

Beyond Acceptance: Autism Inclusion and Equity

● ● ● ● ● A Guide for Educators, Parents and Students



Education
Healthcare
Public Services



Autism Society



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Since 1965, the Autism Society of America and our nationwide affiliate network have connected people to the resources they need through education, advocacy, and community-based programs. Our mission is to create meaningful connections that empower everyone in the Autism community with the supports and opportunities necessary to live fully. Our vision is a world where every Autistic person and their family can access the guidance, services, and community they need, whenever they need it. Learn more at autismsociety.org.

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Foreword

As both an autism researcher and sister of an autistic adult, I am deeply appreciative that the Autism Society of America and the AFT have worked together to produce this critical resource. *Beyond Acceptance: Autism Inclusion and Equity* reflects what I have witnessed throughout my sister Rachel's life and in my own research: Autistic people thrive when families, educators, peers, and communities work together with understanding and intention.

Over the years, I have seen firsthand how teachers often serve as trusted anchors within autistic students' developmental ecosystems, shaping experiences not only in classrooms, but also across families and communities. Teachers are uniquely positioned to shift the dominant narrative away from viewing autistic students as problems to be fixed and toward a neurodiversity paradigm that recognizes strengths, dignity and belonging.

Across its chapters, this book emphasizes that true inclusion and equity depend on systems—schools, policies, family supports and community cultures. The authors provide practical guidance that spans self-advocacy and legal rights, family navigation of tools like 504 plans, and the cre-

ation of school environments where autistic students are meaningfully included. *Beyond Acceptance* encourages readers to ask how systems can be redesigned to promote success, ease transitions, and foster collaboration between schools and families.

One of the book's greatest strengths is its attention to *developmental transitions*—critical turning points in autistic students' lives that can feel overwhelming but also present new opportunities. By addressing these moments across the life course, the authors remind us that inclusion is not a one-time achievement, but an ongoing process reliant on the systems and structures that seek to support individuals, families and communities.

This guide is a powerful example of collaboration in action, reflecting a shared commitment by the Autism Society and the AFT to supporting autistic individuals. I am confident that *Beyond Acceptance* will become a trusted and inspiring resource for educators, families and autistic students seeking pathways toward equity, belonging and thriving.

Emily Hotez, Ph.D.

University of California, Los Angeles,
David Geffen School of Medicine

Preface

This publication is the result of a shared vision and collaboration between the AFT and the Autism Society. Our intent is to separate fact from fiction, evidence-based research from speculation, and misconceptions about the firsthand experiences of individuals with autism. We guide you through the history of the Individuals with Disabilities Education Act, which marked its 50th

anniversary in 2025 to the education- and career-focused postsecondary transition plans designed around self-advocacy and supportive community organizations. We hope the voices of the individuals with autism and their families highlighted in this publication serve as an acknowledgment of diverse conditions, varied personal experiences, and above all, a shared sense of hope.



Part I:
**Building the Foundation—
Section 504 and IDEA**



CHAPTER 1:

Autism in the Educational Context

Removing children with disabilities from the regular classroom occurs only when the nature or severity of the disability is such that education in regular classes cannot be achieved satisfactorily.

—*Oberti v. Board of Education, 1993*

The history of autism in the education system reflects a gradual, hard-fought shift from exclusion to inclusion. For much of the 20th century, children with autism were often institutionalized or deemed “uneducable” and denied access to public schooling altogether. Many schools had policies explicitly restricting attendance. In Maine, for example, the revised education statute of 1903 noted disability as reason enough to deny a child whose “physical or mental conditions make it inexpedient for him to attend [school].” Students with intellectual and developmental disabilities either remained at home or were sent to institutions. By the mid-1970s, more than half of children with disabilities were not receiving the education provided to their nondisabled peers. Approximately 1 million children were excluded from public school enrollment.

This began to change with landmark federal laws. The Rehabilitation Act of 1973 and the Education for All Handicapped Children Act of 1975 (now the Individuals with Disabilities Education Act) guarantees the right to a free and appropriate public education in the least restrictive environment.



IDEA emphasizes meeting the individual educational needs of students rather than focusing solely on their condition. It also includes requirements for post-school transition planning (added in 1990) and expanded access to services in inclusive, rather than segregated, settings.

Racial, ethnic, gender, and economic disparities significantly affect access to an autism diagnosis, education, and support services. Children from African American, Latino and economically disadvantaged families are often diagnosed at comparatively later ages or misdiagnosed, delaying critical early interventions that improve long-term outcomes. Girls are also significantly underdiagnosed, with boys still three to four times more likely to receive an autism diagnosis. This gap reflects differences in how autism can present in girls, including more subtle traits, a greater tendency to mask behaviors, and diagnostic criteria historically based on male patterns. As a result, many girls are identified later, often not until adolescence or adulthood. Schools serving under-resourced communities frequently lack trained staff, inclusive curricula and culturally competent

supports, leading to inequitable individualized education programs and limited access to specialized therapies. These disparities perpetuate systemic barriers that impact academic achievement, social development and postsecondary opportunities for these students. While these inequities are rooted in a history of exclusion and underinvestment, they also call us forward—to build a future where equitable access, early interventions and inclusive educational practices ensure every student with a disability has the opportunity to reach their individual potential.

WHAT IS AUTISM?

Autism spectrum disorder —referred to here simply as “autism”—is a lifelong developmental condition that affects how an individual communicates, interacts socially, processes information and emotional regulation. Autism includes con-

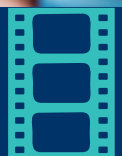
ditions once separately diagnosed as Asperger’s Syndrome and Pervasive Developmental Disorder—Not Otherwise Specified.

The word “spectrum” reflects the wide range of strengths and challenges experienced by individuals with autism. No two students with autism present in the same way. Some may need significant support in daily living, while others may be highly independent but still require specific accommodations in communication or sensory regulation.

Autism is largely found to be caused by genetic, biological and environmental factors. There is no single known cause, but research shows that early identification and support greatly improve long-term outcomes. Early intervention helps students access resources, build essential skills and expand opportunities for independent, fulfilling lives.



Early Signs of Autism Video Tutorial | Kennedy Krieger Institute,
www.youtube.com/watch?v=YtvP5A5OHpU&t=5s



- Autism is multifactorial—no one factor explains it. We now know that both genetics and environmental conditions shape risk, and it's the interaction between these factors that matters most.
- Environmental factors play a role, particularly during pregnancy. The evidence is strongest for parental age, certain prenatal exposures, extreme prematurity, and possibly maternal health conditions.
- Autism is not caused by vaccines. There are at least 16 well-conducted, large population-based studies, carefully designed, done by different investigators in different countries, using different but strong methods; and all have found no relationship between MMR vaccine, thimerosal in vaccines, or the number of vaccines given and autism. The evidence is compelling.¹

Most recent data² from the Centers for Disease Control and Prevention (as of 2025), finds that 1 in 31 children who are 8-year-olds across the U.S. have autism.

Dr. Peter Hotez, co-director of the Texas Children's Center for Vaccine Development and Texas Children's Hospital endowed chair of tropical pediatrics, stated, "... It's not just data showing there's no link between vaccines and autism, but everything we've learned about autism over the last few decades and a lot of it work supported by the U.S. National Institutes of Health to a group of outstanding neuroscientists across the country showing the genetic basis of autism..."³

It's important for educators to understand the difference between these two processes:

- **MEDICAL DIAGNOSIS**

Conducted by a licensed psychologist, developmental pediatrician, or another specialist, using clinical assessment tools and diagnostic criteria such as those in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5). Medical diagnoses often draw from developmental history, caregiver input and observations in multiple settings. A brief, single observation is not sufficient. A medical diagnosis can qualify a person for therapies and services outside school, often covered by health insurance or Medicaid.

- **EDUCATIONAL DETERMINATION**

Conducted by a multidisciplinary school-based team under the Individuals with Disabilities Education Act, which will be discussed further in the next section. The team—along with the family—reviews evaluation data to decide if a student meets the criteria for special education services. An educational determination ensures access to supports in school but does not guarantee eligibility for medical or community-based services. Likewise, a medical diagnosis does not automatically ensure educational eligibility under IDEA.

EARLY SIGNS AND DIAGNOSIS

Educators often play a key role in recognizing early signs of developmental differences. When a child is not following a typical developmental trajectory, families may seek input from psychologists, educators and medical professionals.

Some children with autism may initially appear to have an intellectual disability, hearing or vision

1 Johns Hopkins Bloomberg School of Public Health. (2025, March 19). *The evidence on vaccines and autism*. Johns Hopkins Bloomberg School of Public Health. <https://publichealth.jhu.edu/2025/the-evidence-on-vaccines-and-autism>

2 Centers for Disease Control and Prevention. (2025). *Surveillance summaries, Volume 74, Supplement 2. Morbidity and Mortality Weekly Report*, 74 (SS-2). <https://www.cdc.gov/mmwr/volumes/74/ss/ss7402a1.htm>

3 Share My Lesson. (July 15, 2025). *Vital lessons: A town hall on autism, education and public trust*. <https://sharemylesson.com/webinars/vital-lessons-town-hall-autism-education-public-trust>



concerns, or sensory processing differences. These conditions can occur alongside autism, making diagnosis more complex. This can be confusing for families, especially when multiple diagnoses are given.

The American Academy of Pediatrics, among others, identifies a number of signs of autism in the first two years of life.

Accurate identification is important. An early and precise autism diagnosis—medical or educational—ensures that the right supports can be put in place at home, in school, and in the community.

Research consistently shows that early identification and intervention lead to better outcomes in communication, learning and overall quality of life. The American Academy of Pediatrics recommends that all children be screened for developmental delays and disabilities during regular

well-child doctor visits at 9 months, 18 months and 30 months.⁴

Additionally, the CDC's National Center on Birth Defects and Developmental Disabilities recommends that pediatricians screen all children for autism at ages 18 months and 24 months. Importantly, intervention should begin as soon as autism is suspected. Families and educators do not need to wait for a formal diagnosis to provide supportive strategies. Early intervention programs can support children in developing language, social, and adaptive skills during critical windows of brain development, and the CDC's Learn the Signs. Act Early. campaign⁵ offers resources to help families recognize early developmental differences and connects them to services.

4 American Academy of Pediatrics. (2025). *Developmental surveillance and screening patient care*. <https://www.aap.org/en/patient-care/developmental-surveillance-and-screening-patient-care/>

5 Centers for Disease Control and Prevention. (2025, September 5). *Learn the Signs. Act Early*. National Center on Birth Defects and Developmental Disabilities. <https://www.cdc.gov/ncbddd/actearly/index.html>

There is no single test that can diagnose autism, but several screening tools are available that can help identify children who may need further evaluation, including:

- Ages and Stages Questionnaire (ASQ)—a general developmental screening tool (<https://agesandstages.com>)
- Modified Checklist for Autism in Toddlers (M-CHAT)—a parent-completed questionnaire focused on autism-related behaviors (<https://mchatscreen.com>)

These tools are typically used as part of a broader evaluation that incorporates teacher observations, family input and developmental history.

Important note: There are no medical tests, such as blood work or brain scans, for diagnosing autism. An accurate medical diagnosis must be based on observation of the individual's communication, social interaction, and their preferred activities and interests.

WHAT AUTISM CAN LOOK LIKE AND ITS IMPACT ON LEARNING, BEHAVIOR AND COMMUNICATION

Autism is a spectrum, which means it can look very different from one student to another. While everyone's profile is unique, educators often see patterns in the way autism affects communication, social behavior, learning and sensory processing. Understanding these differences help teachers and support staff respond with strategies that build on student strengths while reducing barriers to learning. Below are common characteristics grouped by area, along with notes on how they may appear in a school setting.

Communication Differences

Students with autism may:

- Have difficulty following multistep directions.
 - Respond inconsistently to verbal cues (e.g., seeming to hear sometimes but not at other times).
 - Show limited use of pointing, waving or other nonverbal communication.
- Note: Receptive communication is understanding language (listening/reading), while expressive communication is using language (speaking/writing). Autistic individuals often have uneven exhibits of these, frequently showing stronger receptive skills than expressive ones (understanding more than they can communicate), or experiencing gaps where one skill is perceived as stronger than the other. Autistic individuals often require extended processing time (often 6–10+ seconds) to interpret verbal language, social cues, and sensory input.
- Impact in the classroom:* Communication differences can make it difficult for students to participate in group discussions, ask for help or follow daily routines without support. Alternative communication methods, visual aids and structured routines can make a significant difference. An estimated 25 to 30 percent of individuals with autism are minimally verbal or do not develop functional spoken language. Providing students with augmentative and alternative communication methods is crucial. These can include low-tech and high-tech options.
- Low tech: This includes methods like communication boards with pictures (such as a picture exchange communication system) or symbols, objects that represent concepts, writing and sign language.
 - High tech: This involves the use of speech-generating devices, which can range from dedicated communication devices to tablets or computers with specialized software.
- Struggle to express wants or needs verbally or through gestures.

Social Behavior Differences

Students with autism may:

- Avoid eye contact or have difficulty sustaining it.
- Appear uninterested in peers or prefer solitary play.
- Seem “in their own world” or tune others out.
- Show a unique independence for their age or be reluctant to accept assistance.

Impact in the classroom: Social differences can affect group work, peer relationships and participation in collaborative learning activities. Intentional social skills instruction, peer-buddy programs, and structured cooperative activities can help bridge gaps.

Repetitive Behaviors

Students with autism may:

- Have difficulty transitioning to new activities.
- Develop strong attachments to specific objects or rituals.
- Spend long periods organizing, lining up or sorting items.
- Repeat words or phrases out of context.

Impact in the classroom: These behaviors can serve as self-regulation tools but may also interfere with task completion or adaptability and impact education. Predictable schedules, clear transition cues and gradual changes can support flexibility.

Other Behavioral and Sensory Differences

Students with autism may:

- Walk on their toes or show atypical body movements.
- Experience intense meltdowns when overwhelmed.
- Be overly active, have difficulty following directions, or resistant to changes.

- Show extreme sensitivity—or under-responsiveness—to sounds, lights, textures or smells.

Note: An autistic meltdown is an involuntary response to overwhelming stress or sensory input. It is not a behavioral issue but a natural reaction when an individual's coping mechanisms are exceeded. Meltdowns involve visible distress, such as crying, yelling, pacing or stimming (rocking, hand-flapping, vocalizations) as self-regulation strategies. Some individuals may try to escape the stressful situation. Each meltdown is unique; empathy and patience are essential in response.⁶

Impact in the classroom: Sensory differences can affect focus, behavior and comfort. Adjustments like noise-reducing headphones, quiet spaces, and sensory-friendly materials can reduce stress and increase engagement.

Additional Characteristics Often Seen in Students with Autism:⁷

- Delayed speech or motor development.
- Attention differences (hyperactive, impulsive or inattentive behavior).
- Co-occurring conditions such as epilepsy, seizure disorders, anxiety or gastrointestinal issues.
- Atypical fear responses—either unusually high or unusually low fear levels.
- Atypical eating or sleeping patterns (may affect school alertness and behavior). Some children may mask these characteristics by trying to hide or copy behaviors to fit in socially, which can make autism harder to recognize and may lead to stress, anxiety, or exhaustion.

⁶ Autism Society. (2025). *Autistic meltdowns and shutdowns: An inclusive guide for healthcare professionals*. https://autismsociety.org/wp-content/uploads/2025/07/AutismSociety_Autistic-Meltdowns-Shutdowns_2025-06V2F_Digital.pdf

⁷ Autism Society. (2025). *Screening for Common Diagnoses in Autistic Individuals: A Healthcare Professional's Guide*. https://autismsociety.org/wp-content/uploads/2025/06/AutismSociety_Screening-Common-Diagnoses-Autistic-Individuals_2025-06V1F_Digital.pdf



CHAPTER 2:

The Individuals with Disabilities Education Act

“... to ensure that all children with disabilities have available to them a free appropriate public education that emphasizes special education and related services designed to meet their unique needs and prepare them for further education, employment, and independent living ... and to ensure that the rights of children with disabilities and parents of such children are protected. ...”

IDEA, Section 1400 (d)

IDEA

The Individuals with Disabilities Education Act is the federal law that mandates every student with a disability has the right to a free and appropriate public education in the least restrictive environment. Schools are obligated to provide the supports and services a student needs to learn and participate alongside their peers to the greatest extent appropriate. IDEA is composed of four parts: Parts A, B, C and D. Part A details the foundation of IDEA. Part B includes the educational procedures for individuals with disabilities ages 3-21. Part C addresses early intervention services for infants and toddlers. Part D includes information to improve the education of children with disabilities via competitive grants to state education agencies. The contents of Parts B and C are the focus of this publication.

IDEA is built on six key components: free appropriate public education (FAPE), appropriate evaluation, individualized education program (IEP), least restrictive environment (LRE), parent and student participation, and procedural safeguards.

Free Appropriate Public Education

All students with a disability are entitled to a public education tailored to their individual needs—at no cost to their family. This includes special education services, accommodations and modifications that help the student make progress in school. Per the notable Supreme Court case, *Endrew F. v. Douglas County School District*, which centered on a student with autism, it was determined that an educational program providing only de minimis (too small to be meaningful) student progress is not sufficient. Rather, “an IEP [should be] reasonably calculated to enable a child to make progress appropriate in light of the child’s circumstances.” The student should have the opportunity to meet challenging and ambitious IEP goals.⁸

Evaluation for Special Education Services

Per IDEA’s Child Find mandate, schools must identify and evaluate students who may have

⁸ *Endrew F. v. Douglas County School District*, RE-1, 137 S. Ct. 988, 990 (2017). https://www.supremecourt.gov/opinions/16pdf/15-827_0pm1.pdf

disabilities. Evaluations must be conducted by qualified professionals; free of bias; and comprehensive, using multiple assessment tools. Parents and guardians are active participants in this process. Once a request for an initial evaluation is made, schools have a specific timeline to respond in writing, also known as prior written notice. (Check the respective state's education code; in Illinois, for example, administrative code 226 documents that within 14 school days after receiving a request for an evaluation, the district must determine whether an evaluation is warranted via prior written notice.) To review differences by state, visit www.ed.gov/contact-us/state-contacts.

Children under 3 who have, or are suspected to have, autism can receive assistance under IDEA,

Part C. Congress recognized "... [the] urgent and substantial need ... to recognize the significant brain development that occurs during a child's first three years of life."⁹ Children who meet their state's definition of developmental delay or disability are eligible for early intervention service. Such services are designed to meet the developmental needs of the child and the needs of the family to assist appropriately in the child's development. These services should occur in the natural environment as much as possible, including the home and community settings in which children without disabilities participate.¹⁰

⁹ Individuals with Disabilities Education Act (IDEA), 20 U.S.C. § 1431(a). <https://sites.ed.gov/idea/statute-chapter-33/subchapter-iii/1431>

¹⁰ The IRIS Center. (n.d.). *The IRIS Center*. Peabody College, Vanderbilt University. <https://iris.peabody.vanderbilt.edu/>

Gifted Learners

IDEA does not recognize giftedness* as a disability unless paired with a qualifying condition. Giftedness is governed by state policies rather than federal law. Giftedness does not disqualify a student from receiving a special education assessment, potential special education services and instruction based on the eligibility determination.

Example: The Pennsylvania Code (22 Pa. Code §16.2) indicates that each school district must, by direct service or through arrangement with other agencies, provide the following:

Services and programs planned, developed and operated for the identification and evaluation of each gifted student;

Gifted education for each gifted student which is based on the unique needs of the student, not solely on the student's classification; and

**Note: Some states consider gifted as a category*

Gifted education for gifted students which enables them to participate in acceleration or enrichment programs, or both, as appropriate, and to receive services according to their intellectual and academic abilities and needs.





the process within the school system itself. There are multiple ways an evaluation may be requested.

Parent/Guardian Request: A parent or guardian may request an evaluation in writing to the school principal, the district's special education director, or other authorized school personnel. Written requests are important because they establish a timeline for the process. Parents should keep a copy for their records and consider sending the request to multiple relevant parties. Additionally, parents should keep a copy for their records.

School-Initiated Request: A school team may determine whether an evaluation is needed based on academic performance, behavior and/or other observed concerns. Before starting the evaluation, the school must obtain written consent from the parent or guardian.

Additionally, a state educational agency, other state agency, or local educational agency may initiate a request for an initial evaluation.¹¹

IDEA requires that evaluations be conducted by a multidisciplinary team—not just one person—and must include:

- At least one teacher or specialist with expertise in the suspected area of disability.
- Professionals who can assess the child across all relevant areas, such as health, vision, hearing, communication abilities, motor skills, and social and/or emotional functioning.

If parents disagree with the school's evaluation results, they may request an independent educational evaluation. If the evaluator meets state-established qualifications, the school must consider the results when developing the IEP.

¹¹ Individuals with Disabilities Education Act (IDEA), 20 U.S.C. § 1414 (evaluations, eligibility determinations, individualized education programs, and educational placements). [https://uscode.house.gov/view.xhtml?req=\(title:20%20section:1414%20edition:prelim\)](https://uscode.house.gov/view.xhtml?req=(title:20%20section:1414%20edition:prelim))

Individualized Family Service Plan

This plan is designed for children from birth to age 3. When children are this young, the plan is designed for the entire family, not just the child. A family-directed assessment includes a review of the family's resources, priorities and concerns. The individualized family service plan must include measurable results or outcomes to be achieved. This is outlined in Part C of IDEA under Child Find. There is a federal mandate for states to find children who may have disabilities and may need support. Parents may be referred by pediatricians and early childhood providers.

Some students, however, arrive at school with a medical diagnosis and families then request an individualized education program; others begin

Eligibility Criteria for Special Education Under IDEA

To receive special education services under IDEA, a student must meet two requirements. They have a disability that falls into one of IDEA's defined categories and that disability adversely affects their educational performance. A medical diagnosis alone does not determine educational need. It must be found that the diagnosis impacts the student's educational performance.

When a student is determined eligible for special education services, their disability category will fall under one or more of the following 14 disability categories:

- Autism;
- Deaf-Blindness;
- Deafness;
- Developmental Delay: For children ages 3-9, a delay in one or more areas—physical, cognitive, communication, social or emotional, or adaptive development—that affects learning (refer to the respective state's education code);
- Emotional Disturbance;
- Hearing Impairment;
- Intellectual Disability;
- Multiple Disabilities;
- Orthopedic Impairment;
- Other Health Impairment: limited strength, vitality, or alertness due to chronic or acute health problems (e.g., attention-deficit/hyperactivity disorder, epilepsy, asthma, diabetes) that impact learning;
- Specific Learning Disability: Difficulties in understanding or using language (spoken or



written) that may affect reading, writing, math or other academic areas. Examples include dyslexia, dyscalculia and dysgraphia.

- Speech or Language Impairment;
- Traumatic Brain Injury; and
- Visual Impairment, including blindness.

Least Restrictive Environment

IDEA requires that students with disabilities learn alongside peers without disabilities as much as appropriate. General education classrooms are often, but not always, the least restrictive setting. If a student cannot access FAPE in that environment, with supplementary supports and/or services, the IEP team explores other placements, documenting the justifications and decisions in the IEP.

An IEP is both a plan and a legal document that outlines the student's educational goals, services, and how progress will be measured. It is created by a diverse team that includes the student's parents/guardians; at least one general education teacher; at least one special education teacher; specialized instructional support personnel (based on need); a representative of

the local education agency; the student (when appropriate); and others invited by the parents or school (e.g., specialists, advocates). The IEP must be reviewed at least once a year, and meetings should be scheduled at times that work for both the family and school staff within the hours of the school day. Parents must receive advance written notice of the meeting's purpose and participants.

Parent and Student Participation

Parents/guardians are equal partners with educators in planning and decision-making. They have the right to participate in IEP meetings, review educational records, and give input on goals and services. As students get older, they are encouraged to join the process, especially regarding postsecondary planning and the development of self-advocacy skills.

Procedural Safeguards

These protections ensure families are provided with information as to the rights of their child with a disability and their rights as parents. Schools must give parents a written explanation of these rights when a student is referred for special education and every year during the lifetime of the IEP. Safeguards outline steps for resolving disputes, including mediations and formal hearings.¹²



¹² Center for Parent Information and Resources & Autism Society of America. (n.d.). Autism resources. <https://www.parentcenterhub.org>; <https://www.autismsociety.org>

CHAPTER 3:

Section 504 of the Rehabilitation Act of 1973

“No otherwise qualified individual with a disability in the United States ... shall, solely by reason of her or his disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.”

—Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. § 794(a)

WHAT IS SECTION 504?

Section 504 of the Rehabilitation Act of 1973 is a civil rights law that protects students with disabilities from discrimination in schools that receive federal funding. All public schools and school districts, as well as all public charter schools and magnet schools that receive federal financial assistance, must comply with Section 504. It ensures students with disabilities have equal access to education through accommodations and modifications. A 504 Plan is a written document that outlines the supports and/or services a student needs to participate fully in the general education setting. Unlike an IEP under IDEA, which provides specially designed instruction by a special education teacher, a 504 plan focuses on access. The intent of the 504 plan is to remove barriers that prevent full participation by the student.





Differences and Similarities Between IDEA and Section 504

- **Section 504:** Civil rights law; ensures access to learning, accommodations and modifications in general education; broader eligibility
- **IDEA and IEPs:** Special education law; provides specialized instruction; may include changes to curriculum; more specific eligibility categories
- Students with autism can qualify under either law, depending on whether they require specially designed instruction with or without related services (IDEA) or accommodations and/or services to enable full participation in the general education setting. (Section 504).

ELIGIBILITY AND IMPLEMENTATION OF 504 PLANS

Students may be eligible for a 504 plan if they have a physical or mental impairment that substantially limits one or more major life activities (such as breathing, eating, learning, concentrating, seeing, hearing, standing, walking or communicating). Common examples include autism, attention-deficit/hyperactivity disorder, diabetes, epilepsy, vision or hearing impairments, chronic health conditions (e.g., asthma, severe allergies), mental health conditions (e.g., anxiety, depression) and recovery from serious illness or injury.

SECTION 504 LEGAL PROTECTIONS AND ACCOMMODATIONS

Students with Section 504 plans are entitled to a free appropriate public education or FAPE, which is an education designed to meet their needs as effectively as those of students without disabilities; protection from discrimination in any program receiving federal funding; and accommodations and/or modifications that remove barriers to learning. Additionally, parents must receive written notice when the school identifies, evaluates or changes their child's placement under a 504 plan.¹³

¹³ U.S. Department of Education. (n.d.). *Section 504*. <https://www.ed.gov/laws-and-policy/individuals-disabilities/section-504>

Part II:
**Making It Work—IEPs,
504 Plans, and Your Rights**



CHAPTER 4:

Understanding the IEP Process

An individualized education program or IEP is a written plan designed to support a student whose disability affects learning at school. Once a student is found eligible for special education under the Individuals with Disabilities Education Act, the IEP team must meet within a required timeline following federal law and the respective state education code—to create a plan tailored to the student’s needs.

The IEP meeting is a collaborative process. Families; educators; specialized instructional support personnel, including the school psychologist who delivers and translates the evaluation data; the student; translators (when required); local educational agency representatives; and other professionals, including transition specialists, advocates and others, come together as partners to design a plan that builds on the student’s strengths while addressing areas where support is needed. The goal is to create an educational program that is realistic, purposeful, challenging and focused on helping the student make meaningful progress in school and beyond. IEP teams review evaluation results; discuss family and teacher concerns; and consider the individual student’s academic, developmental, functional and behavioral needs. The team also explores supports such as assistive technology (considered for every student),

communication tools, health or medical considerations, language supports, postsecondary transition services, and related services like speech therapy, occupational therapy, physical therapy, counseling or social work services.

Every IEP must include certain elements required by federal law. These include a clear description of the student’s current skills and needs, measurable goals for the year, and a plan for how progress will be tracked and shared with families. The IEP also explains what special education services, related services, accommodations, and supports will be provided; where and how often they will occur; and who is responsible for delivering them. Placement decisions describe how much time the student will spend learning alongside peers without disabilities, and assessment plans outline how the student will participate in classroom and state testing.

As students grow older, IEPs also help plan for the future. By age 16—or earlier in some states—the IEP includes transition planning focused on life after high school, such as college, career training, employment and independent living. Before a student reaches the age of majority, the IEP also documents how educational rights will transfer to the student, in accordance with state law.

Students are encouraged to participate whenever appropriate in preparing for IEP meetings and are required members of the team when transition plans are developed. State and/or community postsecondary transition partners are also included to ensure the team has the knowledge needed to make informed decisions. Procedures may vary across states and districts, but all IEPs must follow the core requirements of IDEA.

At the heart of the IEP are the student's goals, which guide instruction and services throughout the year and are written in clear, measurable terms so everyone understands what the student is working toward and how success will be measured. Goals may focus on academics, communication, social and emotional skills, behavior, independence, and/or daily living skills. Clear goals help families, educators, and administrators stay aligned and accountable.

An IEP is not a static document. It is reviewed at least once a year, but progress is monitored continuously. Teams collect data, share updates with families, and adjust supports when needed. Ongoing communication and collaboration among educators, related service providers (also known as specialized instructional support personnel), administrators, and families ensure that the IEP remains responsive to the student's needs and supports meaningful progress over time.¹⁴

It's important to note that states and districts can go through the IEP process in different ways and include different resources. They must all follow the basic guidelines that IDEA outlines, but many details and processes can vary from state to state. For example, New Mexico includes 11 IEP considerations for students presenting with autism spectrum disorder in their annual IEP meetings with families and students.¹⁵

Effective IEP goals are student-centered, positively stated, and directly aligned with the needs identified in the Present Levels of Academic Achievement and Functional Performance. High-quality goals follow the SMART framework—specific, measurable, attainable, relevant, and time-bound—to ensure they are meaningful and achievable.

Well-written goals clearly define who will demonstrate the skill, what skill or behavior will be learned, under what conditions the skill will be performed (example: using math manipulatives; using phonemic strategies), and where it will occur. The goals also specify how mastery will be measured—such as through data collection, work samples or observations—and when the goal is expected to be achieved.



¹⁴ Center for Parent Information and Resources & Autism Society of America. (n.d.). *Autism Resources*. <https://www.parentcenterhub.org>

¹⁵ New Mexico Public Education Department. (2023). New Mexico Includes 11 IEP Considerations for Students with Autism Spectrum Disorder. <https://web.ped.nm.gov/bureaus/special-education/asd/>



Goal Example

Goal: Given a choice of 3 letters, Sam will independently identify all 26 letters of the alphabet without adult prompting in 4 out of 5 opportunities using multisensory strategies, flashcards and magnetic letters.

Objective/Benchmark 1: By Dec. 1, 2022, given a choice of 3 letters, Sam will independently identify 9 letters of the alphabet without adult prompting in 4 out of 5 opportunities.

Objective/Benchmark 2: By March 1, 2023, given a choice of 3 letters, Sam will independently identify 18 letters of the alphabet without adult prompting in 4 out of 5 opportunities.

Objective/Benchmark 3: By June 1, 2023, given an array of 3 letters, Sam will independently identify 26 letters of the alphabet without adult prompting in 4 out of 5 opportunities.¹⁶

To support progress monitoring and accountability, goals must include explicit criteria for mastery. These criteria may focus on accuracy, frequency, consistency over time, or the level of independence or support required. Clearly articulated goals not only guide instruction but also ensure that student progress can be reliably measured and meaningfully communicated to families and the IEP team.

DEVELOPING CRITERIA FOR MEASURING MASTERY

To ensure that student progress is accurately monitored, IEP goals must clearly define how success will be measured. Well-written goals include specific, objective criteria that allow educators and families to determine whether a student is making meaningful progress. Measurement criteria may include accuracy, such as correctly completing a set number of tasks; frequency, which reflects how often a behavior or skill occurs; consistency, demonstrating the skill across multiple sessions or settings; and the level of support required, ranging from independent performance to performance with prompts or assistance. Clearly articulating these elements strengthens accountability and ensures that progress is observable, measurable and data-driven.

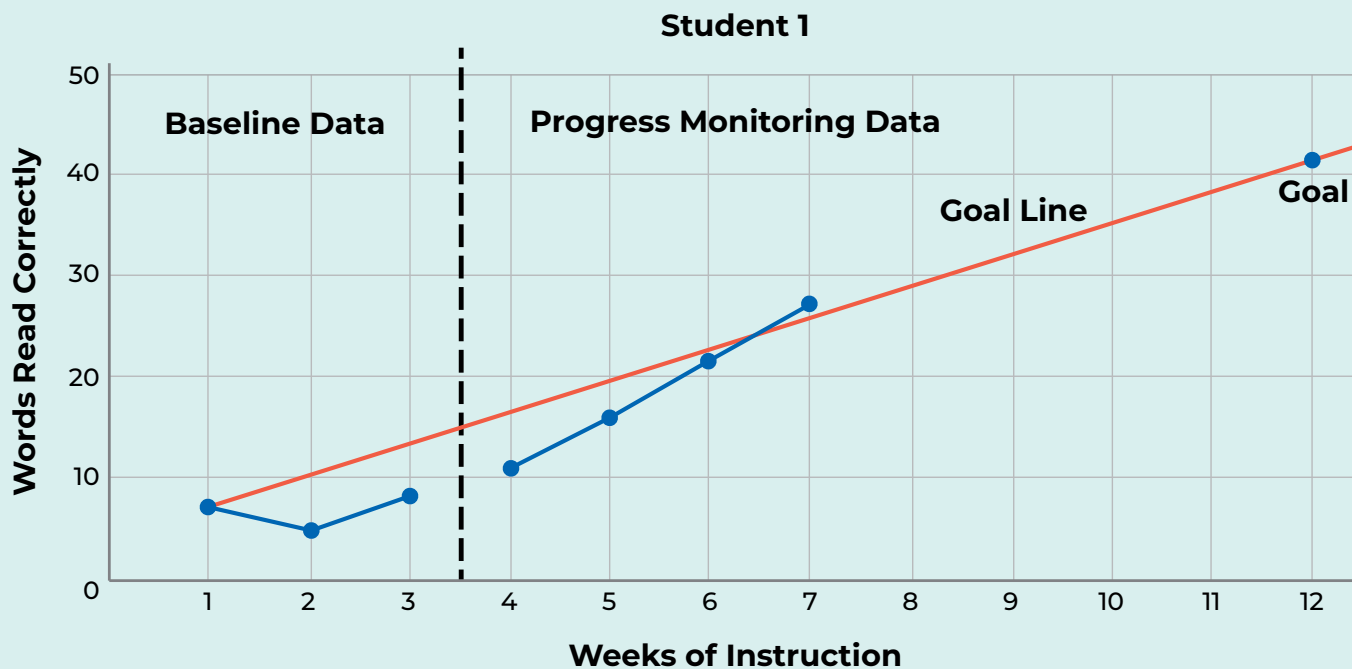
IEP goals may address a wide range of student needs, including academic skills. Academic goals should specify the instructional context, the skills to be mastered, and the methods used to support learning. For example, within one year and during structured literacy activities, a student may be expected to correctly identify all uppercase and lowercase letters and corresponding letter sounds with a specified level of accuracy. Instructional approaches such as systematic phonics, multisensory techniques (including tactile materials and visual cues), and guided practice can be embedded in the goal, with progress measured through regular assessments and teacher observations.

¹⁶ Connecticut Parent Advocacy Center. (n.d.). *Individualized education program (IEP): Goals and objectives*. <https://cpacinc.org/iep-goals-objectives.aspx>



Monitoring Progress

The figure below is an example of a student's progress monitoring graph for reading fluency. Note that there is a vertical, dashed line separating the baseline data from the progress monitoring data. Also note that there is no line connecting the baseline data points to the progress monitoring data points.¹⁷



¹⁷ The IRIS Center. (2014). Page 3: Monitoring progress. Evidence-based practices (part 3): Evaluating learner outcomes and fidelity. https://iris.peabody.vanderbilt.edu/module/ebp_03/cresource/q2/p03/

Goals may also target functional or daily living skills, which support student independence in school and community settings. These goals often focus on routines such as self-care, mobility, or use of transportation. For instance, a toileting goal may describe the student's ability to independently recognize the need to use the bathroom and initiate the appropriate routine across multiple opportunities. Progress toward functional goals is typically measured through structured observation and ongoing data collection.

Additionally, IEPs frequently include goals addressing social, emotional and behavioral skills, including emotional self-regulation and social reciprocity. These goals should clearly identify the situations that may trigger emotional

responses, the coping strategies the student has been taught, and the expected behavioral outcomes. For example, when faced with an anxiety-provoking independent assignment, a student may be expected to independently apply a learned coping strategy to resume and sustain task engagement within a defined timeframe, with limited adult prompting, and across multiple observed opportunities.

IEP goals may further address sensory and communication needs, including the use of augmentative and alternative communication systems, as well as the need for related services and accommodations. Goals in these areas should clearly outline how supports will be used to improve access to instruction and participation in school

activities. Under IDEA, all services, supports and goals must be clearly described in the IEP so that every member of the team understands exactly what will be provided and how student progress will be evaluated.

Each service or support included in an IEP must be clearly and specifically described to ensure accountability and consistent implementation. This includes identifying the type of service being provided, such as specially designed instruction, speech-language therapy, occupational therapy, counseling or transportation; the frequency of the service, stated in concrete terms (for example, “three times per week” rather than “as needed”); and the duration, or length of each session. The IEP must also specify the location where the service will occur, the start and end dates that define the exact timeframe for service delivery, and the responsible provider, such as a special education

teacher or related service professional. For example, an IEP may specify occupational therapy for 30 minutes, two times per week, delivered in the occupational therapy room by the occupational therapist from the start of the annual IEP to the completion date.

Many of these services can be funded and reimbursed through Medicaid. If a student is Medicaid-eligible, the parent or guardian must sign consent each academic year for the school to bill Medicaid for services provided in school. Medicaid is a significant funding source for public education, ranking as the fourth-largest federal funding stream for K-12 schools in 2025.

REVIEW AND PROGRESS MONITORING

IEPs are reviewed at least annually to evaluate student progress and make necessary adjustments



to goals, services and supports. While the annual review is a formal requirement, effective progress monitoring should be ongoing throughout the year to ensure that students are moving steadily toward their identified goals. Progress must be measured using the specific methods and schedules outlined in the IEP and communicated regularly to families in a clear and meaningful way. Importantly, if data indicates that a student is not making expected progress, the IEP team does not need to wait until the annual review. Changes to goals, services or supports (based on data) can be made at any time through an IEP meeting to better meet the student's needs.

A multidisciplinary, collaborative approach is essential to successful IEP implementation and progress monitoring. Regular communication and collaboration among all members of the IEP team help ensure a shared understanding of the student's strengths, challenges and

progress. This collaborative team may include general and special education teachers, para-professionals, occupational therapists, speech-language pathologists, counselors and other mental health providers, behavior specialists, and school administrators such as principals or instructional leaders. Purposeful team meetings provide opportunities to collectively review student data, align instructional practices, and make consistent, informed decisions about supports and interventions.

High-quality data collection and analysis are central to informed decision-making and effective communication with families. Data should be collected systematically to answer three critical questions: whether the student is making progress toward IEP goals; whether current instructional strategies and supports are effective; and whether adjustments to goals, services or accommodations are needed. Best practices include clearly defining what will be measured based on the specific, measurable components of each goal; using consistent tools and methods across team members; and collecting data frequently, whether daily or weekly depending on the goal. Incorporating multiple data sources—such as work samples, observational notes, checklists, progress-monitoring tools and behavioral logs—provides a more comprehensive picture of student progress. Visual representations, including graphs and charts, further support data interpretation and make progress trends easier to share with families and administrators. Data drives instruction, not just document compliance. Meaningful data collection ensures that students receive individualized, responsive support that meets their unique needs.¹⁸



¹⁸ IRIS Center. (n.d.). IEP Considerations for Students with Autism Spectrum Disorder. Vanderbilt University Peabody College. <https://iris.peabody.vanderbilt.edu/module/iep01/cresource/q3/p07/>

CHAPTER 5: Creating and Implementing Effective 504 Plans for Educators and Parents



IDENTIFYING NEEDS UNDER A 504 PLAN

As noted in Chapter 3, section 504 of the Rehabilitation Act is a federal civil rights law designed to protect students with disabilities from discrimination and to ensure they have equal access to educational opportunities. A student may be considered eligible for a Section 504 plan if they have a physical or mental impairment that substantially limits one or more major life activities, such as learning, breathing, communicating, concentrating, or engaging in social interaction.

Autism frequently qualifies under Section 504 because it can impact multiple areas of functioning. The purpose of a 504 plan is not to provide specialized instruction, but to remove barriers so students can access their education on an equal footing with their peers.

The Section 504 process typically begins when a parent or guardian, student, or school staff member requests an evaluation. Best practice is for parent requests to be made in writing and submitted to designated school personnel, such

Key features of ‘free appropriate public education’ under Section 504 include:

- Evaluation and placement procedures that guard against misclassification or inappropriate placement of students.
- Periodic reevaluation of students who have been provided with special education or related services and prior to a significant change in placement.
- Provision of regular or special education and related aids and services that are designed so that the individual educational needs of students with disabilities are met as adequately as the needs of non-disabled peers are met.
- Education of students with disabilities with non-disabled students—to the maximum extent that this arrangement is appropriate for the needs of students with disabilities.
- A system of procedural safeguards (that is designed to inform parents of a school district’s actions or decisions and to provide parents with a process for challenging those actions or decisions) that include notice; an opportunity for parents to review their child’s records; an impartial due process hearing (with an opportunity for participation by the student’s parents or guardians and representation by counsel); and a review procedure.

as the principal, section 504 coordinator, special education director, case manager or an administrative designee—either by email or in person. Once a request is received, the school district must either agree to conduct an evaluation or formally refuse the request through prior written notice, consistent with state education code

timelines. If a district refuses, it must provide a written explanation of the decision and include Section 504 procedural safeguards, which outline parents’ rights to appeal or request an independent evaluation. Parental consent is required before the initial evaluation is conducted.

Eligibility determinations are made by a team of qualified professionals who review relevant evaluation data. This team often includes general education teachers and specialized instructional support personnel, such as the school nurse, social worker or counselor, speech-language pathologist, vision or hearing itinerant, occupational therapist, or physical therapist, as appropriate. Although parents are not legally required to be members of the Section 504 team, the U.S. Office for Civil Rights strongly encourages schools to include them because of their unique knowledge of the child. If a student is found ineligible, parents must receive a clear explanation and information about their right to appeal through a district hearing. If the student is determined to be eligible, the team develops a Section 504 plan outlining the accommodations and/or services necessary to ensure the student receives an education comparable to that of peers without disabilities. These accommodations must apply to all school-related activities, including extracurricular programs and events.

For students with autism, accommodations under Section 504 focus on eliminating barriers that interfere with full participation in school life. While accommodations serve different purposes for students with IEPs and those with 504 plans, the underlying goal is access. For students with IEPs, accommodations support progress toward individualized goals and participation in the general curriculum. For students with Section 504 plans, accommodations are designed to remove obstacles that limit equal access to instruction, activities and school environments.

Common accommodations for students with autism often include physical or environmental supports, such as reducing noise or sensory distractions, providing access to quiet spaces or rest breaks, and adjusting seating to allow movement or proximity to the teacher. Instructional accommodations may include breaking assignments into smaller, manageable steps; providing written instructions in addition to oral directions; and allowing additional processing time during class discussions or assessments. These strategies are beneficial for many students and promote inclusive learning environments.

In some cases, students with autism may also require related services to ensure equal access to education. Section 504 defines an appropriate education as the provision of regular or special education and related aids and services designed to meet the student's individual educational needs as adequately as those of students without disabilities.¹⁹ Related services included in a 504 plan may include one or a combination of

¹⁹ U.S. Department of Education, Office for Civil Rights. (2025). *Frequently asked questions: Section 504 free appropriate public education (FAPE)*. <https://www.ed.gov/laws-and-policy/civil-rights-laws/disability-discrimination/frequently-asked-questions-section-504-free-appropriate-public-education-fape>



the following services: speech-language therapy, occupational therapy, counseling, social skills support, and staff professional learning activities to improve understanding of autism and effective implementation of accommodations.

Examples of autism-specific accommodations include testing in a quiet location, preferential seating away from sensory triggers, use of visual schedules or organizers, access to assistive technology such as text-to-speech software, and adjustments to homework expectations based on fatigue or anxiety. Structured peer supports for group work may also be included. The overarching goal of these accommodations is to provide meaningful equal opportunity by ensuring that the student can participate alongside peers while acknowledging and addressing functional limitations.

Effective Section 504 plans rely on strong collaboration between educators and families. Schools are responsible for appointing a Section 504 coordinator, maintaining grievance procedures, identifying eligible students, and providing parents with written notice of their rights and procedural safeguards. These safeguards include notification of proposed changes in identification, evaluation or placement; access to educational records; and the right to request an impartial hearing and review. For educators, collaboration means consistently documenting how accommodations are implemented, communicating regularly with families about student progress and challenges, and raising concerns promptly if a plan is not adequately meeting the student's needs.²⁰

MONITORING AND ADJUSTING 504 PLANS

Federal law does not specify how often a 504 plan must be reviewed, but periodic re-evalua-

tion is required. However, re-evaluation (every three years but subject to an earlier time per request and specific situations) is required before any significant change in placement, including suspensions longer than 10 consecutive or cumulative school days. Although 504 plans have no set expiration date, regular review ensures the accommodations remain effective and relevant.²¹

Procedural Safeguards Scenario

Ms. Lee informed staff at her son's school that she believes her son may require special education services because he cannot seem to sit still and concentrate on his assignments regardless of the subject for an extended period. Although Ms. Lee has made multiple requests in writing, the school has not provided a written response. Is the school's approach permissible?

No, a school cannot ignore a parent's request for an evaluation. The school is obligated to provide prior written notice informing that parent whether an evaluation is warranted within an established timeframe using multiple data sources. Dependent upon state education code, some states' schools are obligated to provide the evaluation but must also provide prior written notice in response to the parent's request.²²

20 PACER Center. (n.d.). PACER Center: Parent Training and Information. <https://www.pacer.org>

21 U.S. Department of Education, Office for Civil Rights. (n.d.). Section 504 of the Rehabilitation Act of 1973. <https://www2.ed.gov/about/offices/list/ocr/504faq.html>

22 U.S. Department of Education, Office for Civil Rights. (2016). Parent and Educator Resource Guide to Section 504 in Public Elementary and Secondary Schools. <https://www.ed.gov/sites/ed/files/about/offices/list/ocr/docs/504-resource-guide-201612.pdf>

CHAPTER 6: Legal Rights and Discipline of Students with Disabilities

The Individuals with Disabilities Education Act and Section 504 of the Rehabilitation Act of 1973 both anticipate that disputes will arise regarding the precise content, scope, services and other aspects of a student's individualized education program.

DUE PROCESS AND RESOLUTION OPTIONS

IDEA and Section 504 guarantee students with disabilities, including autistic students, the right to a free appropriate public education. When disagreements arise between families and schools regarding evaluations, eligibility, services, placement or implementation of supports, both laws provide formal and informal mechanisms for resolution. School personnel must be familiar with these processes because they directly influence classroom practices, relationships with families, and the effective use of school resources.

Disputes can often be resolved through informal problem-solving at the school level. IEP or Section 504 team meetings, collaborative discussions and proactive communication frequently prevent disagreements from escalating. When informal efforts are unsuccessful, families may pursue more formal options. These include filing state complaints with the state education agency for alleged violations of IDEA or Section 504, partici-



pating in mediation with an impartial third party, or requesting a due process hearing. Due process hearings are trial-like procedures in which a hearing officer reviews evidence and renders a binding decision. Families may also file civil rights complaints with the U.S. Department of Education's Office for Civil Rights under Section 504 or the Americans with Disabilities Act if they believe discrimination has occurred.

Discipline is one of the most common sources of conflict for students with disabilities, including autistic students with an IEP or 504 plan. Federal law includes safeguards designed to ensure that disciplinary practices do not deny students access to a free appropriate public education.

When a student with an IEP or Section 504 plan is suspended for more than 10 cumulative or consecutive school days this constitutes a change of placement, and the school must conduct a Manifestation Determination Review (MDR). The purpose of the MDR is to determine whether the

student's behavior was a manifestation of the student's disability or the result of the school's failure to implement the IEP or 504 plan. If the behavior is determined to be a manifestation, the student must return to their placement, and the team must address the behavior through additional supports.

These supports typically include modifying an existing behavior intervention plan (BIP) or conducting a functional behavioral assessment (FBA) and developing a BIP (if the student is determined eligible). The FBA is a data-driven process used to identify the function or purpose of a student's behavior. For students with autism, FBAs may reveal unmet sensory needs, communication challenges, or environmental triggers contributing to behavior among other data-based identified needs. Based on the results of the FBA, a BIP outlines proactive strategies, interventions, and supports designed to reduce challenging behaviors and teach appropriate replacement skills. While states differ in how FBAs and BIPs are conducted and created, effective implementation of these tools helps prevent repeated suspensions and promotes access to safe, supportive learning environments.

If a behavior is determined not to be a manifestation of the student's disability, standard disciplinary procedures apply. Additionally, there are special circumstances, e.g., a student carries a weapon, possesses illegal drugs, or inflicts serious bodily injury upon another person, where school personnel may remove a student to an interim educational setting for not more than 45 school days, without regard to whether the behavior is determined to be a manifestation of the child's disability. If the parent disagrees with any decision regarding placement in this matter or the manifestation decision, the parent may appeal the decision by filing a complaint and requesting a hearing. Understanding and correctly implementing these disciplinary protec-

tions helps safeguard students' rights, reduce conflict and prevent legal disputes.²³

Ultimately, empowering parents and educators with knowledge of IDEA, Section 504, the Americans with Disabilities Act, and discipline protections is critical. Participation in professional learning, encouraging families to seek support from Parent Training and Information Centers or local Autism Society affiliates, and maintaining open communication can prevent disputes from escalating. When all parties understand the legal protections in place, students are more likely to receive consistent, equitable and effective support. (See Appendix C for additional guidance.)

Empowering Parents and Educators with Knowledge

Knowledge of legal rights is critical for families and educators alike. Some recommended strategies:

- Participate in professional learning on IDEA, Section 504, ADA and discipline protections.
- Encourage families to access support and resources from Parent Training and Information Centers²⁴ or their local Autism Society affiliate.²⁵
- Maintain accurate records and open communication to prevent disputes from escalating.
- When parents and educators understand the protections afforded under IDEA and Section 504—including those related to discipline—students are far more likely to receive consistent, equitable support.

23 20 U.S.C. § 1415(k)(1). (2018). Individuals with Disabilities Education Act. U.S. Department of Education. <https://sites.ed.gov/idea/statute-chapter-33/subchapter-ii/1415/k/1>

24 Center for Parent Information and Resources. (n.d.). Find Your Parent Center. <https://www.parentcenterhub.org/find-your-center/>

25 Autism Society. Jan. 22, 2025. Local Support. <https://autismsociety.org/local-support/>

Supporting Students in Practice: Functional Behavioral Assessments for Students with and Without IEPs

Per the November 2024 guidance from the Office of Special Education and Rehabilitative Services and the Office of Elementary and Secondary Education, a functional behavioral assessment (FBA) should be approached from a problem-solving perspective. It is used to understand the function and purpose of a child's specific, interfering behavior and factors that contribute to the behavior's occurrence and non-occurrence for the purpose of developing effective positive behavior interventions, supports, and other strategies to mitigate or eliminate the interfering behavior. An FBA should not be solely used to exclude a child from a child's current learning environment or change a child's educational placement. For children with disabilities who have an IEP, the educational placement ... " is made by a group of persons, including parents, and other persons knowledgeable about the child, the meaning of the evaluation data, and placement options. ..." (34 C.F.R. §300.116)

An FBA and the subsequent behavior support plan/behavior intervention plan should be used to better support a student in their current learning environment, support inclusive educational practices, and provide data that can contribute to a larger body of informal and formal assessment that can guide educational decision-making.





Scenario: Example of a Functional Behavior Assessment and Behavioral Plan in Action

During morning transition periods of the school day, such as moving from class to class, a student with an IEP engages in name-calling of other students, cursing and intentionally bumping into peers. The school's hall monitor provided all students with reminders of appropriate behaviors and expectations, and teachers facilitated class discussions about the importance of using kind words and treating each other respectfully when transitioning between classes. While the student's actions have not caused any safety-related concerns, other students have become annoyed, and the school staff want to prevent anything more confrontational from occurring. The IEP team, which includes the student's parents, convened and decided to conduct a functional behavioral assessment. Together, the IEP team created a description of the behavior that is objective, clear, specific, measurable, and culturally and linguistically responsive. Then, the team determined the indirect and direct data the school-based team members would collect. Finally, the IEP team decided on a timeline for collecting data and scheduled a follow-up meeting to review and analyze the data collected. The school-based IEP team members—which consisted of a school counselor, special education and general education teachers, and a paraprofessional—collected data on when the student's behavior occurred,

when it did not occur, and how frequently the behavior occurred. After collecting the data, the IEP team reconvened to analyze the data, which also included reviewing the student's attendance records, reflecting on conversations with the student, and listening to and discussing insight from the student's parents. The team determined that the student's behaviors occurred only during morning transition times and on days when the student arrived late to school. The team hypothesized that the function of the student's behavior was to obtain adult attention. With this information, the team, which includes the student's parents, developed a behavioral intervention plan to support on-time arrival to school, including strategies to support the student on late arrival days, such as check-ins with a trusted adult within the school, teaching the student appropriate ways of asking to meet with an adult, and intentional relationship-building between selected adults (e.g., the hall monitor) and the student. The BIP became part of the student's IEP, and the IEP team decided to reconvene within three months, or earlier if needed, to determine if the BIP needs any revisions.²⁶

²⁶ Office of Special Education and Rehabilitative Services & Office of Elementary and Secondary Education. (2024, November). *Using functional behavioral assessments to create supportive learning environments* (ERIC Document No. ED672805). U.S. Department of Education. <https://files.eric.ed.gov/fulltext/ED672805.pdf>

Part III:
**What Helps Students Thrive—
Strategies and School Support**



CHAPTER 7:

Evidence-Based Educational Strategies

Autism is a spectrum, so instructional, communication and behavioral strategies that are effective for one student may not be effective for another. Successful approaches are highly individualized and should be based on each student's strengths, needs, age and learning style. While no single strategy works for all students, evidence-based practices used with autistic students also benefit the broader classroom by providing clarity, structure and multiple pathways for learning.

A number of core instructional strategies are commonly effective for students with autism. Explicit instruction involves direct, clear teaching with step-by-step guidance to ensure that expectations are understood. Multisensory instruction pairs visual, auditory and kinesthetic elements to reinforce learning and improve engagement. Visual supports, such as schedules, charts, diagrams and icons, help clarify expectations and reduce uncertainty. Modeling allows educators to demonstrate desired academic skills or behaviors, while role-play provides students with opportunities to practice real-life or social situations in a safe and structured setting. Prompting, which includes verbal, visual or physical cues, supports students in responding correctly and is gradually faded to promote independence.



Discrete trial teaching is a structured, evidence-based instructional approach often used to teach new or complex skills. The approach breaks learning into small, manageable steps and follows a consistent sequence. The teacher first presents a clear instruction or prompt; the student attempts the skill or behavior; and the teacher then provides feedback or reinforcement. Correct responses are reinforced, while errors are addressed through re-teaching or additional prompting. This systematic approach is particularly effective for building foundational academic, communication and self-help skills. For example, teaching color identification: A teacher instructs a student, “show me red,” the student points to the red card (correct response), and receives praise (reinforcer) or a sticker (reward).

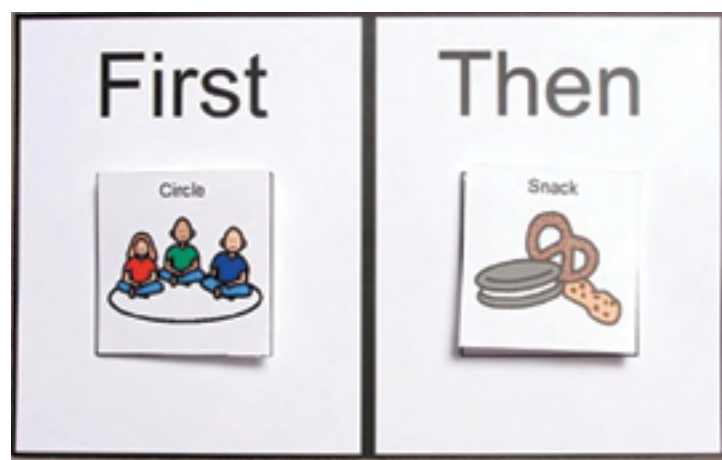
Task analysis is another effective strategy for teaching complex routines or skills. This approach involves breaking a task into smaller, sequential

steps and teaching each step individually. By mastering each component, students can gradually perform the entire task independently. For example, a routine such as washing hands can be divided into turning on the water, wetting hands, applying soap, rubbing for a set amount of time, rinsing, turning off the water, and drying hands. Task analysis supports independence by making expectations clear and achievable.

Understanding the difference between reinforcement and rewards is also important when supporting student behavior. Reinforcement occurs after a student demonstrates a desired behavior or skill and is intended to increase the likelihood that the behavior will occur again, such as offering verbal praise when a student raises their hand. Rewards, on the other hand, are often planned incentives used proactively to motivate a student before a behavior occurs, such as offering access to a preferred activity after completing work. While both can be effective, reinforcement is directly connected to the behavior itself, whereas rewards are typically part of a broader motivation or engagement plan.

Incorporating a student's special interests can further enhance engagement and learning. Using topics, activities or materials that align

with a student's passions can increase motivation, support attention, and make learning more meaningful. In addition, practical classroom tools such as visual schedules help provide predictability and structure throughout the day. "First-Then" or "If-Then" boards clearly show what task must be completed before a preferred activity, helping students understand expectations and transitions. Together, these strategies create supportive learning environments that promote independence, engagement and success for students with autism.



Example: Texas Education Agency²⁷

Positive reinforcement systems are an effective way to encourage appropriate behavior and engagement in the classroom. Using praise, tokens or access to preferred privileges helps reinforce desired behaviors and motivates students to repeat them. Creating sensory-friendly spaces is also important because low-stimulation areas provide students with opportunities to regulate their emotions and sensory input when they feel overwhelmed. Clear routines and expectations further support student success and can be reinforced through written rules, visual schedules or pictorial reminders. Thoughtful seating arrangements that consider a student's sensory needs and ability to focus, along with the use of

²⁷ Texas Education Agency, Texas SPED Support. (n.d.). First/Then card. <https://spedsupport.tea.texas.gov/resource-library/autism-toolkit/firstthen-card>





that communication supports are individualized and aligned with each student's strengths and needs.²⁸

Before making judgments about social conflicts, it is important to observe carefully; students with autism may respond in ways that seem unexpected due to differences in communication or sensory processing. Many students with autism experience variations in sensory processing that can affect attention, behavior and emotional regulation, so their sensory needs should be proactively addressed to reduce barriers to learning. Common considerations include auditory sensitivities, such as difficulty focusing in noisy environments; visual sensitivities, like discomfort with bright lights, flickering screens or cluttered spaces; tactile sensitivities, including strong reactions to certain clothing textures or physical touch; and proprioceptive or vestibular differences, which may manifest as seeking or avoiding movement, deep pressure or physical activity. Educators can support these needs by incorporating sensory breaks, such as stretching, movement activities, offering choices in materials—like writing tools or seating—to help avoid discomfort, and collaborating with occupational therapists to develop individualized supports. By embedding these strategies into the learning environment, educators can help students self-regulate, reduce barriers to engagement, and participate more fully in classroom activities.

Fostering social connection and inclusion involves explicitly teaching understanding and acceptance, such as integrating inclusive literature and lessons into the curriculum. Educators can pair students with positive peer role models and provide structured opportunities for partner and small-group work to encourage meaningful interactions. It is important for educators and

visual timers, can help students manage transitions and understand how time is structured throughout the day.

Supporting communication needs is equally essential for autistic students. Educators should use simple, concrete language and pair verbal instructions with visual cues to increase understanding. Allowing adequate wait time gives students the opportunity to process verbal directions and respond without pressure. It is also important to recognize that some autistic students are non-speaking and may rely on alternative forms of communication. Tools such as augmentative and alternative communication devices, other assistive technologies, or low-technology options like communication boards can help students express their needs and participate meaningfully. Collaboration with a speech-language pathologist ensures

²⁸ Autism Society. (n.d.). *Communication*. Autism Society. Retrieved Feb. 8, 2026, from <https://autismsociety.org/resources/communication>

paraprofessionals to monitor for social isolation and actively encourage peer engagement. By promoting a welcoming classroom culture, educators and paraprofessionals create opportunities for all students to practice social skills in natural settings and develop a sense of belonging.

SOCIAL SKILLS INSTRUCTION

Supporting social interaction is a vital part of an educational plan for students with autism. Many students want to connect with others but lack the skills to do so effectively or may feel overwhelmed by the process. Some are highly aware of their social challenges and may avoid interaction, while others engage in attention-seeking behaviors as a way of connecting until they develop stronger skills. Social competence encompasses a range of abilities—including timing and attention, sensory integration, communication and emotional awareness—that can be taught and layered over time. Building these skills increases both confidence and motivation to interact with others.

CORE PRINCIPLES FOR SOCIAL SKILLS SUPPORT

Effective social skills instruction involves several key strategies. Reinforce strengths by using behavior-specific praise and, if needed, concrete reinforcement to shape and encourage prosocial behaviors. Model appropriate interaction by demonstrating turn-taking, reciprocity, and social cues in authentic contexts. Teach imitation skills, including both motor and verbal imitation, as a foundation for more complex social behaviors. Provide context cues to help students interpret environmental and social signals (e.g., “If everyone else is standing, you should be too”). Finally, break skills into small, manageable steps, teaching discrete social behaviors through supported practice and using visuals when helpful.

LEVERAGING STUDENT STRENGTHS

Many students with autism have unique talents, such as humor, musical ability, strong memori-



zation skills, or heightened visual awareness. Integrating these strengths into social activities can increase peer engagement and build self-confidence.

PEER PARTNERSHIPS AND STRUCTURED INTERACTION

Identifying peers with strong social skills and pairing them with an autistic student allows for natural, supported interaction without turning peers into “mini teachers.” Peers can be given strategies for encouraging communication while keeping exchanges authentic. Small lunch or activity groups with structured supports, such as “topic boxes” (e.g., “The last movie I saw was ...”), can prompt varied conversation. Social learning can also be supported during less demanding tasks, ensuring that conversation is not competing with challenging academic or motor demands.

Strategies and Context: A boy notices that his crayon is missing. He sees another student with a crayon and immediately thinks the other student took his crayon. This is an opportunity for a teacher to teach perspective-taking. The teacher can step in and let him explain why he thinks the other student took his crayon. Then she guides him to think about how the other student might feel about being accused of taking his crayon. The teacher then works with him to look for his crayon, which had rolled off his desk onto the floor. Perspective-taking and empathy can be pre-taught using picture books, role-playing scenarios, and social stories to help students develop these skills. Then teachers can prompt students with autism to use these skills as situations naturally arise within the classroom.

TEACHING SOCIAL SKILLS IN CONTEXT

Pre-teaching specific skills before introducing them in group settings is effective (e.g., teaching how to play Uno individually before playing in a group). Define clear expectations for behavior in social situations ahead of time. Social narratives and cartooning can also be used to illustrate and reinforce social rules and norms.

DEVELOPING EMPATHY AND PERSPECTIVE-TAKING

Students with autism may have the capacity for empathy, even if their expressions differ from neurotypical peers. Empathy can be taught explicitly by increasing awareness of feelings and emotional states; labeling and discussing emotions with appropriate vocabulary; drawing attention to facial expressions, body language and tone of voice; and encouraging students to consider others’ perspectives and adjust their behavior accordingly.

BEHAVIOR NEEDS

If a student’s behavior is interfering and limiting or hindering learning—their own or that of others—a functional behavior assessment can help determine why the behavior is occurring and guide the development of effective interventions. All behavior is communication.

All Behavior Is Communication

By identifying the function/purpose of the behavior (which in this example may be the student trying to gain peer attention/make friends) and developing a behavioral plan that teaches the student social skills and provides the student with opportunities to practice social skills, the student can then engage with classmates using appropriate strategies, gain positive peer attention, and develop friendships.



CHAPTER 8:

Creating a Culture of Support and Inclusion

A school's culture shapes how every student may experience learning. Strong school-home partnerships are built on trust, respect and shared responsibility. Schools can foster these relationships by welcoming families into the school community as valued team members; recognizing the cultural and linguistic diversity of families; and providing clear information about rights, services and expectations under IDEA and Section 504. When school-home partnerships are strong, students experience more consistent interventions, smoother transitions, and greater academic and social success.²⁹

For autistic students, an inclusive and supportive culture is not only best practice—it is also essential. While individual accommodations and classroom strategies matter, they are most effective when reinforced by schoolwide systems, supportive leadership and policies that prioritize equity. Creating a culture of support requires commitment at every level, including the classroom, school, district and community.

Strong leadership and clear policies provide the foundation for inclusion. Administrators, union leaders and school boards can strengthen autism

²⁹ CAST. (n.d.). [ERIC document]. <https://files.eric.ed.gov/fulltext/EJ1412183.pdf>



support by ensuring professional learning in autism awareness, inclusive practices and Universal Design for Learning. They can also allocate resources for co-teaching, paraprofessional support and assistive technology, while protecting time for collaboration between general and special educators. Embedding inclusive expectations into schoolwide events, discipline policies and family outreach helps ensure that inclusion is not isolated to individual classrooms but is reflected throughout the school environment.

The special education field faces high levels of burnout and turnover, which has led to ongoing staffing shortages. Because of this, it is extremely important to ensure that special education professionals are supported. When inclusive commitments are built into the system rather than relying on individual effort, educators are better able to focus on teaching instead of navigating uneven or unclear supports.

SYSTEMIC CHANGE FOR BETTER AUTISM SUPPORT

Sustainable inclusion requires schoolwide structures, not just individual strategies. Meaningful systemic change includes training for all staff in positive behavior supports, trauma-informed practices, understanding the characteristics and presentation of autism, and intentional collaboration. It also involves data-informed planning that considers both academic progress and equity outcomes, such as discipline rates or access to advanced coursework.

Flexible instructional models, including co-teaching and varied scheduling, can expand access to the general education curriculum. Family and community engagement is also essential and should treat parents and caregivers as partners in problem-solving and planning. Additionally, promoting student voice and self-advocacy allows autistic students to share their goals, preferences

and perspectives, ensuring that support systems reflect students' personal experiences.

Family Connections

When families and educators collaborate as equal partners, students benefit from coordinated support and higher, yet attainable, expectations. Families know their child best, including their strengths, needs and which strategies are effective outside the classroom. Educators contribute expertise in instruction, classroom management and child development.

Strong school-home partnerships are grounded in trust, respect and shared responsibility. Schools can foster these relationships by welcoming families as valued members of the educational team; recognizing and respecting cultural and linguistic diversity; and providing clear information about student rights, services and expectations under IDEA and Section 504. Offering flexible





Using multiple communication channels—such as written notes, emails, phone calls and digital platforms—helps ensure accessibility for all families. Framing communication positively by balancing discussions of challenges with recognition of student strengths and progress also builds trust. Establishing predictable routines, such as weekly updates or monthly check-ins, promotes consistency. When communication is proactive rather than crisis-driven, families are more likely to engage in collaborative problem-solving.

Parent Participation in Planning and Decision-Making

Federal law requires parent participation in educational planning, but meaningful engagement goes beyond compliance. Parents should be active contributors to the development of individualized education programs, behavior intervention plans and transition plans. Schools can support meaningful participation by preparing parents in advance with agendas, draft documents and clear explanations of terminology.

Actively seeking family input regarding priorities, cultural context and student strengths fosters collaboration. Encouraging parents to bring questions, advocates or support people to meetings and following up afterward with clear action steps and timelines further supports engagement. Parents are effective partners when they are respected as decision-makers rather than simply invited to attend meetings.

Collaboration between educators and parents is not an optional component of autism support—it is a foundational practice. By building strong partnerships, maintaining open communication and ensuring meaningful parent participation in planning, schools create consistent and supportive environments where autistic students can thrive.

meeting times or alternative formats also helps ensure that all families can participate meaningfully. When these partnerships are strong, students experience more consistent interventions, smoother transitions, and greater academic and social success.

Effective Communication Strategies

Open and consistent communication helps prevent misunderstandings and ensures that families feel included in their child's education. Effective communication is two-way, encouraging parents to share insights about what works at home while teachers provide regular feedback on school progress. Communication should be clear and accessible, using plain language, avoiding educational jargon, and offering translated materials and interpreters when needed.

Part IV:
**Looking Forward—Transitions
and Lived Experiences**



CHAPTER 9:

Postsecondary Transition Planning

TRANSITION SERVICES IN IEPS

Planning for life after high school is essential for students with disabilities, including those with autism. The individualized education program provides a framework for preparing students for adult life by ensuring that school experiences align with future goals. Transition services serve as the bridge between K-12 education and adulthood, supporting pathways such as postsecondary education or vocational training, employment in competitive and integrated settings, independent or supported living, and active participation in community life and self-advocacy.

Transition planning is not simply a compliance requirement. When done well, it equips students with the essential skills, confidence and supports they need to thrive beyond high school.

IDEA REQUIREMENTS

Under the Individuals with Disabilities Education Act, schools must provide transition services beginning no later than age 16, though some states begin earlier. Each student's IEP must include an individualized transition plan (ITP) developed collaboratively by the student, parents or guardians, general and special educators, specialized instructional support personnel

(related service providers), and transition and/or vocational specialists.

The ITP outlines postsecondary goals in education, training, employment and independent living. It also identifies the transition services and supports needed to achieve those goals, a course of study aligned with the student's aspirations, and agency linkages with community and adult service providers.

PREPARING FOR POSTSECONDARY EDUCATION

A major challenge for many families is understanding how rights and supports change after high school. While an IEP ends upon high school graduation, students remain entitled to accommodations under the Americans with Disabilities Act and Section 504 of the Rehabilitation Act in college or training programs.

Students should be prepared to self-advocate for college or postsecondary program accommodations. Families should be encouraged to keep copies of the most recent IEPs, evaluations and medical documentation, which are often required by college disability services offices. Schools can also familiarize students with how to



register with a college's Disability Services Office and what accommodations may be available, such as extended testing time, note-taking support or priority registration. Opportunities such as dual enrollment, campus visits and bridge programs can further help students adjust to college life. Transition planning should clearly address the shift from IDEA protections in K-12 settings to ADA and Section 504 supports in higher education, vocational training and life beyond the classroom.

PREPARING FOR EMPLOYMENT AND INDEPENDENT LIVING

Educators can strengthen readiness for adulthood by offering career exploration opportunities such as job shadowing, internships and school-based enterprises. Instruction should embed essential life skills, including organization, time management, financial literacy and daily living

skills. Teaching self-determination helps students identify their strengths, challenges and needed accommodations. Additionally, school partnerships with families reinforce building independence skills at home.

COMMUNITY RESOURCES AND ADULT SERVICES

Successful transition planning often requires coordination with community agencies and adult service providers. Educators can support families by inviting vocational rehabilitation agencies or adult service providers to IEP meetings; connecting families with Medicaid waiver programs; mental health services and independent living centers; and sharing information about community colleges, technical schools and apprenticeship programs. Collaboration with local employers and workforce boards can also expand access to meaningful work-based learning opportunities.

HELPFUL RESOURCES

Several national resources can support effective transition planning. The National Technical Assistance Center on Transition: The Collaborative (NTACT:C) is co-funded by the U.S. Department of Education's Office of Special Education Programs and the Rehabilitation Services Administration.³⁰ The Autism Society offers a toolkit titled "Creating a Path: How to Support Families and Young Adults with Autism to Prepare for Competitive Integrated Employment."³¹

Autism Speaks also provides a comprehensive toolkit designed to guide families and educators through the transition to adulthood.³²

30 National Technical Assistance Center on Transition: The Collaborative (NTACT:C). (n.d.). *NTACT:C: The Collaborative*. <https://transitionta.org>

31 Autism Society of America. (2022, October 19). *Autism Society of America and ICI's ThinkWork collaborate to promote integrated employment for youth with autism*. <https://autismsociety.org/press-release-autism-society-of-america-and-icis-thinkwork-collaborate-to-promote-integrated-employment-for-youth-with-autism/>

32 Autism Speaks. (n.d.). *Transition to adulthood tool kit*. <https://www.autismspeaks.org/tool-kit/transition-adulthood-tool-kit>





CHAPTER 10:

Voices and Perspectives

The following insights were provided by the Autism Society.

INDIVIDUALS WITH AUTISM

- ◉ Most parents aren't going to say, "I'm confused about what you put in the parent handbook about X because I'm autistic and we have a communication disability." They're just going to ask questions that may seem pedantic or strange to a non-autistic person. Ask teachers and support staff to pass those questions along, not to embarrass anyone, but so that the manual can be improved in the future to clarify the situation.
- ◉ I do love when teachers are willing to listen and take to heart the wisdom of my experience as an autistic mother and self-advocate. It is hard to get a teacher of any age to understand when they don't have the background to understand that in most situations, autistic kids will not lie. As well as the importance of explaining why a rule exists, since it's hit and miss as to whether or not arbitrary rules will be followed.
- ◉ As someone who went to elementary school undiagnosed, and has spent over a decade advocating after receiving my autism diagnosis as an adult, it warms my heart and brings literal happy tears to my eyes to see all of the students at my child's elementary school on stage at the winter concert. As every grade gets up to perform, we see kids with alternative communication devices, and personal aides to support them—and you can tell that they're all having a great time. That inclusion is assumed is amazing.
- ◉ While we understand that some parents can be very sensitive to anyone challenging that their child is not perfect. If you're too vague, autistic parents may not realize that their child is in trouble and thus don't have the opportunity to try to address it at home. In years past, I didn't know that a teacher letting me know about an incident where my child struggled communicating and lashed out physically in frustration was considered "a referral to the office." My kid wasn't actually sent to the office, and I was not told a report was submitted, so it came as quite a surprise to both of us that he had to go to a special class with the school counselor on the day that everyone else got to spend playing games.
- ◉ As a nonspeaker, I have struggled my whole life with not being heard or accepted. A story on

the front page of our local newspaper reported how the principal at my high school told a staff member, “The [R-word] can’t be valedictorian.” I graduated as a valedictorian of my college class, and my commencement address went viral with 4 billion media impressions propelling our mission.”



- ◉ My educational aide, Terri, stayed by my side for 14 years in public school. She was trained to be my communication partner so I could access my AAC (augmentative and alternative communication) device in the classroom. I am so grateful to her and the elementary teachers who believed in me and recommended me for the school’s gifted program. Nonspeakers are routinely misunderstood and underestimated, but they gave me a chance for my light to shine.

PARENTS/CAREGIVERS

- ◉ My child previously attended a forest school part time with me accompanying him as an aide. The team took time to watch several trainings on autism and neurodiversity prior to him starting, which made the “onboarding curve” of him starting school much sooner and led to a much greater level of neurodiversity-understanding in the environment! I like to think that

maybe the trainings and overall dedication to neurodiversity-affirming practices also benefited other children in the environment as well (regardless of whether they were neurotypical or neurodivergent).



- ◉ One of the staff at my child’s previous school went out of her way to provide support to him if he was struggling with dysregulation or having a meltdown. In addition to being generous with her time, she also created low-tech AAC boards for him and tried a few forms of communication supports to see which forms he would/wouldn’t benefit from. Finally, she was proactive about communicating what he was doing well or sharing joyful moments from his day. Given how often my experience with previous school systems was hearing a list of things he was doing “wrong,” this meant a great deal.
- ◉ In one of the first day cares that my child was at, the staff made it quite clear that they found him difficult to work with. I began picking him up earlier and earlier, hoping that if he was there for a smaller portion of the day, perhaps things would go more smoothly, and he would receive a better quality of care. However, one day I went to pick him up early and saw a teacher pinning him to his nap cot with her leg because she wanted him to sleep or be still like the other children. That was very disturbing to see, and the incident had a deep impact on our family. I ended up

watching him myself at home for quite a while after that, hesitant to trust another school with him—and he ended up with heightened anxiety of new places and environments.

- ◉ By far the most common challenge we run into would be places that advertise as being neurodiversity-affirming or disability inclusive and seem extremely promising at a first glance-- only to realize partway through the application process that the organization isn't able to support children who have co-occurring intellectual disabilities or who have complex medical needs (my child has epilepsy) or require significant behavioral support. I remember one phone call with a (very kind) principal from a school with a strong emphasis on neurodiversity inclusion, where the principal was attempting to somewhat euphemistically explain to me that they work with "part of the spectrum" (later realizing that she was probably referring to autistic people with lower support needs). I completely understand that these decisions are often motivated by limited staffing or lack of training opportunities rather than lack of care, but it would be wonderful if places included a bit more transparency up front in order to save everyone time (or, better yet, see

if there is any way they can obtain additional support or training for those with higher support needs). I genuinely believe many of these schools want to support all children, and I hope more resources become available to help them achieve this.

- ◉ As a parent who experienced bullying in school, I'm determined to make sure my child doesn't face the same. Earlier this year, my first-grade son, who is autistic, was being taunted by a classmate in line every day—teasing him and making up words to provoke him. When he finally told me, I informed his teacher, but she was surprised; She'd been checking in regularly, and my son always said everything was "fine." After I explained that autistic children often interpret questions literally, so when she asked if he was "OK," he thought she meant in that exact moment, it clicked for both of us. She adjusted her approach, clarified questions, changed line arrangements, and kept checking in. This experience reminded both of us how vital communication and understanding are—that sometimes, a simple shift in phrasing can make all the difference in helping autistic students feel safe and heard.



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Appendices



APPENDIX A:

Glossary

Autism (School-Based Definition)

Under the Individuals with Disabilities Education Act, autism is defined as a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age 3, that adversely affects a child's educational performance. Characteristics often include engagement in repetitive activities, resistance to change, and unusual sensory responses (Individuals with Disabilities Education Act, 2004).

Autism Spectrum Disorder (ASD)

A developmental disability that affects communication, social interaction and behavior. ASD is characterized by challenges with social reciprocity, restricted or repetitive behaviors, and differences in sensory processing. The severity and combination of symptoms vary widely among individuals (Centers for Disease Control and Prevention, 2025).

Behavior Intervention Plan (BIP) or Behavior Improvement Plan

A written plan based on the results of a functional behavioral assessment that outlines specific strategies and supports to address problem behaviors. A BIP includes proactive measures, replacement behaviors to teach, and responses to challeng-

ing behavior that promote positive change (U.S. Department of Education, 2022).

Child Find

Child find is a process that requires districts to locate and identify students with disabilities. Schools must conduct an evaluation of any student "who, because of handicap, needs or is believed to need special education and related services." (Section 504, 34 CFR § 104.35(a).) For districts with geographical boundaries, it is the obligation of the district to extend Child Find requirements to privately enrolled students and also to those children residing in hospitals and universities. Homeless children residing within district boundaries are also to be included within the district Child Find processes.

Per IDEA, The state must have in effect policies and procedures to ensure that:

- All children with disabilities residing in the state, including children with disabilities who are homeless children or are wards of the state, and children with disabilities attending private schools, regardless of the severity of their disability, and who are in need of special education and related services, are identified, located, and evaluated; and

- A practical method is developed and implemented to determine which children are currently receiving needed special education and related services. (U.S. Department of Education. (n.d.). *IDEA regulations: § 300.111—Child find* (34 C.F.R. § 300.111). <https://sites.ed.gov/idea/regs/b/b/300.111/a/1/i>)

DSM-5 (Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition)

A publication by the American Psychiatric Association that provides standardized criteria for the diagnosis of mental health and developmental disorders, including autism spectrum disorder. The DSM-5 merged previously separate autism-related diagnoses into the single category of ASD (American Psychiatric Association, 2013).

Executive Functioning

A set of cognitive skills that includes organization, working memory, flexible thinking and self-control. Executive functioning difficulties are common among individuals with ASD and can affect academic and daily functioning (National Center for Learning Disabilities, 2023).

Free Appropriate Public Education (FAPE)

A foundational IDEA principle requiring that public schools provide special education and related services designed to meet the unique needs of eligible students with disabilities at no cost to parents (Individuals with Disabilities Education Act, 2004).

Functional Behavioral Assessment (FBA)

A process used to identify the underlying causes or functions of a student's challenging behavior. An FBA involves collecting data, identifying patterns and determining what the behavior communicates so that effective interventions can be developed (U.S. Department of Education, 2016).

Individuals with Disabilities Education Act (IDEA)

A federal law that ensures students with disabilities receive a free appropriate public education (FAPE) tailored to their individual needs through an individualized education program (IEP). Autism is one of the recognized disability categories under IDEA (Individuals with Disabilities Education Act, 2004).

Individualized Education Program (IEP)

A legally binding document developed for each student eligible under IDEA. The IEP outlines the student's present levels of performance, goals, accommodations, services and methods for measuring progress (U.S. Department of Education, 2021).

Least Restrictive Environment (LRE)

IDEA mandates that students with disabilities should be educated with nondisabled peers to the maximum extent appropriate. Removal from general education settings should occur only when necessary for the student's success (Individuals with Disabilities Education Act, 2004).

Prior Written Notice (PWN)

A prior written notice letter should provide comprehensive documentation of all actions proposed and/or refused by a local education agency/district. The information included should be sufficient to ensure that parent(s) understand the rationale by which decisions were made, and all things that were considered. Providing prior written notice affords parent(s) an additional opportunity to consider and/or object to decisions that were made prior to implementation by an LEA/district. (Charter SELPA. (n.d.). *Prior written notice*. 2025. <https://charterselpa.org/Procedural-Guide/Prior-Written-Notice/index.html>)

Section 504 of the Rehabilitation Act of 1973

The first purpose of Section 504 is to protect qualified individuals from discrimination based on their disability. The second purpose is to provide students with disabilities a free appropriate public education. There is no additional state or federal funding provided to assist in complying with Section 504. All costs are the obligation of the district. The Office for Civil Rights is the federal agency that monitors Section 504 compliance. In addition, it is also the responsibility of each district to ensure Section 504 compliance and monitoring. (El Dorado Union High School District, December 2017.) (Section 504 Guidelines & Resources [PDF]. <https://www.eduhsd.k12.ca.us/documents/Section-504-Guidelines-SELPA-El-Dorado-County.pdf>)

Sensory Processing

The way the nervous system receives and responds to sensory input. Many individuals with ASD have differences in sensory processing that can lead to hypersensitivity (overreaction) or hyposensitivity (underreaction) to sights, sounds, textures or movements (American Occupational Therapy Association, 2023).

Social Communication

The ability to use verbal and nonverbal communication effectively in social contexts. Students with ASD may experience challenges with understanding social cues, taking turns in conversation, or interpreting tone and body language (American Speech-Language-Hearing Association, 2024).

Social and Emotional Learning (SEL)

An educational framework that helps students develop skills for self-awareness, self-management, social awareness, relationship skills, and responsible decision-making. SEL supports are often helpful for students with ASD (Collaborative for Academic, Social, and Emotional Learning [CASEL], 2024).

APPENDIX B:

Prior Written Notice Explained

A prior written notice (PWN) letter is a document that is required following the proposal and/or refusal related to the initiation or change in the identification, evaluation educational placement, or offer of FAPE (IDEA, 34 CFR §500.503).

An individualized education program (IEP) team may make decisions regarding the identification of a student, including but not limited to:

- Determination of initial identification (eligibility) for special education;
- Refusal to identify a student as eligible;
- Changing the identification of a student (eligibility category); and
- Termination of identification (student no longer found eligible).

An IEP team may make decisions regarding the evaluation of a student, including but not limited to:

- Requesting consent for initial evaluation;
- Requesting consent for re-evaluation;
- Refusal to conduct an evaluation requested by parent(s)/guardian(s); and
- Proposal or refusal to provide a requested independent educational evaluation.

An IEP team may make decisions regarding the placement of a student, including but not limited to:

- Offering initial placement;
- Proposing a change in educational placement;
- Refusal to change placement as requested by parent(s)/guardian(s);
- Termination of special education placement due to a student being found no longer eligible; and
- Proposal or refusal to offer placement to parent(s)/guardian(s) who has unilaterally placed a student with an IEP in a residential facility or nonpublic school.

An IEP team may make decisions regarding the provision of FAPE to a student, including but not limited to:

- Changes in IEP services, including addition, deletion, change in minutes, frequency, location or refusal to change a service;
- Changes in accommodations/modifications or refusal to change per parent/ guardian request;

- Change(s) in annual goals or refusal to change goals per parent/ guardian request;
- Changes in how a student will participate in statewide and districtwide assessments; and
- Refusal to provide a specific instructional methodology requested by a parent/ guardian.

Any changes made to FAPE in an IEP or through the amendment process also generate the requirement to provide prior written notice.

WHAT ARE THE REQUIRED ELEMENTS OF PRIOR WRITTEN NOTICE?

Prior written notice must include seven required elements (34 CFR §300.503), including:

- A description of the action proposed or refused by the LEA/district;
- An explanation of why the LEA/district proposes or refuses to take the action;
- A description of each evaluation procedure, assessment, record or report the agency used as a basis for the proposed or refused action;
- A statement that the parent(s) of a student with a disability has protection under the procedural safeguards of this part and, if this notice is not an initial referral for evaluation, the means by which a copy of a description of the procedural safeguards can be obtained;
- Sources for parent(s) to contact to obtain assistance in understanding the provisions of this part;
- A description of other options considered by the IEP team and the reason why those options were rejected; and
- A description of the factors that are relevant to the LEA's/district's proposal or refusal.

In addition to including these elements, the prior written notice letter must be provided in a language that is understandable to parents and the general public and should be provided in the native language or another mode of

communication of the parent unless it is not feasible to do so. To ensure that the prior written notice letter is understandable, it is recommended that it be written without the use of acronyms or abbreviations. It should serve as a stand-alone document that can be understood by a person who does not have other reports and/or IEP documents to which they may refer. Charter SELPA. (n.d.). *Prior Written Notice*. <https://charterselpa.org/Procedural-Guide/Prior-Written-Notice/index.html>

APPENDIX C:

Education Disputes—Parent Perspective

Mediation is one process that can be used to resolve education disputes. In mediation, the parents, teachers and other parties meet and try to reach a mutually agreeable resolution with the help of a professional mediator. Mediators are neutral facilitators who can assist the parties in identifying areas of agreement, narrowing disputes, clarifying desired outcomes, and crafting a written agreement on any changes to a student's education program. Mediators do not take sides during the meeting. Instead, they try to help the parties find a mutually agreeable resolution to their dispute. Mediation can be an attractive option because it may offer a way to quickly resolve a dispute without the cost and delay of a due process hearing. Resolving disputes through mediation also means that the parties control the content of any resulting agreement, instead of relying on the decision of a hearing officer or judge.

Parties can attempt mediation either prior to or after filing a due process petition. Mediation sessions held after filing a formal petition may also be called resolution meetings because that is what they are called in the IDEA. Mediation is an optional step, but one that may achieve more durable results because any agreement will be written with everyone's input.

Mediation can include many different people involved in a child's education. Parents and school officials are only the two most obvious. Classroom teachers have direct experience with a child's classroom performance and behavior and should play a key role in shaping mediation. Outside service providers such as behavior analysts, vision, speech and occupational specialists, and others familiar with the child and their needs may also be brought to the mediation session. Depending on the child's needs, each may be able to suggest specific measures for the child's instruction program.

You should expect mediation or resolution meetings to take a full day. Parties may also decide that more information is needed, other service providers need to be brought in, or that they want more time to fashion their agreement. In these cases, parties may agree to adjourn and meet again to continue mediation at a later date.

ATTORNEYS AND ADVOCATES

Attorneys and education advocates may also attend mediation meetings. The two have similar roles, but somewhat different powers and authority. Prior to any meeting or mediation, attorneys and advocates will help organize documents, understand assessment results, and strategize for the mediation session. They may also assist in

the family in articulating proposals and identifying desired outcomes.

Attorneys are legal advocates with experience in education law and strategy. The family will want them to help draft and review any agreements reached. The family may also want the attorney to do most of the negotiating during mediation. The presence of an attorney at a mediation session does not necessarily mean that party wants to take the matter to a due process hearing.

Education advocates provide outside expertise with education practices, special education programs, IEPs and 504 plans. The advocates should be able to review and evaluate information provided by the school, and propose additional appropriate services, evaluations or other measures. They may take a more collaborative approach than attorneys.

PREPARATION

The steps you need to prepare for mediation will differ depending on the student's needs. At the least you should review the student's grades or progress reports, their most current IEP or 504 plan, and any supporting documents. You should also review any new reports or assessments that may come up. Your review should include any disciplinary reports if that is an issue. You also may want to talk to other service providers, school behavioral specialists, administrators and/or attorneys prior to the meeting. This can help clarify the issues for everyone as well as improve the chances for a positive outcome.

There are likely to be a great many documents that may need to be referenced during the mediation. You should organize the student's file to make sure key documents are both available and easy to find during the meeting.

The state education agency will have written procedures for mediations. You will want to famil-

iarize yourself with those procedures. These are generally available on the agency's website. This will help you understand your own rights and the process overall. Time spent preparing for mediation is similar to what will be necessary for a due process hearing. Doing all of these things at the mediation stage will make it easier for you both in the mediation and, if necessary, later.

DURING MEDIATION

Once the mediation meeting has begun, the mediator should help the parties define the issues and state their positions clearly and succinctly. Many mediators will provide their own assessment of the strengths and weaknesses of each party's position. They will sometimes separate the parties and act as go-between, moving between different rooms to discuss matters privately for at least part of the mediation. They can help identify areas of agreement, where compromise might be necessary, and explore possible solutions. Finally, mediators can help draft any agreements the parties make during mediation. Keep in mind that mediation agreements are legally binding. As such, parents could file a petition with a court to enforce any provisions they believe have not been properly implemented.

MEDIATION AND RESOLUTION UNDER IDEA

Though mediation is voluntary, the Individuals with Disabilities Education Act requires the parties meet for a similar process called "resolution." An IDEA resolution meeting must take place within 15 days of the school district receiving a due process complaint. Resolution may be waived if both parties agree to do so in writing. However, parties can still engage in mediation even if the resolution meeting is waived.

Mediation is an optional process that can resolve problems more quickly before the parties appear at a due process hearing. It has the advantage of allowing the parents and school to resolve their

dispute in ways both can agree. Because this process revolves around getting the agreement of all parties, it may result in more durable resolutions. Mediation does require that everyone agree, which in some cases will not be possible. However, mediators will try to help the parties understand each other's positions and may be able to identify solutions everyone can agree on. Resolution meetings are very similar to mediation. The primary differences between the two are that a resolution meeting is required to be held within 15 days of receipt of a student's due process complaint unless waived by both parties.³³

³³ U.S. Department of Education, Individuals with Disabilities Education Act (IDEA), 34 C.F.R. § 300.504 (2006). Retrieved from <https://sites.ed.gov/idea/regs/b/e/300.504>

APPENDIX D: AFT Resources

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JUNE 2026

