# **Informing A Provider**

Some available information and tools for Mental Health providers, for a child or youth with a developmental delay or/and a disability who has experienced trauma.







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#### **About this Document**

This is one of three documents to support "A child or youth with a developmental delay or/and a disability who has experienced trauma." These documents are for caregivers, mental health providers, or/and others.

#### Use of terms developmental delay and disability

- A developmental delay is not necessarily a disability, and therefore listed separately. It is
  included, as many of the considerations or/and adaptations may be applicable.
- We understand the issues regarding the term "disability" for some of the areas it is applied
  to. We use it now and other times, as it is expedient (definition: convenient and practical
  although possibly improper or immoral; a means of attaining an end, especially one that is
  convenient but considered improper or immoral).
- Respectfully, instead of using 'a developmental delay or/and a disability', we mainly use just 'disability'.
- Obviously, not all information applies to all delays or/and disabilities.

#### **Disclaimers**

- Any sources used are not endorsements of the source.
- As recognized, information is what it is, and may be constantly evolving.
- Everything is provided for informational purposes only.

#### **Need for these documents**

With our focus on children, we know that children with a delay or/and a disability, have possible increased risk factors for trauma. Then while adults with a disability are not the focus, the three documents can benefit them, and it's helpful to have that thought as we proceed. Ergo, we also know, adults with disabilities have possible increased risk factors for trauma.

Consequently, with those possible increased risk factors for trauma, and how prevalent trauma is, that means there is a need for mental health trauma services for individuals with a delay or/and a disability. And for that, there is an extensive list of all that is needed, which is

definitely beyond the scope of this work. So, in that array, we are going to focus in on some specific gaps in what is currently available.

If we look at what trauma treatment is available for individuals with a developmental delay or/and a disability, some of the gaps we see are:

For mental health providers:

- May not be aware of what information and tools are available for trauma treatment.
- May not be aware of what information and tools are available for a delay or/and disability.

For caregivers and others:

- Might not know facts and considerations regarding reaching out to a mental health provider.
- May need to give the mental health provider the information they need to work with the child and family/other.
- May need to be more informed about information and tools.

To help address these gaps, we have our first two documents:

Informing a Provider "Informing a Provider: Some available information and tools for a Mental Health provider, for a child or youth with a developmental delay or/and a disability who has experienced trauma." While not all inclusive, it is a place to start. And it is considered a living document, updated as new information or/and tools are available. It was drafted with a dual purpose:

- To be made available to mental health providers as a stand-alone document.
- For caregivers and others:
  - o To be informed.
  - o To use, in conjunction with *Contacting a Provider*.

**Contacting a Provider** "Contacting a Mental Health Provider: For a child or youth with a developmental delay or/and a disability who has experienced trauma." was drafted for caregivers and others. Note: In present form, may require some level of training or a companion guide for utilization.

The third document is, a **PTSD and CPTSD Comparison.** It compares: PTSD from the DSM-5-TR, ICD-11, DM-ID-2, DC:0-5v2 and CPTSD from the ICD-11. It was drafted for those already familiar with the full works to use as a quick reference or/and for training. That said, since it does include DM-ID-2 considerations, it may be a quick if not comprehensive source for a mental health provider to refer to if they don't have the DM-ID-2 and need something immediately; and thus, included in this three-document set.

#### **Author:**

These three documents and associated trainings are the works of Gwendolyn Downing.

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#### **Section 1 - Some basic sources**

In this section, the majority is *free*. If otherwise, noted by: (\$).

#### Being Informed, Screening, Assessment, and Treatment

The following has a mix for being informed, screening, assessment, or/and treatment.

#### **APA Guidelines for Assessment and Intervention with Persons with Disabilities**

(https://www.apa.org/pi/disability/resources/assessment-disabilities). While written for the psychologist profession, is helpful for others, as it includes info to help with understanding disability paradigms and models, and other applicable areas.

#### Bernier Lab University of Washington - Trauma and ASD Reference Guide, June 2017.

(http://depts.washington.edu/rablab/reference-guides/bernier-lab-uw-trauma-and-asd-reference-guide-2017/)

## Brian Tallant's TEDD (Training Educators in Dual Diagnosis), "Trauma in Youth with Intellectual and Developmental Disabilities" - YouTube video

(https://www.youtube.com/watch?v=3t8Z6ryHsnw&t=9s): Discusses the prevalence of trauma in youth with intellectual and developmental disabilities, and provides suggestions for trauma-informed practices.

<u>Diagnostic Manual – Intellectual Disability (DM-ID-2).</u> (https://thenadd.org/products/dm-id-2/) (\$)

<u>Integrated Mental Health Treatment Guidelines for Prescribers in Intellectual and Developmental Disabilities.</u> (https://centerforstartservices.org/IDD-MH-Prescribing-Guidelines)

National Center for START Services

<u>The impact of trauma on youth with intellectual and developmental disabilities.</u> A fact sheet <u>for providers.</u> (https://www.nctsn.org/resources/the-impact-of-trauma-on-youth-with-intellectual-and-developmental-disabilities-a-fact-sheet-for-providers) NCTSN

The Road to Recovery: Supporting Children with Intellectual and Developmental Disabilities

Who Have Experienced Trauma Toolkit (NCTSN Learning Center https://learn.nctsn.org/)

Designed to teach basic knowledge, skills and values about working with children with IDD who have had traumatic experiences, and how to use this knowledge to support children's safety, well-being, happiness, and recovery through trauma-informed practice.

#### **Trauma Screening and Assessment**

Brian Tallant's NADD "Trauma assessment in youth and adults with IDD" video, on Facebook (https://www.facebook.com/NADDMHID/videos/2264648153840775)

#### Child and Adolescent Trauma Screen (CATS)/(CATS-2):

- Original CATS UW Medicine, Harbor View Medical Center, Assessments
   (https://depts.washington.edu/uwhatc/PDF/TF-%20CBT/pages/assessment.html)
- Original CATS, with some or all forms in Arabic, Dari, Farsi, German, Norwegian, Paschtu,
   Russian, Spanish, Swedish, Tigrinya, Turkish, Ukrainian ULM University (https://ulmer-onlineklinik.de/course/view.php?id=1701)
- Adapted original CATS Oklahoma Department of Mental Health and Substance Abuse
   Services' versions: Caregiver 3-17, Youth 7-17, Spanish versions, stoplight sheet, short
   version (https://oklahoma.gov/odmhsas/search.html?q=CATS)
  - ODMHSAS 1hr CATS administration eLearning. Training institute
     (https://oklahoma.gov/odmhsas/trainings/training-institute.html)
- <u>The Child and Adolescent Trauma Screen 2 (CATS-2) Validation of an instrument to measure</u>
   <u>DSM-5 and ICD-11 PTSD and complex PTSD in children and adolescents at NIH</u>
   (https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9344962/)
- The CATS-2 Webinar, Caregiver for 7-17, and Youth 7-17 The University of Oklahoma
   Health Science Center's Oklahoma TF-CBT site, under resources, then assessment
   (https://oklahomatfcbt.org/audiences/tf-cbt-therapists/assessment-resources/)

#### **Trauma Treatment**

Brian Tallant's NADD "Trauma treatment for youth and adults with IDD" video, on Facebook (https://www.facebook.com/NADDMHID/videos/251263686001162)

"Tailoring Trauma-Focused Cognitive Behavioral Therapy for Children with IDD" webinar - NCTSN Learning Center (https://learn.nctsn.org/)

- TF-CBT web, online training of the model Medical University of South Carolina (https://tfcbt2.musc.edu/) (\$) (\$35 for course)
- <u>TF-CBT National Therapist Certification Program</u> (https://tfcbt.org/) (\$)
- Oklahoma TF-CBT, has free resources for therapists (https://oklahomatfcbt.org/)
- <u>Treatment Innovations' Seeking Safety model, can be adapted</u> (https://www.treatment-innovations.org/) (\$)

#### **Section 2 - Some possible general considerations**

This section is compiled and adapted from: the Road to Recovery toolkit, information from cochairs of the NCTSN's Trauma and IDD workgroup (2019), Brian Tallant's work, and other.

#### Be informed as you quickly can about:

- The child's specific delay or/and disability.
  - Including possible appropriate physical actions or/and reactions needed from you, e.g.,
     when your assistance might be needed, and if so, the best way.
- Cultural and social issues for them about delay or/and disability.
  - Example: Person first vs identity first language. You might have been taught person first language, and would normally say, "an individual with autism". That might be how the individual you are working with would prefer it said. However, we must remember identity and empowerment are different for individuals, and our cultural norms may be incorrect. Some individuals prefer identity first language, and identify as "an autistic person", as they feel empowered by that; autism is part of who they are, and not something to be seen as an issue. So, don't assume, ask, what a person prefers.

Example: The impact of insidious trauma (definition: The daily incidents of marginalization, objectification, dehumanization, intimidation, et cetera that are experienced by members of groups targeted by racism, heterosexism, ageism, ableism, sexism, and other forms of oppression, and groups impacted by poverty [VAWNET]), as related to their disability, and as applicable, any other areas of intersectionality.

#### If applicable, be aware of situations there can be possible misattribution:

When trying to determine, "What is the source(s) of what a child is experiencing or/and exhibiting?", some considerations:

- Am I being objective/unbiased?
- What are the possibilities? Developmental stage, personal trait, medical, mental health,
   trauma symptom, delay, disability, currently experiencing trauma, cultural, so on.
- Is the source one or more?
- Can we determine the source(s)?

#### If needed:

- What do we do if we narrow the possibilities, but can't determine in the moment?
- What do we do if we can't determine, for the time?

Tip: While there might be the need for input from multiple individuals, sometimes physiological can be a source/co-source, and therefore, refer/work with a child's pediatrician.

#### Trauma screening and assessment:

Some considerations with screening and assessment tools:

- May not have been specifically validated for the delay or/and disability.
- May have different norms.

#### Some considerations in administration:

- Might need adaptive behavior measure results, and not have them available.
- Due to a child's functionality, availability of information, the source, or/and so on, there may be difficulty, delay, inability, or/and misattribution determining the source(s).

Some possibilities for adaptations:

- While caregivers are normally part (noting exceptions), may require higher involvement; may need to include multiple caregivers and providers in various environments (e.g., neighbor/relative who provides care for child, school/daycare teachers, occupational therapist).
  - o If needed, provide psychoeducation on responses to trauma.
- When administering, consider:
  - o Pace (e.g., slow down speech)
  - Complexity (e.g., use simple language)
  - Timing (e.g., present one concept at a time)
  - Sequencing (e.g., rearrange questions to build on strengths)
  - Using visuals (e.g., what does "never" look like)
  - Nonverbal communication (e.g., their nonverbal responses, having a way for them to nonverbally communicate)
- Need to use an intermediary (e.g., sign language interpreter, professional familiar with assistive devices).

Due to the potential issues with both the tool(s) and administration, discuss anything that doesn't seem to line up to the child, caregiver, or/and you.

Through the course of services, do careful assessment of functioning continuously, in conjunction with assessing symptoms.

#### **Trauma Treatment:**

#### Some general considerations:

- May need to adjust session length and frequency, e.g., shorter, more frequent.
- Length of treatment may be impacted, e.g., more sessions needed.
- Measuring change may need to be in smaller or/and more gradual increments.
- Again, while caregivers are normally part... (same as in screening and assessment).
- Assess initially and ongoingly for needed adaptations to psychotherapy. E.g., Cognition:
   Establish an understanding of level of comprehension; don't want to assume the material is
   too complex nor that it easily understood. Then depending on the child improving or
   experiencing impediment to their previous level, adjust as needed.

#### Some Ideas for adapting psychotherapy:

- Have structure and routines
- Reward system, e.g., play reward, physical items
- Use visuals, e.g., explanation of terms, concepts, structure of session, course of treatment,
   for communication
- Nonverbal communication, e.g., visuals, squeezing an item, motions
- Slow down pace of a model
- Slow down your speech
- · Use language that is comprehensible to the child
- Present information one item at a time
- Simplify
- Be concrete
- Take frequent pauses during the session to check comprehension
- Allow for repetition and paraphrasing
- Allow time to practice new skills
- Recognize that repetition is helpful for learning
- · Allow time for cognitive processing
- · Be aware child may return repeatedly to inaccurate or unhelpful cognitions

- Use multisensory interventions (e.g., non-verbal, play therapy) & tools to assist in learning
- Use individualized teaching materials
- Have alternative modes of expression such as art
- Make specific suggestions for change
- Do not assume that information will generalize to new situations. Work explicitly on generalization of skills to other environments.
- Take more breaks
- For treatment that includes a trauma-narrative, be creative, e.g., they dictate; use a tape recorder, video or still camera; role-play, song or dance; use play.

#### Questions that may need to be asked or answered

#### Possible questions you might need to ask of caregivers:

- Information about equipment, aids, or/and assists
- Service animal information
- Prior issues with any type of service provider

#### Possible questions to might need to answer for caregivers:

- Is your location fully ADA accessible?
- Any limits under payor source for possibilities such as, adjusting session length, session frequency, or/and longer length of treatment; and if limits, best options?
- What do you need to be comfortable working with the child? Example scenario, they use an assistive language device and that's outside your experience.

#### **Section 3 - Some free tools**

The following two tools are from the STRYDD Center (Supporting Trauma Recovery for Youth with Developmental Disabilities), Long Island Jewish Medical Center, Northwell Health.

Please note for the Spanish versions: They are from earlier versions of the tools, and I haven't had the opportunity to get the new versions translated.

## STRYDD Center: Individualized Therapy Accommodations Planning Tool - IDD Profile

Language issues	<b>~</b>	Language strengths	*Age/ Grade	Therapy Accommodation
Limited expressive vocabulary				
Limited ability to express ideas in words				
Speech unclear/hard to understand				
Limited receptive vocabulary				
Limited understanding of complex language forms (e.g., multi-phrase sentences, etc.)				
Limited pragmatic skills (understanding and use of verbal and nonverbal cues for interpersonal communication				
Cognitive issues		Cognitive strengths	*Age/	Therapy Accommodation

Cognitive issues	~	Cognitive strengths	*Age/ Grade	Therapy Accommodation
Difficulty with abstract				
concepts (more difficult than				
expected for age)				
Difficulty with generalizing				
Difficulty with immediate				
memory (e.g., ability to				
remember multiple				
instructions)				
Difficulty with long-term				
memory retrieval on demand				
Limited attention span for at				
least some kinds of materials				
(specify)				
Limited visual/spatial skills—				
may affect organizing of				
information				
Uneven skills (specify—e.g.,				
visual spatial skills much				
stronger than verbal or the				
opposite)				

Sensory/motor issues	~	Visual/spatial & motor strengths	*Age/ Grade	Therapy Accommodation
Low vision (for near, far, both)				
Hearing issues (any aids?)				
Fine motor issues (e.g.,				
affecting writing, drawing)				
Gross motor issues				
Sensory sensitivities (specify)				
Academic skills that can impact treatment	~	Academic strengths	*Age/ Grade	Therapy Accommodation
Reading decoding				
Reading comprehension				
Writing skills				
Understanding basic numbers				
Other issues	~	Notes	*Age/ Grade	Therapy Accommodation
Willingness and Motivation				
Generalization of Skills				
Obsessive about sameness				
Hyperfocus on				
Difficulty with transitions				
Limited emotional coping				
strategies				
Special characteristics – strengths	~	Notes	*Age/ Grade	Therapy application
Special interests				
Tends to follow clear routines				
Has mastered coping				
strategies of:				
Technology skills:				
Other:				

<sup>\*&</sup>quot;Age and grade level" are if you have them available.

#### STRYDD Center: Session Accommodations Checklist

### Identify nature of IDD involved (check multiple if pertinent, e.g. ASD and ID) Autism spectrum disorder Learning disabled Speech/language impaired Intellectually disabled | Multiple handicap Other (include sensory impairment) Other and notes: Accommodations used during this block of sessions Increased attention to engagement strategies More play time Use of special interests and/or skills Other: Flexible session and treatment length and pacing Adjust pacing of content Other: Shorter sessions More sessions Adjustment of parental/caregiver involvement Increased time In child session Mechanism: Increase in parent/caregiver sessions or between-session contact Goal: Skill reinforcement Help deal with child anxiety For interpretation purposes Adjustment of session content Clarifying session structure/aids for marking structure Strategies for presentation adjusted depending on dd needs: Simplify language Simplify some content (e.g., choice of prac skill strategies) Additional comprehension check Increased use of visual cues Use of materials/strategies developed for youth with disabilities (e.g., social stories) Building on child's special interests or areas of talent/relative strength Other (e.g., increased use of technology/apps or materials for younger age): Attention to generalization of PRAC skills Attention to modality/type of narrative based on child's skills Other (includes attention to any sensory issues—e.g., sensory sensitivities of youth with ASD, sensory issues of youth with low vision, hearing impairment, etc.):

## Centro STRYDD: Planificación de Adaptaciones Terapéuticas Individualizadas - Perfil IDD

Problemas del lenguaje	~	Puntos fuertes del lenguaje	Adaptaciones terapéuticas
Vocabulario expresivo limitado			
Capacidad limitada para expresar ideas			
con palabras			
Hablar sin claridad/difícil de entender			
Vocabulario receptivo limitado			
Comprensión limitada de formas			
lingüísticas complejas (por ejemplo,			
oraciones con varias frases, etc.)			
Habilidades pragmáticas limitadas			
(comprensión y uso de señales verbales y			
no verbales para la comunicación			
interpersonal)			
Problemas cognitivos	~	Fortalezas cognitivas	Adaptaciones terapéuticas
Dificultad con los conceptos abstractos			
(más dificultad de la esperada para la			
edad)			
Dificultad para generalizar			
Dificultad con la memoria inmediata (por			
ejemplo, la capacidad de recordar			
múltiples instrucciones recién dadas)			
Dificultad en la recuperación de la			
memoria a largo plazo cuando se necesita.			
Tiempo de atención limitado para algunos			
materiales (especificar).			
Capacidades limitadas de			
visualización/espacio pueden afectar la			
organización de la información.			
Destrezas dispares (especificar, por			
ejemplo, si las destrezas visuales de			
espacio son más evidentes que las			
destrezas verbales, y vice versa).			

Problemas sensoriales/motores	~	Fortalezas de visualización/espacio y motricidad	Adaptaciones terapéuticas
Poca visión (de cerca, de lejos, ambos).			
Problemas de audición (¿utiliza algún			
dispositivo auditivo?).			
Problemas de motricidad precisa (por			
ejemplo, que afectan la escritura o al			
dibujo).			
Problemas de motricidad general	~		Adaptaciones terapéuticas
Sensibilidades sensoriales (especificar).			
Destrezas académicas que pueden		Competencias académicas	
afectar el tratamiento		que pueden ser útiles	
Descodificación de la lectura.			
Comprensión de lectura.			
Capacidades para escribir.			
Comprensión de los números básicos.			
Otros problemas	~		Adaptaciones terapéuticas
Obsesión por lo mismo.			
Hiperfocalización en:			
Dificultad con las transiciones			
Estrategias limitadas de afrontamiento			
emocional.			
Características especiales			
Intereses especiales.			
Tiende a seguir rutinas claras.			
Domina las estrategias de afrontamiento			
de:			
Otros:			

## Centro STRYDD: Listado para comprobación de adaptaciones

## Identifique la naturaleza del IDD implicado (marque varios si es pertinente, por ejemplo, TEA

y DI)
☐ Discapacidad en el aprendizaje ☐ Deterioro del habla/lenguaje ☐ Trastorno del espectro autista
☐ Discapacidad intelectual ☐ Discapacidad múltiple ☐ Otros (incluye discapacidad sensorial)
Adaptaciones utilizadas durante esta serie de sesiones:
Mayor atención a las estrategias de participación:
☐ Más tiempo de juego ☐ Uso de intereses y/o destrezas especiales ☐ Otros:
Flexibilidad en la duración y el ritmo de las sesiones y los tratamientos:
Sesiones más cortas Más sesiones Ajustar el ritmo del contenido Otros:
Adaptación de la participación de los padres/cuidadores:
Mecanismo: Aumento del tiempo en la sesión del niño.
Aumento de las sesiones de los padres/cuidadores o del contacto entre sesiones.
Objetivo:
Reforzar las destrezas Ayudar a tratar la ansiedad del niño Para fines de interpretación.
Adaptación del contenido de la sesión:
Clarificación de Clarificar la estructura de la sesión/ayudas para marcar la estructura
Estrategias de presentación ajustadas en función de las necesidades del DD:
Simplificar el lenguaje.
Simplificar algunos contenidos (por ejemplo, la elección de estrategias de habilidades prácticas).
Comprobar la comprensión de forma adicional.
Aumentar el uso de pistas visuales.
Uso de materiales/estrategias desarrolladas para jóvenes con discapacidad (por ejemplo, historias
sociales)
Aprovechar los intereses especiales del niño o sus áreas de talento/fortaleza.
Otros(por ejemplo, mayor uso de tecnología/aplicaciones o materiales para edad más temprana).
Atención a la generalización de las habilidades prácticas.
Atención a la modalidad/tipo de narración en función de las destrezas del niño.
Otros (incluye la atención a cualquier problema sensorial -por ejemplo, las sensibilidades sensoriales de los
jóvenes con TEA, los problemas sensoriales de los jóvenes con poca visión, discapacidad auditiva, etc.):

#### **Section 4 - Other Sources**

#### National and a few International:

<u>AAP Council on Children with Disabilities</u> (https://www.aap.org/en/community/aap-councils/council-on-children-with-disabilities/)

<u>ADA law with the ADAAA – ADA.gov</u> (https://beta.ada.gov/law-and-regs/ada/)

 A brief intro summary of ADA law with the ADAAA – ADA.gov (https://beta.ada.gov/topics/intro-to-ada/)

American Academy of Pediatrics (AAP) Parenting website, English and Spanish

(https://www.healthychildren.org/English/Pages/default.aspx)

American Association for People with Disabilities (https://www.aapd.com/)

American Association of Suicidology's page of Autism resources

(https://suicidology.org/resources/autism-resources/)

American Association on Intellectual and Developmental Disabilities (https://www.aaidd.org/)

Americans with Disabilities Act National Network (https://adata.org/)

<u>The ARC national</u> (https://thearc.org/) <u>The ARC California</u> (https://thearcca.org/)

The Arc promotes and protects the human rights of people with intellectual and developmental disabilities and actively supports their full inclusion and participation in the community throughout their lifetimes.

<u>Association of University Centers on Disabilities</u> (https://www.aucd.org/template/index.cfm)

<u>Association for Science in Autism Treatment</u> (https://asatonline.org/)

<u>Autism Society</u> (https://autismsociety.org/)

Autism Speaks (https://www.autismspeaks.org/)

Center For Disease Control (CDC), Act Early site, info such as Developmental Milestones

(https://www.cdc.gov/ncbddd/actearly/index.html)

Children's Bureau list of "Disabilities/Special Need Organizations"

(https://www.childwelfare.gov/organizations/?CWIGFunctionsaction=rols:main.dspList&rolType=Custom&RS ID=84&rList=ROL)

<u>The Developmental Disabilities Assistance and Bill of Rights Act of 2000 (PDF in English and Spanish) - Administration for Community Living</u> (https://acl.gov/about-acl/authorizing-statutes/developmental-disabilities-assistance-and-bill-rights-act-2000)

Edutopia: Apps for Students With Special Needs—As School Buildings Shutter

(https://www.edutopia.org/article/apps-students-special-needs-school-buildings-shutter)

Family Voices (https://familyvoices.org/)

<u>Individuals with Disabilities Education Act (IDEA) – ED.gov</u> (https://sites.ed.gov/idea/)

Interagency Autism Coordination Committee - HSS (https://iacc.hhs.gov/)

International Society for Autism Research (https://www.autism-insar.org/)

<u>Lifespan Respite Care Program - Administration for Community Living</u>

(https://acl.gov/programs/support-caregivers/lifespan-respite-care-program)

National Association of Councils on Developmental Disabilities (https://www.nacdd.org/)

National Association for Dual Diagnosis (NADD) (https://thenadd.org/)

National Center for Birth Defects and Developmental Disabilities (NCBDDD) – CDC

(https://www.cdc.gov/ncbddd/index.html)

National Center for Learning Disabilities (https://www.ncld.org/)

National Disabilities Council (https://www.ncd.gov/)

National Disabilities Rights Network (https://www.ndrn.org/)

National Federation of Families for Children's Mental Health (https://www.ffcmh.org/)

Parent to Parent USA (https://www.p2pusa.org/)

<u>Positive Identity Materials - at NADD</u> (https://thenadd.org/materials-for-positive-identity-development/)

<u>Sesame Street and Autism</u> (https://sesamestreetincommunities.org/topics/autism/)

<u>Sibling Leadership Network</u> (https://siblingleadership.org/)

<u>Sibling Support Project</u> (https://siblingsupport.org/sibshops/)

<u>State of the States in Intellectual and Developmental Disabilities Project - University of Kansas</u> (https://stateofthestates.org/)

<u>UCL Centre for Intellectual & Developmental Disabilities Research (CIDDR)</u>

(https://www.ucl.ac.uk/intellectual-developmental-disabilities-research/)

World Health Organization (WHO): International Classification of Functioning, Disability and Health (ICF) (https://www.who.int/standards/classifications/international-classification-of-functioning-disability-and-health)

World Health Organization (WHO): Caregiver skills training for families of children with developmental delays or disabilities (CST), Released March and April 2022.

- WHO CST toolkit providing guidance on caregiver skills training for families of children aged 2–9 years with developmental delays or disabilities (https://www.who.int/publications/i/item/9789240048836)
- WHO CST online version of the training, targeted at caregivers
   (https://www.who.int/teams/mental-health-and-substance-use/treatment-care/who-caregivers-skills-training-for-families-of-children-with-developmental-delays-and-disorders)

#### **National emerging:**

Dan Hoover, PhD., Kennedy Krieger: Interactive Trauma Scale, a web-based measure for children for autism.

<u>Gallaudet University: Deaf and Hard of Hearing Child Resilience Center - working on trauma</u>
<u>resources</u> (https://gallaudet.edu/deaf-hard-hearing-child-resilience-center/)

#### Tribal:

<u>Black Feathers Podcast: Disability Conversations for All - Kansas University Center on</u>
<u>Developmental Disabilities</u> (https://kucdd.ku.edu/black-feathers)

Consortia of Administrators for Native American Rehabilitation (CANAR) - FaceBook page (https://www.facebook.com/canar.org/): They do not have a website. Outside of Facebook, you can make find more information about them and who to email on the Council of State Administrators of Vocational Rehabilitation (CSAVR) - webpage about CANAR (https://www.csavr.org/canar)

Indian Children's Program of Indian Health Services (https://www.ihs.gov/icp/)

<u>Interagency Autism Coordination Committee – some talks re tribal issues</u> (https://iacc.hhs.gov/)

<u>International Society for Autism Research – some tribal</u> (https://www.autism-insar.org/)

Native American Disability Law Center (https://www.nativedisabilitylaw.org/resources)

<u>National Congress of American Indians – Disabilities</u> (https://www.ncai.org/policyissues/education-health-human-services/disabilities)

National Indian Education Association (https://www.niea.org/)

National Indian Head Start Director Association (https://www.nihsda.org/)

National Native Children's Trauma Center (https://www.nnctc.org/)

<u>Understanding Disabilities in American Indian & Alaska Native Communities - the National Indian Council on Aging (NICOA) and National Disabilities Council</u>

(https://www.nicoa.org/programs/technical-assistance-and-resource-center/disabilities/)

#### **Tribal emerging:**

A large Tribal study on resources/navigation of the Tribal funding systems for IDD, from the <a href="State of the States in Intellectual and Developmental Disabilities Project - University of Kansas">State of the States in Intellectual and Developmental Disabilities Project - University of Kansas</a> (https://stateofthestates.org/)

#### **Victim Services:**

"Victims who have disabilities" - SART Toolkit Section 6.6, National Sexual Violence Resource

Center (https://www.nsvrc.org/sarts/toolkit/6-6)

#### **NCTSN Factsheets:**

<u>Children with intellectual and developmental disabilities can experience traumatic stress. A fact sheet for parents and caregivers - NCTSN</u> (https://www.nctsn.org/resources/children-with-intellectual-and-developmental-disabilities-can-experience-traumatic-stress-for-parents-and-caregivers)

<u>Choosing Trauma-Informed Care for Children with Intellectual and Developmental Disabilities: A</u>

<u>Fact Sheet for Caregivers</u> (https://www.nctsn.org/resources/choosing-trauma-informed-carefor-children-with-intellectual-and-developmental-disabilities-for-caregivers)

<u>Trauma and Children with Intellectual and Developmental Disabilities: Taking Care of Yourself</u>
<u>and Your Family</u> (https://www.nctsn.org/resources/trauma-and-children-with-intellectual-and-developmental-disabilities-taking-care-of-yourself-and-your-family)

<u>Understanding Trauma Responses in Children with Intellectual and Developmental Disabilities</u>

<u>and When to Seek Help</u> (https://www.nctsn.org/resources/understanding-trauma-responsesin-children-with-intellectual-and-developmental-disabilities-and-when-to-seek-help)

#### Additional/Random:

10 Differences Between IEP vs 504 (chart) – from A Day in Our Shoes

(https://adayinourshoes.com/difference-504-iep/)

<u>Dynamic Disability By Inês Mália Sarmento</u> (https://www.disartnow.org/journal/dynamic-disability/)

#### Free Big Red Safety Box - The National Autism Association

(https://nationalautismassociation.org/big-red-safety-box/): The NAA is committed to those with an Autism Spectrum Disorder (ASD) who may be prone to wandering off or eloping from a safe environment, and may be unable to recognize danger and/or stay safe. Wandering, elopement, "running" or fleeing behaviors among those within our community not only present unique safety risks, but also create extraordinary worry and stress among caregivers. Drowning fatalities following wandering incidents remain a leading cause of death among those with ASD. As such, the National Autism Association provides direct assistance to caregivers, educators and first responders. The Big Red Safety Box is a free-of-charge toolkit given to autism families in need as a means to educate, raise awareness and provide simple tools that may assist them in preventing, and responding to, wandering-related emergencies.

- free Be REDy Booklet for Caregivers
- free Be REDy Booklet for First Responders
- free Be REDy Booklet for Teachers

<u>Implementing Trauma-Informed Care in IDD Organizations and Systems - The Traumatic Stress</u>

<u>Institute</u> (https://www.traumaticstressinstitute.org/) Their services have a cost (\$), and they also have some information available at no cost.

<u>LEGO - The re-imagined LEGO® Friends characters</u> (https://www.lego.com/en-us/aboutus/news/2022/october/the-lego-group-reveals-a-new-generation-of-lego-friends?locale=en-us&consent-modal=show): Are more representative of the world that today's kids navigate, inclusive of gender, culture, ethnicity, physical traits and abilities, non-visible disabilities and neurodivergence.

'May the 4th Be With You': Baby Yoda Encourages Early Access to AAC - May 4, 2023, ASHAWire article (https://leader.pubs.asha.org/do/10.1044/2023-0504-baby-yoda-aac/full/)

#### PTSD Checklist for DSM-5 (PCL-5) – VA.gov

(https://www.ptsd.va.gov/professional/assessment/adult-sr/ptsd-checklist.asp)

Article on short form of PCL-5 (https://www.ptsd.va.gov/professional/articles/article-pdf/id52290.pdf)

Sensory Smart Parent (https://www.sensorysmartparent.com/): The sites includes their Sensory Checklist "Adapted from the book Raising a Sensory Smart Child: The Definitive Handbook for Helping Your Child with Sensory Processing Issues copyright (c) Lindsey Biel, OTR/L, MA, and Nancy Peske, 2005, 2009, 2018 and beyond For personal use only. To clear permission to use in a workshop or professional setting, contact Lindsey@sensorysmarts.com or Nancy@nancypeske.com.": Sensory Checklist

Social Skills Groups Adapted from Seeking Safety Model for Adolescents and Young adults with Developmental Disabilities and Mental Health Diagnoses

(https://www.aucd.org/docs/AUCD360\_2018/Social%20Skills%20Groups%20Adapted%20from %20Seeking%20Safety%20Model%20for%20Adolescents%20and%20Young%20adults%20with %20Developmental%20Disabilities%20and%20Mental%20Health%20Diagnoses.pdf)

<u>Tailoring Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) for Youth with Intellectual and Developmental Disabilities: A Survey of Nationally Certified TF- CBT Therapists</u>

(https://www.tandfonline.com/doi/full/10.1080/23794925.2021.1955639)

Top 20 Principles for Students with Disabilities: Principles from psychology to enhance pre-K to 12 teaching and learning. (https://www.apa.org/ed/schools/teaching-learning/top-twenty/disabilities)

#### **Wellbeing and Secondary Traumatic Stress:**

<u>CalTrin (California Training Institute)</u> (https://www.caltrin.org/)

- CalTrin Self-Paced Courses
  - o <u>Understanding Compassion Fatigue and Secondary Traumatic Stress</u>
  - o Strategies for Addressing Compassion Fatigue and Secondary Traumatic Stress
- CalTrin Training Archive
  - o Secondary Traumatic Stress and Reflective Practice/Supervision
  - o <u>Trauma, Compassion Fatigue & Secondary Traumatic Stress</u>
  - Organizational Strategies: Addressing Compassion Fatigue & Secondary
     Traumatic Stress

<u>Secondary Traumatic Stress Consortium – free resources</u>

(https://www.stsconsortium.com/free-resources)

<u>Secondary Traumatic Stress: Understanding the impact on professionals in trauma exposed</u>
<u>workplaces - NCTSN Learning Center</u> (https://learn.nctsn.org/)

<u>Southern Regional Children's Advocacy Center – Secondary Traumatic Stress Resources</u>
(https://www.srcac.org/reflect-refuel-reset/)

<u>University of Kentucky Center on Trauma and Children's Secondary Traumatic Stress</u>
<u>Innovations and Solutions Center</u> (https://ctac.uky.edu/projects-and-programs/secondary-traumatic-stress-innovations-and-solutions-center-sts-isc)

Staying Inside the Window of Tolerance: An Advanced Training on Secondary Traumatic
 Stress and Resiliency

<u>Using the Secondary Traumatic Stress Core Competencies in Trauma-Informed Supervision - NCTSN</u> (https://www.nctsn.org/resources/using-secondary-traumatic-stress-core-competencies-trauma-informed-supervision)

<u>Virtual Calming Room - Sacramento City Unified School District</u>

(https://calmingroom.scusd.edu/): Has strategies and tools for students, families, and staff.

**NOTE:** Some things to consider when using mental health or/and wellness, apps or/and online services.

- How do they protect my privacy? Are there steps I can take to protect my privacy?
- Are they ethical in their practices?
- What is the benefit/cost/risk of using them?

#### **Global Frameworks:**

Australia's Disability Strategy 2021-2031

(https://www.disabilitygateway.gov.au/document/3106)

 <u>Easy read version of strategy</u> (https://www.disabilitygateway.gov.au/ads/easy-readstrategy)

<u>Canada's Disability Inclusion Action Plan</u> (https://www.canada.ca/en/employment-social-development/programs/disability-inclusion-action-plan-2.html)

Other versions of plan - Sign language, Braille, audio
 (https://www.canada.ca/en/employment-social-development/programs/disability-inclusion-action-plan-2/action-plan-2022.html#h2.0)

<u>The Foreign, Commonwealth & Development Office (FDCO) UK Disability Inclusion and Rights Strategy 2022-2030</u> (https://www.gov.uk/government/publications/fcdo-disability-inclusion-and-rights-strategy-2022-to-2030)

Research Briefing: Disability Strategies in Wales, Scotland and Northern Ireland – UK (https://commonslibrary.parliament.uk/research-briefings/cbp-9671/)

<u>Sweden – Disability Policy</u> (https://sweden.se/life/equality/disability-policy)

WHO European framework for action to achieve the highest attainable standard of health for persons with disabilities 2022-30 PDF

(https://apps.who.int/iris/bitstream/handle/10665/360966/72wd07e-Disabilities-220523.pdf?sequence=2&isAllowed=y)