

**GUIDELINES FOR SCHOOLS WITH AUTISTIC LEARNERS RETURNING TO SCHOOL
DURING COVID-19**

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1. Introduction

The accommodation of learners who are autistic in schools and hostels during the COVID-19 pandemic requires consideration of the complex and unique needs and accommodations needed to ensure their school attendance is in their best interest. The Minister of Health, Dr Zweli Mkhize, has described the fight against COVID-19 as a people's war against the virus:

We will defeat the pandemic on the basis of collective social behavioural change, that creates a whole new culture of distancing, of use of masks, cough etiquette and ensuring that everybody is cautious of their individual roles, because unless our citizens themselves take responsibility of infection control, then off course we will not be able to win.

From the above, it is obvious that our chance to win lies in our acts of meticulous planning, preparation and constant awareness. A higher degree of these capabilities is, however, required where schools have learners and persons with disabilities or who may be vulnerable and susceptible to contracting COVID-19. For instance, a range of complicating factors may arise in a school context, due to the nature vulnerabilities and the manner in which schools manage their daily practices in response to these complexities, that may compromise the safety of learners, teachers and support staff.

To this end, these guidelines provide an outline of steps that may be taken in order to limit the chance of contraction of the virus in schools with autistic learners, and at the same time honour their rights and special needs. Schools are alerted to the fact the strength of these guidelines lies in them being used and applied in conjunction with directions from the following documents, which are freely available at www.education.gov.za :

- *Coronavirus Orientation Guidelines for Schools, Teachers, Support Staff and Learners on the COVID-19 Outbreak in South Africa;*
- *DBE Guidelines for Schools on Maintaining Hygiene during COVID-19 Pandemic;*
- *ELRC Collective Agreement 1 of 2020: Concession process to follow for employees with a comorbidity (COVID-19); and*
- *Standard Operating Procedure for the Prevention, Containment and Management of COVID-19 in Schools and School Communities.*

2. Key considerations

2.1 The nature of autism and the unique and different ways it manifests in learners, hence it being referred to as ASD (Autism Spectrum Disorder), requires special consideration in preparing the learners for the return to school.

2.2 An additional impact on the learners during this time has been the inconsistency and general concern regarding the pandemic, and we need to be aware of the fact that this may have impacted on each of our learners, giving rise to additional complexities and challenges. Children, such as autistic learners, require routine and consistency in learning and development.

2.3 Learners on the spectrum may present with behaviours that are challenging. These behaviours are not malicious, neither are they intentional or purposeful; they often arise out of frustration or anxiety.

2.4 Due to the lockdown and disruptions in routine, autistic learners may be emotionally dysregulated, resulting in more of these behaviours. These learners MUST NOT be disciplined for these behaviours. Associated behaviours may increase the spread of infection risk. Behaviours might include biting and scratching, exposing saliva and blood.

2.5 Therefore, there is need to take the following into consideration to ensure that their return to school has minimal shock:

2.5.1 Inform the autistic learner of the new measures in place to prevent the spread of the virus.

2.5.2 Give the learner information regarding the procedures. Tell the learner about the new procedures regarding the wearing of masks, sanitisation of hands and the taking of temperature. Discuss the steps in detail and inform the learner what he/she would be required to do.

2.5.3 Keep in mind that autistic learners will not be able to follow instructions immediately given the fact that the current situation is unusual and may fall outside of their current routines. Communication with the learner must be through the medium that is accessible to the learner, and which will result in the learner obtaining a full understanding of what is expected of them. In some instance, this may mean that additional staff may have to be on duty for this purpose.

2.5.4 From the above, it is clear that autistic learners will not immediately be familiar with keeping the required distance between themselves and other learners, and must be reminded to keep this distance until it becomes routine to them.

2.5.5 Educators and support staff must provide a form of communication for learners who are non-verbal and have difficulties communicating. Educators and support staff may consult with Makaton South Africa as well as other organisations who provide Augmentative and Alternative Communication (AAC) in this regard. AAC will assist with non-verbal learners or those who have difficulty with communicating. This will include the use of gestures and signs or by means of a picture communication system.

2.6 The section below raises issues for which teachers must be on the lookout when autistic learners return to school, as well as suggested strategies to try combat the risk of infection and ensure that learners benefit from teaching and learning activities.

3. Access to education

3.1 The school management team must ensure that teachers prepare individual support plans for each child, based on their unique challenges, and allocate time to communicate with families ahead of the schools re-opening.

3.2 Educators and support staff must ensure that there is structure and routine to help reduce the possibility challenging behaviours arising. Structure and routine will help to provide learners with some level of predictability. This is very important as it will assist in reducing anxiety and triggers for challenging behaviours.

3.3 Educators may make use of a behaviour journal to note when, where and how frequently behaviour is happening. This may help to identify how a specific behaviour

is triggered and assist teachers to eliminate such antecedents. Below is an example of how educators might want to record behaviour to try and identify the pattern:

| ANTECEDENT | BEHAVIOUR | CONSEQUENCE |
|------------------------------------|---|---|
| What happens before the behaviour? | What is the behaviour? This needs to be objective with no emotion | What is the consequence? That is, what happens after the behaviour? |
| | | |

3.4 Educators and support staff must ensure that there is routine and structure in place when learners return to school. This will provide a degree of predictability for learners and help reduce any anxiety that may arise. This is of utmost importance as learners are likely to be emotionally dysregulated when they return to school after the lockdown. The following are some suggestion in respect of what educators may have to do:

- 3.4.1 One of the ways in which educators may help learners to cope is to provide them with structure and routine. Visual schedules are very important and can be displayed in the classrooms, passages, places of gathering, busses, bathrooms and sanitation or handwashing stations.
- 3.4.2 Educators can support families at home by helping them to set up routines at home, as well as share visual schedules.
- 3.4.3 Educators can also provide a calendar, in which families can mark off the days in a countdown manner to help the child understand when school will begin and end.
- 3.4.4 Routines and structure both at home as well as at school are VITAL! Without this, more behaviours that are challenging may emerge.

4. Containment of the disease

4.1 Sensory needs are the primary concern here, together with the risk of learners drinking, tasting or swallowing alcohol-based sanitisers. Therefore, educators and support staff need to pay attention to the following:

- 4.1.1 **Alcohol-based sanitiser:** If this is to be used in the classroom or school environment, this MUST be carefully managed. The sanitiser must be stored out of reach and monitored to ensure learners do not have access to it without supervision. The smell of the sanitiser might also upset some learners. Therefore, if possible, fragrant-free, odourless sanitiser or solution would be the best option.
- 4.1.2 **Hand washing:** Some learners on the spectrum love water and will happily play in water, while others may not enjoy the sensation of water or soap on their hands. Again, an odourless or fragrant-free soap would be the best option. The following may be considered in the teaching of handwashing to autistic children:
 - 4.1.2.1 Teach hand washing in a playful manner for younger learners. A song may be used to assist the learners. This will also help them to wash their hands thoroughly.
 - 4.1.2.2 Break down the steps of hand washing and teach learners step-by-step how to complete the task. This can also be sent to parents before school resumes so that they can teach their children before they return to school. Below are two examples that can be used for this purpose:

- <https://i-asc.org/wp-content/uploads/2020/03/Motor-Prompts-for-Handwashing-1.pdf>

- https://aut2know.co.za/wp-content/uploads/2020/04/Supporting-Individuals-with-Autism-through-Uncertain-Times_SA-Adapted-Version_Final.pdf

4.1.2.3 A visual schedule may be used to portray the steps, as previously mentioned. Visual schedules can be displayed at handwashing and/or sanitising stations to provide visual cues.

4.2 Due to the sensory component of autism, autistic learners tend to touch objects more frequently than what other learners will. Therefore, classrooms, equipment and surfaces will require more frequent and regular sanitisation compared to what is currently stipulated in the regulations.

4.3 In addition, some learners on the spectrum may have difficulties understanding or getting their bodies to respond to the social distancing rules. Therefore:

4.3.1 It would be important for educators to have partitions or barriers on tables or desks within the classrooms. However, educators must remember that learners will touch these regularly. Therefore, these surfaces will need to be sanitized and cleaned frequently.

4.3.2 Educators and schools can also use visual prompts and cues to help and guide behaviour. For instance, they may use stickers to show where to stand or to sit, (similar to what we are currently seeing in shops. Hoola-hoops as well as coloured tape may be used to show the space learners should have around them.

4.3.3 Again, a social story can also be used to help address this concern – <https://aut2know.co.za/wp-content/uploads/2020/05/Social-Distancing.pdf>

5. Wearing of masks

5.1 The autism diagnosis includes learners who experience sensory challenges. This means that an autistic learner can be over- or under-sensitive to sensory stimuli, including fabric textures.

5.2 In the context of the COVID-19 pandemic, it must be remembered that autistic learners are not used to having to wear a mask, and this in itself may present as a challenge and an additional cause of stress and anxiety in the learner. Wherever possible, schools and educators are encouraged to communicate with parents and ask for their advice on their child and his/her preferences.

5.3 It is also essential to note, that due to the nature of learners on the Autistic Spectrum, no learner should be forced to ever wear a mask if it causes any distress or anxiety, which is one of the particular challenges these learners can be faced with.

5.4 The following is therefore recommended as a way of ensuring that autistic learners are supported as well as possible within the confines of their unique challenges and the respect of their human rights:

5.4.1 As part of the preparation for re-opening of school, educators, classroom assistants as well as other staff who work with the learners may be requested to send photos of themselves wearing their masks and other PPE that they will be wearing to the parents, guardians and caregivers of learners. This can be sent along with a voice message or a video message for their teacher to create

familiarity and help reduce anxiety about returning to school among autistic learners. In addition, this will also assist with familiarising those learners who may find it difficult to recognise faces, a condition called prosopagnosia.

5.4.2 On return to school:

5.4.2.1 Autistic learners need to know why wearing a mask is necessary. Therefore, teachers may use a social story to explain why masks and/or face shields must be used. An example of a social story may be found in the following link: <https://www.teacherspayteachers.com/Product/Wearing-A-Mask-Story-for-Children-5463572> .

5.4.2.2 Learners need to be introduced to different types of face protection for individual introduction and exploration, for instance, cloth masks, surgical masks or face shields.

5.4.2.3 Educators and support staff may break down the steps of wearing a mask. This is because some learners may struggle even with simple activities. Therefore, breaking down a task into smaller steps will help learners learn better. For a visual that could assist in this regard, visit: <https://aut2know.co.za/wp-content/uploads/2020/05/Untitled-design-5.png> . A Visual schedule can also be used to provide step-by-step directions using visual prompts and cues.

5.4.3 There are however risks associated with wearing masks that educators must be aware of to ensure that learners are safe, namely:

5.4.3.1 If a learner has a co-morbidity of epilepsy or Cerebral Palsy– drooling or a large amount of spittal in the mouth could increase the risk of infection. Therefore, the mask may need to be changed and cleaned more frequently, if a mask can be tolerated by the learner.

5.4.3.2 Some learners may chew or bite the masks. Therefore, educators and support staff must always be alert to step in and assist if this happens.

5.4.3.3 Learners may take each other's masks, exposing them to possible infections. Again, educators and support must be alert to this possibility and ensure that they always watchful.

5.4.3.4 There is a risk of strangulation with elastic of masks. Therefore, educators and support staff must ensure that learners are safe from this danger.

5.4.4 It is highly recommended that masks are addressed on a case-by-case basis, as, for some learners, this might pose more of a risk than a benefit. As indicated above, educators may need to speak to parents, guardians or caregivers of learners as well as use their own knowledge and discretion to ascertain the best way forward with regards to the wearing of masks, or any type of face protection in the classroom or school environment. This is critical in ensuring that the learner and his/her needs are respected within their human rights.

6. Personal hygiene

6.1 Educators must break this down into steps and teach learners step by step. As indicated above, the use of a visual schedule will assist with visual prompts. Again, this will need to be carefully monitored by educators so that learners are taught to throw their tissues away.

6.2 Some learners may not realise that their nose is running. Therefore, the use of mirrors might help. However, educators must be aware that, in some instances, these may be a distraction to some learners. Therefore, case specific management will need to be considered for implementation.

6.3 Parents, guardians and caregivers must be encouraged to keep learners who are sick at home. In this instance, schools and educators must support parents, guardians and caregivers by sending home step-by-step instructions for learners to practise.

7. Personal protection equipment for staff

7.1 Due to the fact that some autistic learners are potentially at a higher risk for spreading the infection, it is advisable that staff wear full Personal Protection Equipment. For instance, officials and staff for whom social contact with learners is inevitable must be provided with appropriate personal protective equipment, including jumpsuits, where reasonable applicable.

7.2 However, it must be remembered that this might provoke anxiety in some learners, and that appropriate preparation of learners may be necessary.

7.3 Again, educators and support staff are encouraged to send photographs to parents, guardians and caregivers for learners to see what their teachers, therapists and other staff members will look like when they return to school.

8. Learners returning to school

8.1 The following categories of learners may not return to school:

8.1.1 *Learners with comorbidities that pose a risk to severe COVID-19 as guided by the Department of Health:* For these learners, schools must ensure that they set up appropriate mechanisms for these learners to continue with their education.

8.1.2 *Learner from hotspot areas:* For these learners, schools must ensure that they set up appropriate mechanisms for these learners to continue with their education.

8.1.3 *Learners whose parents have concerns about them returning to school in the context of COVID-19:* Parents, guardians and caregivers for these learners must make necessary arrangements with schools to ensure that the education of their children continues.

8.1.4 *Learners whose parents have opted to home-educate:* Parents, guardians and caregivers of these learners must register their children in line with the *Policy on Home Education*, and need to provide evidence of how they will ensure full access to all learning and learning materials to these learners, through appropriate materials and pedagogy for blind and partially sighted learners.

8.2 For the above to happen, schools must set up appropriate mechanisms for parents, guardians and caregivers of the above categories of learners to inform the school in respect of the reasons for not returning to school, and these learners must be assisted to fully understand why they are not returning to school.