Home Safety and Injury Prevention Guide for Families of Children with Autism Spectrum Disorder (ASD)

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Section 1: Overview

Autism spectrum disorder (ASD) is a developmental disorder the impacts how an individual interacts with others, behaves, and learns.[1] Sensory and communication complications may create challenges for a child with ASD when it comes to learning safety skills in and out of the home.[2] In fact, it is common for individuals with ASD to not understand danger, as well as the signals, warnings or safety gestures that may come along with a danger (such as a sign that says 'Look Out').[2] Communication complexities may make it more difficult for an individual with ASD to ask for help when necessary. Individuals with ASD may take longer to learn and apply safety skills.

Sensory challenges such as hyper- or hyposensitivity are common in individuals with ASD, which may increase the risk for injuries. Hyper-sensitivity may cause an individual with ASD to perceive some stimuli as painful (e.g. noises, lights, clothing). This may increase the risk for the individual to want to escape the stimuli. Individuals with hyposensitivity may be drawn to stimuli or sensations that are dangerous, because their body may not give them average pain-receptor signals. This could result in self-injurious or aggressive behaviors.[2]

A common strategy for mitigating risks of all types includes introducing visual supports, such as developing 'picture stories,' which are narratives accompanied by photos that illustrate step-by-step procedures for common situations along with the behavior that is expected in those situations.[3] These visual stories help children with ASD understand what they are expected to do and how to avoid risks and communicate effectively. Connecticut Children's Medical Center has developed picture stories to prepare your child for things such as doctor's appointments or getting blood drawn, and these can be used to help you develop your own picture stories that relate to other daily activities you would like to help your child prepare for.

In each section, there will be a list of 'Safety Product Search Terms.' Please utilize these search terms on websites such as Amazon, Walmart, Target, or similar stores to find corresponding safety products.

Resources:

- *Picture Stories at CCMC:* https://www.connecticutchildrens.org/patients-families/planning-your-visit/what-expect-pictures

Section 2: Unintentional Injury Risks

Falls and Furniture Safety

Fixations for children with ASD may lead to potentially dangerous or injurious behavior as they seek to engage with the item(s) they may be fixated on. Children may climb on top of furniture to reach something, or have furniture fall on them, if trying to get to an object that they want.[4] Fall risks are also associated with windows or other height-associated and unsecured platforms.

It is important to observe why children sometimes seek situations which may lead to falls or accidents. Understanding why the child may get themselves involved in potentially dangerous situations can help parents better establish rules regarding those items of interest, as well as visual reminders to aid in helping them remember the rules.[5] If unsafe behavior is associated with difficulty appropriately requesting an item, parents can help their child to learn an appropriate way to ask for what they want.

To mitigate the risk of furniture falls, ensure that furniture is mounted securely to the walls. Furniture brackets can be purchased for a low cost and can keep dressers, bookcases, and other large pieces of furniture from tipping. Other childproofing methods, such as putting latches on drawers and ovens, may mitigate the risks that might come from unsecured furniture.[5] If your child likes to climb, keep furniture away from windows or use window stops to prevent a window from being opened wide enough for a child to fall out. Remember, screens keep bugs out, but are not strong enough to keep kids in.

Furniture Safety Products: Search Terms

- 'Window and Door Safety Lock'

- ‘Furniture Anchor’

Furniture Anchors (10 Pack) Anti Tip Furniture Straps for Baby Proofing, 400lbs Tension Earthquake Resistant Metal Straps, Furniture Wall Anchor Prevent Baby Pet from Falling Furniture

Brand: Booda Brand

4.7 ★★★★☆ 4,281 ratings

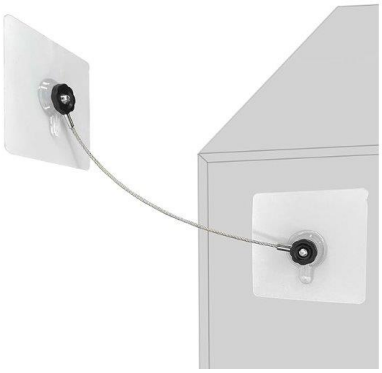
| Search this page

Amazon's Choice

2K+ bought in past month

-47% $9.99

More examples:



Water Safety

Children with ASD may have an intense interest in water and swimming, which may result in those children seeking out water more often. Children with ASD might also not understand the dangers of water and drowning. Water safety extends from pools, ponds, and oceans to bathtubs, sinks, and other containers of water.

There are many ways to mitigate risk associated with water. First, it is important to teach water safety and take children with ASD for swim lessons at a young age. The Red Cross recommends learning to enter the water, get a breath once in the water, staying afloat, swimming a distance, and learning how to get out of the water safely.[6] It is equally important to provide fencing or other barriers to prevent children, including those with ASD, from accessing the water on their own. When near water, supervision is vital. Designate a Water Watcher, an adult who will give their full attention to watching children in the water. Switch off with other adults to give Water Watchers a break to maintain heightened vigilance. When boating, wear properly fitting life jackets to ensure safety while in the water. Utilize this link (https://www.safekids.org/blog/ask-expert-how-find-right-life-jacket) to figure out how to find the right life jacket for your child.

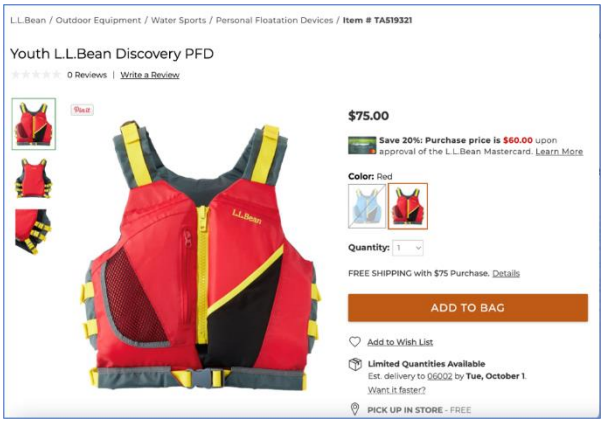
It is equally as important for parents and guardians to learn water safety skills and CPR.[2] Discussing water safety concerns and potential dangers with individuals you are close to that own pools

to help make them aware of potential hazards is also important to ensure that children with ASD have extra supervision while in or near the water.

Water Safety Products: Search Terms

- 'Pool Gate Alarm'

- 'Children's Life Jacket'



Choking, Poisoning and Food Safety

Some children with ASD may be diagnosed with Pica, which means that the child may be inclined to try to eat items that are not intended for human consumption (i.e., paint, dirt, chalk, etc.)[2] Children with ASD may also lack the ability to regulate the amount of food they consume, or the rate at which they consume it. This could lead to choking hazards, or cause nausea or vomiting.[2]

Children with ASD may get confused by items that look like consumable items, such as Tide Pods that might look like candy.[2] On that same note, children with ASD or children in general may try to eat medications that are not meant for them.[2]

It's important to learn strategies that mitigate poison risks and choking hazards.

First, learn the **Poison Control Hotline** phone number: **1-800-222-1222**. To mitigate poison safety risks, it is important to stay organized; keep cleaning products, chemicals, and other potentially dangerous substances in original containers, labelled, and secured in out-of-reach cabinets.[2] Keeping substances in their original containers is important for ensuring that children with ASD do not get those substances confused with foods, and helps you keep track of safety information that might be printed on the packaging that corresponds with the substance. Medications should also always be kept in their original packaging so that they do not get confused with other medications. Once you are no longer taking those medications, it's important to properly dispose of leftovers, whether it be through your city's medication take-back program or mixing them with unwanted substances such as cat litter or used coffee grinds and disposing immediately.[2]

If you are concerned about your child's eating habits and risk of choking, it may be important to get your child evaluated by a medical professional that specializes in swallowing, such as a Speech Language Pathologist (SLP). An SLP may be able to give you strategies to implement at home to mitigate choking risks. Learning the Heimlich maneuver and CPR through training courses with agencies such as the American Red Cross will also be helpful in the case of a choking emergency.

Finally, for children with Pica, behavioral therapy or differential reinforcement therapy might be beneficial in managing symptoms.[7] Talk to your healthcare provider about therapeutic or treatment options if you notice your child displaying symptoms of Pica.

Choking and Poison Safety Products

- 'Cabinet Safety Lock'
  - 

More examples:

Transportation and Parking Lot Safety

Children with ASD may have trouble sitting for car rides, bus rides, train rides, or even plane rides due to sensory issues and the risk for sensory overload.

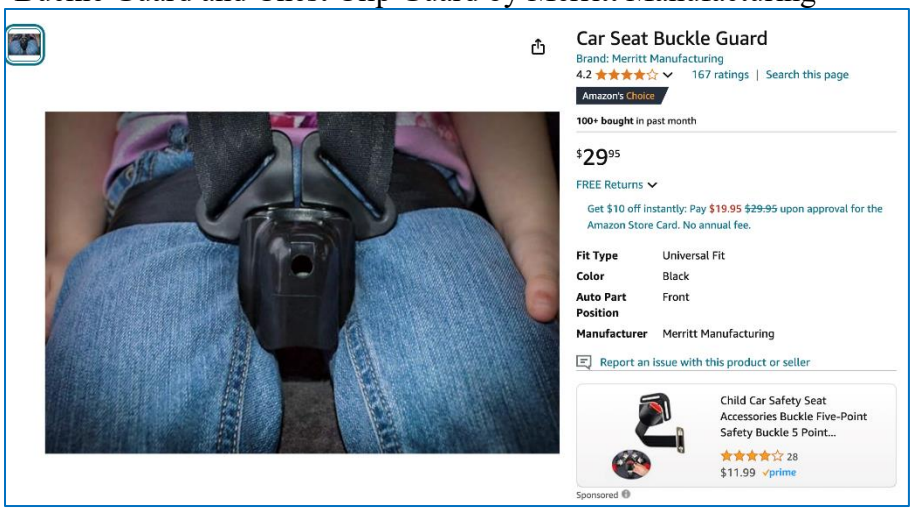
Riding in a car seat, booster seat, or using a seat belt can pose a challenge, as children might have sensitivity or aversion to buckles or seat belts.[2] Because of sensitivity to both the car seat and the moving surroundings, your child might try to escape the car seat. To try to prevent these challenges as much as possible, it is important to understand WHY the child is trying to escape, and HOW. The "why" allows the parent to look for behavioral interventions, such as distractions or rewards. The "how" allows the parent to ensure that the car seat is correctly installed and snug on the child. First, ensure that the car seat you purchase fits your child correctly in the first place; this means that the harness fits snuggly, and the seat is appropriate for your child's age, height, and weight.[8] If your child succeeds in escaping from the car seat, safely pull over and re-fasten the seat belt, or have an additional caregiver in the back seat prepared to refasten it.[8] To prevent escaping a second time, it might be helpful to try to use an adaptive car seat harness, which is more challenging for a child to escape from than a booster seat or a classic

seat belt. If you find that your child likes to chew on the car seat, it might be beneficial to purchase lightweight chew toys for children.

As a rule of thumb, infants must use rear-facing car seats until they are two years old or thirty pounds, according to Connecticut law. Then, toddlers can use forward-facing car seats only after they outgrow their rear-facing car seats. Finally, children should utilize their booster seats until the car's seat belt fits, which is usually around 8-10 years old. Connecticut law requires that children stay in a booster seat until they are at least 60 pounds and 8 years old.

If your child is still escaping, approved guards can be used, per the car seat manufacturer. There are many after-market anti-escape guards for car seats available online, but often these are not safety tested by the car seat manufacturer and are not proven to be safe. Usually, the car seat manufacturer will prohibit their use. If escaping from the car seat is a recurring problem, the first step is to call the car seat manufacturer with the seat model and ask if it is okay to use a guard and if there are any that the manufacturer recommends. If there are no approved guards for that seat:

- **Transportation Safety Products**
  - 'Buckle Guard and Chest Clip Guard by Merritt Manufacturing'

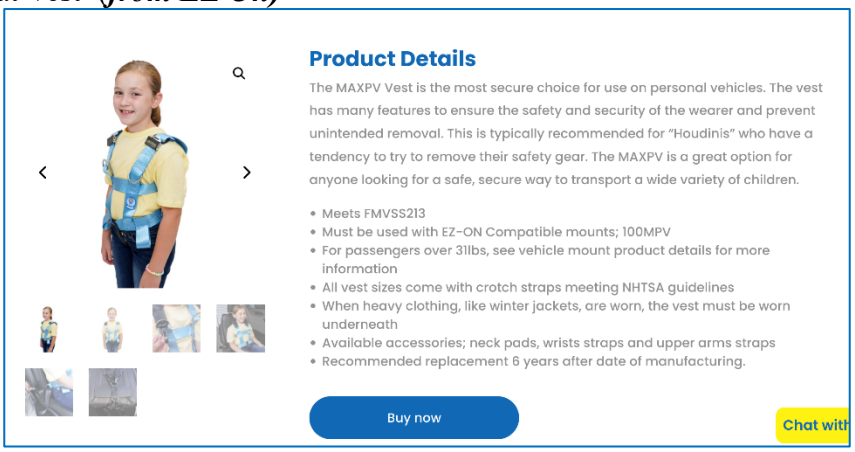


Chest Clip Guard

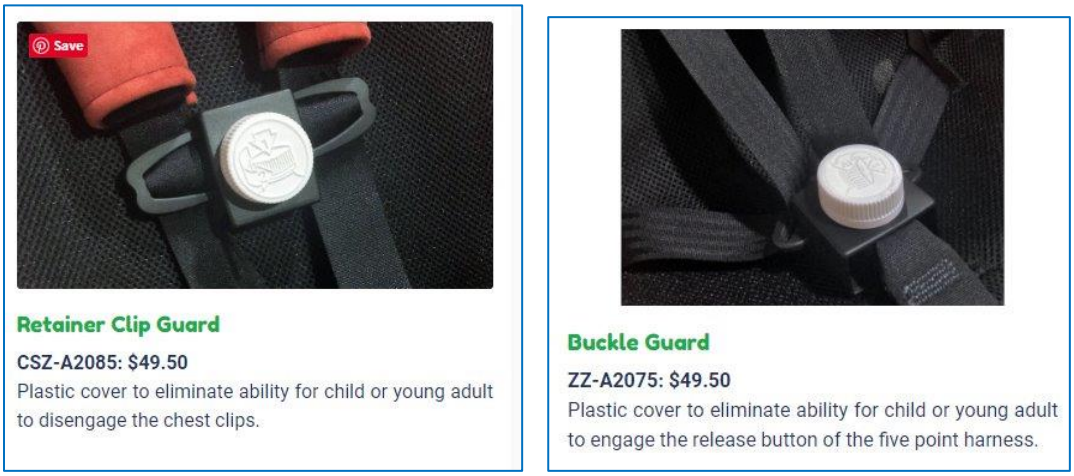
These guards are compatible with some Evenflo seats:

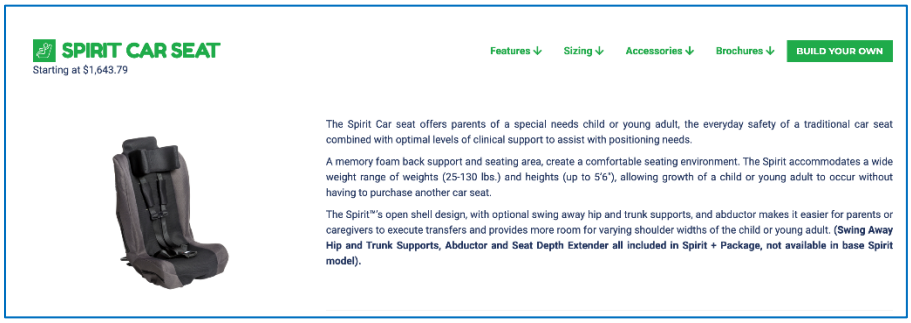
- Evenflo SureRide/Titan 65
- Evenflo Sonus 65 (see below)
- Evenflo Maestro Sport

- 'Car Seat Vest' ***(from EZ On)***



- ‘Inspired by Drive Buckle Guard and Retainer Clip Guard’
  Compatible with Spirit car seat





Public transportation might pose another challenge for children with ASD, as it may be difficult to predict the levels of noise and crowding on a bus, or what tactile or visual stimulation may be present. Riding a school bus is more predictable but has added safety concerns due to less adult supervision. To help prepare your child to ride the school bus, families should first identify which aspects of the bus ride are problematic for your child. Coping strategies could then be taught to your child to address their specific concerns. In addition, it could be helpful to develop picture stories, like the ones mentioned previously. These stories should include bus or train procedures and bus rules (i.e. seat assignments, length of ride, communication strategies, etc.).[16] Preparing individuals for situations in which they might be on the bus for longer periods of time or situations that might be scary (i.e. road closures, evacuation, flat tires, etc.) with strategies for how to cope will also be beneficial to the child. Offering your child headphones to cope with loud noises or sensory overload can help as well as helping them understand the origins of loud noises (i.e. children talking loudly on the bus, cars honking, etc.).[8]

Parking lots may be challenging for children with ASD, as they may not understand that moving cars can be dangerous, and the sounds of the cars may trigger sensory challenges. [9] It can be helpful to teach children how to use the lines in a parking lot to know when to stop and look before continuing walking.[9] Teaching children to understand universal symbols, especially those that appear in parking lots or near the road (i.e. stop signs, crosswalk signs, etc.) can help your child better understand where and when it is safe to walk, and where and when it isn’t.

More Transportation Safety Products

- ‘Adaptive Car Seat'

- ‘Over-Ear Headphones’

- 'Sensory Chew Toys’
  - 

Wandering

Wandering, or elopement, occurs when a child with ASD wanders, runs away from, or otherwise leaves a parent, guardian, or other responsible adult's care. Wandering is common in both younger and older children with ASD. Children with ASD may have many reasons for running off, whether it be looking for a place or item of special interest, a general enjoyment of exploring, or using it to get out of an anxious or uncomfortable situation.[10]

Understanding what types of triggers may cause your child to want to wander and removing them may mitigate your child's desire to wander. Ensuring that someone is always available to pay close attention and provide extra supervision to children with ASD at events with a lot of people is also beneficial, especially if that gathering is taking place outside or around water.[10] Ensuring your neighbors are aware that your child tends to wander can help them be prepared to bring your child back home if they find them wandering.

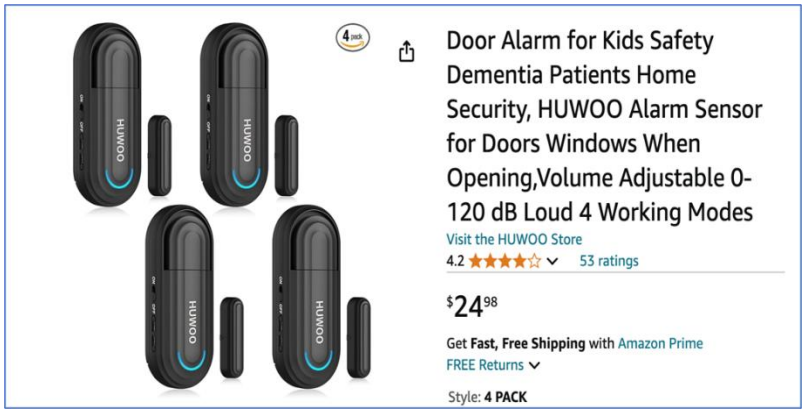
It is equally as important for your child to understand that wandering can be dangerous and provide them with better solutions for getting away from a situation. For example, teaching them to go to you and ask for what they want is a better behavior than running off to get to what they want.[10]

Utilizing technology, such as door or window alarms or tracking devices, may be helpful in preventing or mitigating a wandering emergency. Utilizing lower-cost solutions, such as keeping an emergency form for your child, creating a family wandering emergency plan, or even creating an ID bracelet or ID device that your child can carry around with them are all ways that you can reduce risk of, and dangers associated with, wandering for children with ASD.[10]

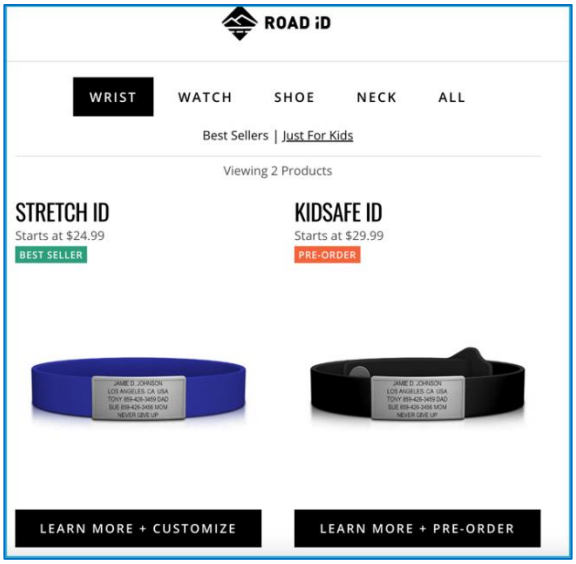
Finally, get in contact with local first responders, such as police and fire departments, to register your child or give information about your child before wandering occurs.[10] In Connecticut, LINKED - the Autism Safety Project is an initiative that seeks to help parents of children with ASD connect with local first responders. Community members of affiliated police or fire departments can fill out a form on their department's website to provide information about their family member(s) with ASD. If your town is not affiliated with this program, you can still provide local emergency services with information about your family members with ASD using a similar type of form.

Wandering Safety Products:

- 'Door/Window Alarm'



- 'ID Bracelet'



Resources

- *LINKED- The Autism Safety Project* (if your town is affiliated, the link to their specific form will be on the 'community partners' page): https://linkedasp.com/community-partners

Section 3: Intentional Injury Risks

Sexual Predator Safety

Current estimates suggest that children with developmental disabilities, such as autism spectrum disorder, are at greater risk for sexual abuse than children without developmental disabilities.[4] NPR reported that those with developmental disabilities are most likely to be assaulted during daytime, and by someone they know.[11]

Parents should begin discussing sexuality education early on. Being direct and using adult language (i.e., proper terminology for body parts) is important for a child to understand whether they are being violated.[12] Be direct and explain to a child the difference between a 'good touch' and a 'bad touch.' Providing pictures and examples, such as using the example of a bathing suit to help identify areas of their body that should not be touched, may be helpful for a child with ASD to understand. A parent may also choose to explain the difference between a 'good secret' and a 'bad secret'; a bad secret would be considered one that the child is told they cannot share with their parents.[12]

After explaining what certain predatory behaviors are bad, it would then be important to give children with ASD skills to keep themselves safe and prevent abuse. These skills could include closing

and locking bathroom doors, understanding that nudity is restricted to personal bedrooms or bathrooms, and setting personal space boundaries.[11] Empowering children to say no if they don't want to be touched, at any time, is important for them to understand bodily autonomy.[11]

Recognizing warning signs of sexual abuse is important so parents can assist their children in getting help and ending the abuse. Increasing nightmares, angry outbursts, anxiety, depression, withdrawn behaviors, regressive behaviors dependent on age, reluctance to be left alone with certain individuals, or sexual knowledge that is unusual for their age.[11] **The National Child Abuse Hotline** phone number is **1-800-422-4453**. The National Children's Alliance website also lists Children's Advocacy Centers by state. It is suggested that 97-99% of abusers are known by the victim, so ensure that you are vigilant about the relationships your child has with the people in yours and their life.[13]

Internet Safety

For parents and guardians to teach internet safety, it is important to first understand some important internet terminology.[14] Most commonly:

- **Spam** (typically utilized in email form) is bulk communication typically sent to recipients unsolicited.[14]
- **Spoofing** is typically when an individual changes an email or link slightly to look like a trusted source, to trick users into trusting the new link.[14]
- **Phishing** is utilized by hackers to get individuals to provide private information. This is typically the next step after spoofing an email or a link.[14]
- **Ghosting** is a term for when an individual breaks off all contact with another individual, possibly without warning.[14]

When talking to your child about internet safety, it is important for them to also understand these vocabulary words. Internet safety protocols can be separated based on age or activity.

Young children may like to use the internet to play video games or watch videos, among other things. It is important to teach children to never give out email addresses or other personal information in public spaces or forums.[14] Ensure individuals also understand not to click on pop-ups that offer prizes. Finally, ensure they understand not to search the internet using certain phrases or topics, such as terminology associated with drugs, weapons, murder, or girls and boys.[14]

Teenagers and young adults might be more likely to utilize social media and messaging apps to communicate with friends, post photos online, and view other content. It is important to also understand how to navigate social media websites safely. Understanding when to and when NOT to send or accept friend requests is very important. Teach your child that they should only accept friend requests if they have met that person once in real-life, if it is someone they like to interact with, or if the person is someone they know through a mutual friend.[14]

When it comes to privacy and security on social media, ensure that privacy settings are set to limit who can see your posts, as well as your personal information. Ensure that your child is thoughtful about what they post, and how often they post.[14] Finally, teach your child good social media etiquette. One rule of thumb is not to tag someone in a post unless they have checked with that person to see if they are comfortable with being tagged. Another is to not repeatedly message an individual without giving them some time and space to respond first, typically this means waiting at least one day.[14] Finally, teach your child to be wary of meeting someone in-person that they might have met on the internet, since people online may not be who they say they are.[15] Social media should not be viewed as a threat entirely, as it might help your child with ASD have an easier time making friends or effectively communicating with others, rather than through more traditional methods which may be more difficult for your child.[13]

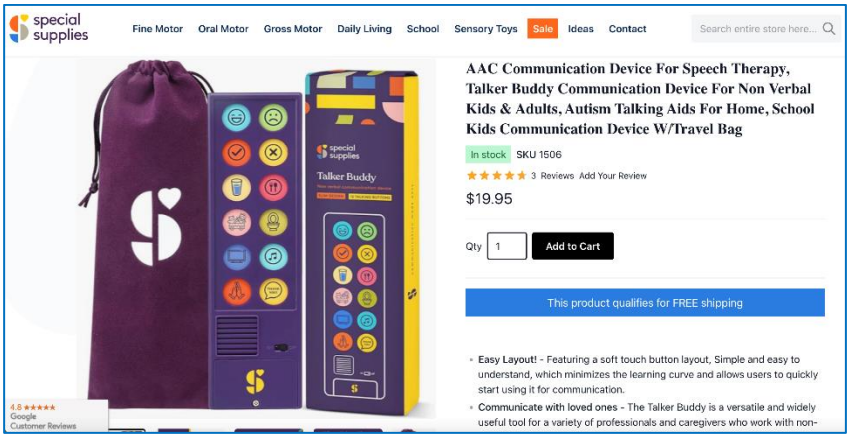
Adults will most likely use the internet for many different reasons, and it is just as important to ensure that any adult with ASD understands how to surf the internet safely, as well as understand how to manage email accounts safely. For example, always report spam or junk emails, and how to utilize filters in your email to sort through junk emails.[14] When surfing the internet, it is important to look at whether a link or a website looks legitimate or if it looks unsafe. Checking for the lock icon in the URL will help determine whether a website is truly secure, as well as whether the website has a 'privacy policy' link on the website.[14]

While technology and the internet pose many risks, they can be an asset in your child's life! Besides social media, assistive communications technology can be used to support communication efforts for individuals with ASD, and it comes in many different forms, including speech generating devices (i.e. Quick Talker, Go Talk, iPads, etc.) There are also different routes to funding for these devices, including private insurance, Medicaid, private pay or grants, or even possibly through your school district.[15] Ensuring your child develops digital literacy, such as understanding how to surf the internet, utilize social media, and use word processing software effectively may be beneficial skills for school and even later in life when looking for jobs.[13]

Assistive Communication Devices

- 'GoTalk 4+ Light Touch'

- ‘AAC Communication Device’



Self-Harm Safety

Self-injury or self-harm is defined as ‘when a person hurts their own body on purpose…A person who self-harms usually does not mean to kill themselves, but they are at higher risk of attempting suicide and dying by suicide if they do not get help.”[16] Self-harm is more common in young people, but can happen at any age.[17] Certain symptoms, situations, and comorbidities related to autism-spectrum disorder may cause those with ASD to be more prone to self-injurious behavior.[3] Those living with ASD are more likely to engage in self-harming behaviors than those not living with ASD.[17]

Self-harming behaviors are classified as anything that might cause physical harm to the individual, including slapping themselves, scratching, pulling hair, biting, or cutting themselves, among others.[17] Some warning signs of self-harm might include unexplained injuries or blood stains, becoming withdrawn, avoiding activities where they must change clothing and preferring to keep fully covered around others, or showing signs of depression or hopelessness, among others.[17]

Individuals with ASD may injure themselves unintentionally as well.[17] Reasons for engaging in unintentional self-injurious behavior could include sensory management, challenges with emotion regulation, or co-occurring mental health conditions.[17] Self-injurious behavior differs from self-harm behaviors in that the intent is not harm, but the intent is to regulate or express discomfort or communicate a need.[17] Clinicians may utilize a functional behavioral assessment (FBA) to determine the function of self-injurious behavior to identify the best ways to support the individual.[18] Parents or guardians can also keep track of when the individual chooses to self-injure in a journal to better notice patterns and triggers for the behavior.[18]

Once the cause of the behavior is determined, intervention plans can be made. Utilizing picture stories and preparing your child for certain situations can help reduce their anxiety and reduce triggers for self-injury.[18] Teaching them alternative behaviors to ensure that their wants and needs are met, i.e., using words, will empower the individual to use safer methods. Therapy might also be a suitable option to reduce the behavior if it has become a habit, or if it is occurring due to a psychological cause.[18]

Remember, the **National Suicide and Crisis Lifeline** phone number is **988** and is available 24 hours a day, 7 days a week.

Bullying Safety

Statistics show that over 60% of children and young adults with autism spectrum disorder experience bullying, and among that 60%, most will be high school age.[19]Children with ASD typically will exhibit difficulty reading social cues, understanding social conventions, misunderstanding intentions of others, taking things literally, and finding friend groups.[20]These factors contribute to the risk of being bullied by their peers. These behavioral factors may also increase the risk of children with autism inadvertently offending their peers without realizing it, increasing the risk of bullying and isolation.[20]

Children with ASD who experience bullying may exhibit negative mood, changes in eating or sleeping patterns, refusing to go to school, loss of interest in activities they usually enjoy, outbursts of aggression, and possibly a decline in school performance.[20]

Bullying is unfortunately not limited to verbal or physical abuse, which is still common.[19] Some other forms of bullying include relational or social, damaging personal property, or even cyberbullying.[19]

There are a few ways to support a child that is the victim of bullying.

First, building self-advocacy skills through teaching scripted phrases, procedures for reporting mistreatment, coping strategies can help students to learn appropriate responses to bullying situations, and teaching individuals with ASD to adjust responses based on severity of what is happening, are a few ways to help them cope and handle certain situations.[20] It is important to keep in mind that developing coping strategies and adjusting to the severity of the situation may be challenging for an individual with ASD and may require the assistance of a medical professional. In addition, practicing phrases and strategies through role-play will help individuals to become more confident and assertive in these situations. To ensure they are comfortable getting help from adults, it is important to practice specific words and scripts your child should use to get help from a trusted adult, such as a teacher or a bus driver.[20]

Parents should take steps to learn and understand the federal and state laws put in place to prevent bullying and protect children.[19] There are laws in place that prohibit harassment or bullying based on disability, and parents have legal rights to act on if their child is the target of this type of harassment.[19]

Finally, ensuring that your child's Individualized Education Plan (IEP) covers both your child's educational and social needs is another way to proactively protect against bullying.[19]

Section 4: Conclusion and More Resources

Navigating safety information can be overwhelming, so it is helpful to enlist the support of a medical professional trained in ASD safety, such as school therapists or personnel, your child's pediatrician, youth program personnel, ABA providers, among others.

There are also websites and organizations dedicated to providing safety information for children with ASD. The references list following this section is a great addition to the information provided in this guide. A few other organizations local to the Connecticut-area include:

- The Autism Society (https://autismsociety.org/) has affiliate organizations in many states including New Jersey, New York, and Massachusetts, and seeks to connect individuals to ASD resources.

- Autism Services and Resources Connecticut @ Clifford Beers (https://ct-asrc.org/) is an organization that provides structured social opportunities for members of the ASD community, as well as resources for members of the community.

- Autism Families CONNECTicut (https://www.autismfamiliesct.org/) provides low cost, accessible, social and active programming for individuals with ASD from ages 3-35 in Connecticut.

There are grants available to support individuals with ASD. Autism Speaks provides a list here: https://www.autismspeaks.org/autism-grants-families. Some grants include those from the Autism Spectrum Disorder Foundation (ASDF), The Autistic People of Color Fund, and the CARE Family Grant Program, among many others. Autism Speaks encourages families to contact their Autism Response Team for more state or location-specific grants.

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