

MINUTES

SECAC

February 13, 2025

In Attendance

Jeanne Erdley, Kara Stone, Suzanne Oshinsky, Colleen Sasdelli, Angela Sonnemann, Ann Clapham, Sarah Walter, Allison Casey, Alexa Mitros, Megan Fitzgerald, Lo An Fine, Katie York, Teresa Brewer, Sydney Hasten, Jessica Trimble, Kim Heeter, Carie Sadowski, Aimee Hiteshew, Heather Harrison, Tracy Robertson, Melissa Romano, Andrea Lilley, Diana Krach

Welcome and Information Share

- I. Welcome from the SECAC Board and Introductions
- II. SECAC Proposes changes to the SECAC Board election month to May from June
- III. SECAC Board Elections: All Board positions are Open for elections. Be involved.
- IV. Next meeting on March 6, 2025 - Recognizing, Addressing, and Supporting Anxiety in Students with Disabilities by a Neuropsychologist and Social Worker from KKI schools.

Director of Special Education – Colleen Sasdelli

The budget for next year passed - \$26 million. There were significant cuts...160 positions were eliminated (most in central office).

Presentation – Supporting Behavioral and Emotional Regulation in the Context of Neurodiversity Affirming Care. Presentation by: Sarah Walter, M.Ed, BCBA, LBA and Allison Casey, MS, BCBA, LBA Achieving True Self (ATS)

- I. What is Neurodiversity?
 - a. A view that ASD, ADD and other neurological conditions are natural variants of human neurological outcomes – a natural difference rather than a disorder.
 - b. Each brings strengths in various areas and we benefit as humans from neurodiversity.
 - c. May not always be visible to others.
 - d. Not a one size fits all approach.
- II. What is neurodiversity affirming care?
 - a. Child centered approach
 - i. Allows communication to be validated.
 - ii. Follows child's interests.
 - iii. This is not a straight-line intervention and can be personalized.
 - b. Focuses on strengths of children, rather than flaws that need to be "fixed"
 - i. What skills does your child already have?
 - ii. What skills may your child need and/or are socially significant to them?
 - iii. A child may have a skill, but is unable to and may need help to generalize it.
 - c. Social

- i. Increase socialization and positive interaction with peers.
 - ii. A child may score high socially, but have increased anxiety around social events.
 - iii. Promotes inclusion across settings (school, community).
- III. Assessing Assent
 - a. Assent is knowing a child is consenting to the activity (learning, play, etc.) by showing approval or interest
 - b. Do they gravitate towards the person or item? Is it a positive experience?
 - c. Do they talk about the person or item positively?
- IV. Promoting Choices
 - a. Offer limited options (e.g. "do you want X or Z?") Stick to 2-3 reasonable choices, give options and be open to their input.
 - b. It can be for preferred things or non-preferred (e.g. pick a chore)
 - c. Allow the child to choose
 - d. Refrain from presenting a choice that isn't immediately available
- V. Skill building
 - a. Teach and praise skills
 - b. Reinforce with what is reinforcing to the child Remember: This is different for everyone!
 - c. Break down skills into manageable and achievable steps
 - d. Coach them through disappointment if unable to complete a skill
- VI. Trauma Informed/Compassionate Care Approach
 - a. Validate emotions
 - b. Allow room for emotions, but set boundaries (e.g. "It's okay to feel angry, but it's not okay talk to me that way" or "It's okay to be angry, we just need to stay safe")
 - c. Reserve judgement and use active listening
 - d. Teach emotional regulation that can be used in a variety of environments
- VII. Emotional and Behavioral Regulation
 - a. Consists of impulse control, emotion control, adaptability.
 - b. Modulators of functioning in the social world allow the person to inhibit impulses, manage expression of emotions, adapt to changes in routine, and cope with unexpected changes or differing expectations.
- VIII. Shared Goal – Emotional and Behavioral Regulation
 - a. Typical milestones but every child is different.
 - b. Social significance
 - c. Collaboration with family and across settings
 - d. Benefits of a shared goal
 - i. Learned skills can lead to a calmer home
 - ii. Child can be more engaged at school and other activities
 - iii. Promotes academic growth and inclusion
 - e. Regulation can be different at home vs school
 - i. Co-regulation builds trust and connection
 - ii. Teaches self-regulation
 - iii. Can prevent future escalated behaviors
- IX. Additional strategies
 - a. Use age appropriate communication
 - b. Assume all children benefit from learning age appropriate skills/ curriculum
 - c. Ask the child before sharing information about them
 - d. Don't speak about the child in front of the child

- e. Do not assume lack of comprehension, look for signs of understanding
- f. Be a role model

Self-Advocacy Examples for Kids and Teens

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	Raising your hand to ask a question in class when you don't understand something.
	Saying "no" to someone when you are uncomfortable with doing something.
	Asking for help on a challenging assignment that you are struggling with.
	Sharing your true emotions or thoughts to a friend or family member.
	Speaking up for yourself to problem-solve and get your needs met.

Q & A

- Q. Is it harder to work with older children?
- A. Yes as peer interactions and hormones change.
- Q. What ages do you work with?
- A. Birth to 21; however, with insurance – anyone with an autism diagnosis.

Minutes taken by Kara Stone, Secretary/Treasurer