%) Behavioral (55%) Communication (64%) Physical Needs (65%) Social Needs (36%) Extended School year was rated: 36% strength 32% need 32% Not applicable

Tables shows evidence-based practices parents report included in their child’s education plan.

Included in more than 50% of the student’s educational plan
Social Skills Training (53%)

Included in less than 50% of the student’s educational plan
Visual Supports (39%) Positive Behavioral Supports and Intervention (33%) Exercise (31%) Reinforcements (31%) Picture Communication Systems (20%) Technology Aided instruction and intervention (19%) Applied Behavior Analysis (14%) Peer-Mediated Instruction (12%) Functional Communication Training (10%) Antecedent-Bases Intervention (7%) Discrete Trail Training (2%)

Table shows how parents rated how accessible services are in their community.

Services	Available	Difficult to Access or Unavailable
Employment Opportunities	47%	46%
Health Care	89%	7%
Healthcare Providers who are knowledgeable about persons with autism	47%	49%
Housing	32%	59%
Peer Mentoring	14%	74%
Post-Secondary Education	51%	32%
Recreational Activities	70%	26%
Self-Advocacy Training	26%	60%
Social Support Groups	32%	57%
Transportation	52%	41%
Volunteer Opportunities	62%	33%
Vocational Opportunities	44%	45%

Conclusion:

From the parent survey, four predominant “need” areas for children with autism were identified (1) Students with ASD need services or interventions outside of school services (72 percent). (2) Students who receive special education services need support in the areas of and accommodation and modifications, autism support specialists, paraprofessionals, recourse room, speech therapy, behavioral intervention, Developmental Adapted Physical Education (DAPE), occupational therapy, life and social skills, assistive technology, mental health services, and Extended School Year. (3) Students with ASD need sex education that is modified for the student with autism’s learning style/needs. (4) Students with ASD need help to build independent living skills and social skills as well as after school skills including how to apply for employment, interview for employment, and learn skills to retain employment.

If you would like additional information regarding the Part I – Educator Survey portion of the ASD Survey, please [contact the Minnesota Department of Education, Special Education Division, mde.special-ed@state.mn.us](mailto:mde.special-ed@state.mn.us); 651-582-8616. For more information regarding the Part II – Parent Survey portion of the ASD Survey, please [contact the Autism Society of Minnesota, info@ausm.org](mailto:info@ausm.org); 651-647-1083.