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**AUTO** AUtistic adults  
Training for new  
Opportunities



# Grundtvig Multilateral Project

**Object** : Final report for the AUTO project – WP3 Pilot testing

**Author**: Association Blijdorp Romania

## Report on Pilot testing in frame of the project AUtistic adults Training for new Opportunities

Grundtvig Multilateral Project AUTO “AUtistic adults Training for new Opportunities”  
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ASSOCIATION BLIIDORP ROMANIA

ANCA RÎSNICU  
LUCREȚIA IVAN  
MANUELA POHOAȚĂ  
IONEL IVAN  
ANISIA SIMIONOV

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## AIM OF THE PILOT TESTING

*The aim of the pilot testing is to test some of the methodologies described in the handbook created within the project. In the frame of the project AUTO – Autistic adults training for new opportunities was created training for the target group to enable a vocational integration and to improve the sustainability of successful integrations. It was composed training for five month with approximate 15 hours training per week.*

*For the design it was used a mixture of different methods coming from each partners experience but also methods recommended by the other partners of the project. From the research made at the beginning of the project was made some recommendations for the test run programme (please have a look page 94 research report). The aim of the pilot testing was to find out what worked good for which target group and to develop a test kit for further trainings also.*

*The main aim of the project is to support young adults with a diagnosis of an Autism Spectrum Conditions (ASC) to learn and develop skills to prepare them for employment. The partners have focused to develop their skills in the following areas: communications, independence, social skills, applying for work, interviews, identifying strengths, explaining their ASC to employers, gaining confidence in the workplace.*

The WP leader is Romania, Association Blijdorp Romania.

## OVERVIEW OF THE PILOT TESTING IN GENERAL

According the application of the pilot testing, it last one year and involved all the project partners who tested the path on a group trainers and adult autistic learners.

Each partner recruited 10 autistic adult learners and reported about the testing results related to the three steps and the related duration:

1. Organization of the Pre-training session (after the last year of secondary school), designed to analyze individual patterns of behavior in order to define a custom path of guidance (about one month);
2. Organization of Training session focused on soft skills and cross through innovative methods and success cases coming from the partners experiences, like the mountain-therapy (about two months);
3. Training sessions on the job in which students have the opportunity to be gradually engaged in the work context (about one month).

The Romanian partner has coordinated as lead partner the pilot testing, supporting by virtual meetings each partner during the process, in order to solve problems and give suggestions about the tutoring activities.

The WP3 had following tasks:

1. Recruitment of 4 trainers inside the partner organizations and management of a training moment articulated in 10 hours of virtual conference where the project partner experts will show them how to implement the path designed in the Hand-Book manual (each expert about the part of his competence);
2. Recruitment of learners: each partner will recruit 10 autistic adult learners that are going to finish the secondary school. The participants will be recruited through the usual recruitment channels of the partners involved: internal patients and networks, websites, partner organizations such as training centres, schools, associations.
3. Six months pilot running: each partner, with the support of the WP leader, will schedule and test the whole process.
4. Reporting: each partner will report about the three steps results achieved and problems met.



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At the beginning of the pilot testing the leader of the WP3 have prepared a package of tools to use for the reporting the activities. Each partner has come with suggestions and these materials were agreed as tools for the pilot testing.

WP leader have prepared an activity plan with different steps to follow, this structure of the activity plan having as aim the achievement of the results of the project.

The tools use in the pilot testing you can see it annexed at the end of the report.

## 1. ITALY REPORT

### 1.1 Overview of the pilot testing

The Italian team has organized the training course from the beginning of November until the end of February. The students were divided into 2 groups of 5 according to their individual characteristics and tried to join the guys who could work better together and each group had ad coordinator two trainers. The training course was composed by weekly sessions: each week had a main topic for the workshops: the participants could attend on Monday and on Wednesday or on Tuesday and Thursday workshops.

The themes of the workshops were: desires and expectations, communication and listening, social Skills, flexible thinking, intrusive thoughts, Anxiety management and self-control, Self-awareness: (strengths and weaknesses), awareness of my Autism and self-presentation, Interpersonal relationship and social skills at work, planning for employment (presentation of the possibilities). In the last part of the course they went out in the city in order to exercise the social autonomies.

At the end of this part they have evaluated the skills and the work abilities, through vocational questionnaires and we also reflected on fears and doubts. The last lessons they have left for the confrontation in the group in order to choose the most suitable job for each participant and to prepare to the first contact with the working environment.

For the job coaching they have searched in their country the companies that have placed people with disabilities and selected a greenhouse, a supermarket, an office of graphics, a school canteen and an auction house.

They contacted the company and explained the project, also leaving the material of the dissemination. The trainers went in order to assess the suitability of the work place and the welcome of the staff and finally the students went to know the new environment.

For a better result was organized a visit for the families to know the companies where will work their children. Between the companies was selected a car wash, too, but they realized that it wasn't a good choice and it's not suitable for the students because there were too much noises and work rates very fast.

The students have visited the real work place after the "theoretical part" and there have also meet the colleagues. This stage of "job training" consisted of a work experience placement. During this part, they have supported the students to find a work experience for 1-2 days a week; this condition might vary depending on the individual and the work places availability. It were identified the mentors in the work places, in order to support the students. The trainers were stand together the participants during the stages to see how they are getting on and help them settle in, discuss any issues.

This period of the job coaching was from 2<sup>nd</sup> of March until late 30<sup>th</sup> of April.

The training course was concluded with several meetings, aimed to raise the emotional experience that this experience has left in each student.



## **1.2 Training the trainers**

For the pilot testing the Italian partner have involved four trainers specifically educated in matter of ASD: they also collaborated to develop the didactic material for the Handbook. They studied the profiles of the students and the content of Auto Project. The methodology adopted is partially already used by the trainers, since it is the same used within ANFFAS programs.

## **1.3 Participants at the pilot testing**

### **Lorenzo**

His diagnosis is ASD, he has 24 years old, understands the verbal language and has a good vocabulary even if characterized by simple sentences and echolalia. He has a mild character, there is no impulse control. The level of attention is low, there are restricted interests. He appears adequate to perform simple tasks. Lorenzo attends secondary school with teacher support. He is partly in the therapeutic rehabilitative Centre of ANFFAS.

He participated with enthusiasm to the course and to the stage job at the Auction House; his tasks were placing of the objects of the auction with the proper numbers and writing the price on the labels. He had a very good cooperation with his tutor.

### **Andrea**

His diagnosis is ASD. He's the younger student of the group and he's 18 years old, he attends secondary school with teacher support. He understands the verbal language and has a good vocabulary; the cognitive level is not brilliant, he has restricted interests and the level of attention is low. He has no behavioral problems. Andrea attended to the "job training" in a greenhouse. His tasks in the green house were watering the plants, move the pots and sacks of potting soil. He is shy and often he appears unmotivated but during the job in the greenhouse he smiled a lot and he was happy.

### **Luca**

His diagnosis is Asperger Syndrome. He is 24 years old, he has good adaptive skills, a good cognitive level and a very good vocabulary. He has very restricted interests (above all comics) and good skills of using computer. He completed secondary school without special education teacher and obtained a certificate in a specialized school in drawing comics in Florence, which he attended for three years and where he went by train alone. He has difficulty to tolerate changes, difficulty to get in touch with people. Luca attended to the "job training" in a graphic studio. He is very happy and he hopes that he will be able to work. According with the tutor, he decided to stay at work more hours without trainer. His task in the office was using of graphics programs for image editing.

He has his personal psychologist to support him.

### **Francesco G.**

He is 25 years old and he has a diagnosis of ASD associated with a D.O.C. He has an obsessive thought, and tendency to loss of impulse control. He's talkative, and in the relationship with him you need to restrict his words and his thoughts with simple and coherent directions and he has difficult to manage and modular distance with each other. He has a good level of attention but he easily loses concentration. The cognitive level is quite good but susceptible to large fluctuations for anxiety component. He understands the verbal language and has a very rich good vocabulary. Francesco attended to the "job training" in a greenhouse and he had a good cooperation with his tutor. Francesco is very satisfied of the workplace and his tasks in the green house were watering the plants, move the pots and sacks of potting soil.

He has his personal psychologist to support him.



## **Margherita**

She is 24 years old and she has an ASD diagnosis. She is highly anxious, has difficulty managing relationships. She has stereotypes, avoidance of eye contact, restricted interests. She has difficulty to tolerate frustration and tendency to loss of impulse control. She was very motivated to attending to this course and she participated in the first part of it. Then she could not stand to join the group and to talk about the future and her growth and after some behavior problems she asked to no longer participate. It 'was a success for her to be able to put into words her difficulties.

She is daily in the therapeutic rehabilitative Centre of ANFFAS.

## **Jennifer**

She has an ASD diagnosis and she is 19 years old. She understands the verbal language and have a simple and vocabulary, characterized by simple sentences and echolalia; the cognitive level is not brilliant, she has restricted interests and the level of attention is low. She has no behavioral problems. She attends secondary school with teacher support.

Jennifer attended to the "job training" in a school canteen, she was quite concerned at the beginning, then she became quiet and during the working time she was truly very satisfied of the job, precise and methodical. In the canteen she was setting the table, and she filled the jugs with water.

## **Sara**

She has an ASD diagnosis and she is 22 years old. She understands the verbal language and have a simple and vocabulary, characterized by simple sentences and echolalia; the cognitive level is quite low. She is very echolalic.

The behavior is generally appropriate but she's she tending to not respect the social distance She's able to respond appropriately to practical tasks. There are sometimes difficulties to tolerate frustration. Sara attended to the "job training" in a school canteen, she was quite concerned at the beginning and she was interested of children and teachers.

In the canteen she was setting the table, and she filled the jugs with water, then she cleaned the dishes from leftover food and brought the dirty dishes in the kitchen.

She is daily in the therapeutic rehabilitative Centre of ANFFAS.

## **Beatrice**

She has an ASD diagnosis and she is 22 years old. She understands the verbal language and has a good vocabulary. The cognitive level is border and the level of attention is quite good. She has an Identity disorder (she identifies herself as a male). She has a good adaptive behavior but she is distrustful in interpersonal relationships and has repetitive thoughts and restricted interests.

Beatrice attended to the "job training" in a local supermarket and she had a good cooperation with her tutor, even if she is often very touchy. Her tasks were placing the merchandise on the shelves as indicated by the labels and control the correct disposal of foods on those.

## **Francesco L.**

He is 21 years old and he has a diagnosis of ASD associated with a D.O.C, he also has a severe anxiety, obsessive thoughts often overwhelming. He has a low level of attention and he easily loses concentration. The cognitive level is in a border area but susceptible to large fluctuations for anxiety component. He understands the verbal language and has a good vocabulary. He is distrustful in interpersonal relationships and has repetitive thoughts and restricted interests.

He attended to the "job training" in a local supermarket and he had a cooperation with her tutor, even if he was often quite confused by his obsessive and intrusive thoughts. His tasks were placing the merchandise on the shelves as indicated by the labels and control the correct disposal of foods on those.



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## **Alessandro**

His diagnosis is ASD and he is 24 years old. He has good adaptive skills, a cognitive level about average and a good vocabulary. He has very restricted interests. He is very pragmatic, motivated, able to do anything if well trained.

He has difficulty to tolerate changes. He attended to the “job training” in a local supermarket and he had a very good cooperation with his tutor. His tasks were placing the merchandise on the shelves as indicated by the labels and control the correct disposal of foods on those. He became able to prove that mistakes could not be serious, while working, you only need to correct the mistake. Alessandro has thus improved his capacity to tolerate changes. He was truly very satisfied of the job, was precise and methodical.

### **1.4 Recruitment and Assessment stage**

During the assessment process it was analyzed individual patterns of behavior and relationship, of young adults with ASD and AS and mild or medium Mental Retardation, during the last year of secondary school. (From 18 to 30 years old).

The first step consisted in the identification of people with ASD and AS who have those characteristics, together with the Department of Mental Health ASL1 Massa-Carrara and with the families, in order to present AUTO project and offer them the proposal of the course.

The assessment utilized some methods:

- 1) The Psychologist observed people with disability in different moments of life (school, center of rehabilitation, etc.) to notice the perception of personal significance and satisfaction.
- 2) The psychiatrist during an interview inquiries into behavioral problems and psychopathological aspects.
- 3) The Psychologist assessed the functional level of the person with ASD using the following tests:

#### **a) Vineland Adaptive Behavior Scales**

#### **b) TEACCH Transition Assessment Profile (TTAP) — Second Edition**

It is a newly titled and improved revision of the *Adolescent and Adult Psychoeducational Profile (AAPEP)*. This comprehensive test was developed for adolescent and older children with autism spectrum disorders, particularly those with transitional needs.

#### **c) The Quality of Life Questionnaire (QOL-Q)**

Quality of Life (QoL) is an internationally validated framework developed by Dr. Robert Schalock. It is used widely to evaluate the quality of life of persons with intellectual disability (ID).

**d) The Beach Center Family Quality of Life Scale (FQOL Scale)** assesses families’ perceptions of their satisfaction with different aspects of family quality of life. The focus of the original development of the FQOL Scale was on families of children with disabilities ages birth through 21.

#### **e) Specific evaluation sheet**

It is specially crafted to identify the pre-conditions for job orientation. It contains five paths to guide the job orientation toward a specific area such as gardening and agriculture, kitchen and canteen, secretary, repair shop and storage place.





All the participants were collaborating and anxious to start up for the training course. Families were very enthusiastic about the opportunity of training for their sons.

## **1.5 Stage 1**

At a first step in the testing was involving students in interaction which worked well: watching movies and slides was in fact the starting point for discussion and clarification. The students were interactive each other and participated with interest.

## **1.6 Stage 2**

During the discussion of the topic planned in the training course the Italian partners have found difficulties to talk about anxiety and awareness of the diagnosis. Some students have an individual space in which they face these issues with a method and they did not want to share with the group their emotions. The trainers respected their wishes and they faced these topics speaking generally and focusing on strategies for solving problems in the workplace.

During the final part of this stage the students have visited the work places and they were enthusiastic. Their families were very happy, too.

In the last part of the course it was organized a visit in the city in order to exercise the social autonomies (bar, local transport).

At the end of this part the trainers have evaluated the skills and the work abilities, through vocational questionnaires and also reflected on fears and doubts. They have devoted completely the last lessons to confrontation in the group in order to choose the most suitable job for each participant and to prepare to the first contact with the working environment.

The trainers searched among the companies that have placed people with disabilities. It were selected a greenhouse, a supermarket, an office of graphics, a school canteen and an auction house.

The company were contacted and explained to them about the project, also leaving the material of the dissemination. The trainers visited the companies in order to assess the suitability of the work place and the welcome of the staff and finally the students went to know the new environment. Separately even families were accompanied to know the companies.

During the “job training” Stage, the trainers support the students to find a job experience for a few hours in the week, according to the individual and to the availability of the companies. We identified the mentors in the work places, in order to support the students and the trainers stand together the participants during the stages to see how they are getting on and help them settle in, discuss any issues.

## **1.7 Stage 3**

People with autism have difficulties in adapting to changes and unexpected, in the workplace these elements are present, the students with a rigid thinking more pronounced had some difficulties caused by this detail but perhaps the chance to experience a work environment could have help the students to behave more adult. This project has been an important opportunity for adults with ASD to get into the labor market, even if it was very short. The Italian partner think that it should be important to continue the project for more time and they would like to increase the cooperation more with the companies in order to make real change in our territory.



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## **1.8 Comments on Autism and Employment**

The Colleagues who supported students during the job training were helpful people with very pronounced human qualities. They never met people with ASD before, and after this experience they understood that people with special needs could have personality and ability as every employed. The presence of the trainers during the job training was fundamental and necessary, especially because the employment period was very short, but for some students the possibility of a project of employment may be realistic and for a student, there is the proposal by the company to continue with job training in collaboration with local institutions.

According to the individual level of functioning the students found more or less difficulties for the tasks given by the colleagues, but the trainers were really surprised that even if the students who appeared quite unmotivated, in a work environment became more active. The students who have psychiatric problems (obsessive compulsive disorder, intrusive thoughts) associated to ASD needed more supervision by trainers, simple tasks and short working times.

## **2. AUSTRIA REPORT**

### **2.1 Overview of the pilot testing**

The pilot testing in Austria has started on 1<sup>st</sup> of December 2014. Before of the test run the trainers have discussed which target group will be involved in the project, thus they have contacted Austrian organizations which are working with people with Autism and asked them what the best support for them would be. The target group selected was medium handicapped people, all of them between 17 and 35 years old.

As a solution in case of a drop out, the trainers have decided to recruit 12 participants instead of 10 as was written in the project. To participate at the pilot testing, all the participants were evaluated and invited for a first together meeting doing some research what they expect and what kind of tools are welcome and others not. The parents or responsible relatives were invited for a meeting for their opinion and to find out more information about the participants.

The group of the 12 participants was dividing in 2 groups with 6 beneficiaries and the programme was organized on two maximum three days a week to give enough spare time and relaxing time between the sessions

### **2.2 Training the trainers**

The trainers chosen for the pilot testing are from Die Querdenker staff and were involved in the project from the beginning. They knew the project, the development and the handbook and because of this it was not necessary to organize something special. The general planning of the testing they created in a two days project planning meeting with all involved staff members. They planned the general frame of the training and the detail planning was made from week to week.



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## 2.3 Participants at the pilot testing

**Denise** is 21 years old; here interest was to become a hairdresser; her main problem is the social interaction and she has to be trained in this field a lot. Her intellectual capacity is a little bit lower than the average. Finally she found an apprenticeship place in a small cosmetic salon to become a professional cosmetician.

**Marian** is 35 years old; his interests are still not very clear and he was not able to decide a special programme; the trainers want to continue working with him and help him to do this after the project; they are optimistic to reach the target in a single counselling process.

**David** is 28 years old; his intellectual performance is a little bit lower than the average; also he has some vocational impairments; beside this his social interactive skills are needed to be improved; his interests are in working with media and designing on the computer; he did some short internships and finally it was possible to find an apprenticeship place in a big printing company.

**Vanessa** is 23 years old; beside her basic diagnosis she has a lot of other impairments; her other diagnosis are adiposities, self-harming, social disordered behaviour and others; she is interested to work in an office and in the project the trainers were able to realize this; beside the professional training programme the trainers organized some other supporting trainings for her like ergo therapy, psychotherapy; she started to do her apprenticeship training in the administration department of a dance school.

**Valdrina** is 23 years old and is coming basically from Kosovo; her impairments beside Autism are social interaction and self-harming; she has a lot of bad experience from Kosovo what she is still suffering off; her dream is to work as a sales agent in a trendy boutique for clothes. In the project it was found a possibility for her in a shop for used clothes for kids and juveniles and she is absolutely happy there; for the moment she is not working that much with customers but we will see.

**Natascha** is a very intelligent young woman who have 25 years old; her additional problems are a light version of Bulimia, self-harming and a lot of missing skills in social competence; the trainers worked a lot on this points; her idea is to work in a graphic & design studio; it was organized some short internships and the feedback was very good; the trainers found one studio where it was possible to identify one mentor taking a special responsibility for her; also it was organized some short inputs for this person and also for others from other companies to prepare them a little bit for our users.

**David** stayed all the training but unfortunately it was not possible to find fitting offers for him; his problem is a kind of aggressive behaviour after frustrating social interactions; the trainers were able to organize some ongoing trainings for him but unfortunately it was not possible to find a workplace for him; they will continue to work with him in a close collaboration with his supporting network.

**Matthias** is a 28 years old man with high intellectual possibilities but low social competence; he has also some ongoing drug problems which are complicating the situation additionally; he want to work as a photographer and the trainers were able to organize an internship for three weeks but unfortunately the company said no at the end; they will continue to look for a workplace in this field for him.

**Jutta** is a 33 year old woman with a terrible abuse history; her idea is to work as a supporting person in the frame of a catholic community in Linz; so the trainers developed together with the staff from there what kind of skills and knowledge is needed and from this information they gained a training programme for her what she is doing no.



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**Simon** is a 19 years old boy with bit low intellectual performance; he has very low learning capabilities and also bad experience from regular school; his idea is to work in the frame of organizing and realizing events; the trainers found a company which integrated him in its team in a very nice way and from now on he is doing special jobs on big events; it seems not possible to do the full professional training programme to become an event technician but this is no problem for the company; they will keep him in the fields he is able to do; for example he is very good in taking care of the deposit of all technical units.

**Andreas** is 29 years old man with a low intellectual performance; also his social competence is very weak and so the trainers worked on developing skills for independent living; his dream is to work with animals and they found a farm where he can do this; he is taking care of the animals, is supporting the people there in the daily procedures and he is also living there since a period of testing.

**Anna** is a 26 years old woman with analphabetic problems and a massive social disorder in behaviour; for her the trainers found a part time job in a social firm doing textiles and assembling; she is working there for 20 hours a week and this is the maximum for the moment it seems; parallel the trainers were able to organize therapeutic support for the behaviour problems with ergo- and psychotherapy;

## **2.4 Recruitment and the assessment of the participants**

For the assessment we contacted big Upper Austrian organisations working with people with Autism on all levels. Also we contacted a big group job coaches. We presented the project and the aim and approach and we invited them to send beneficiaries. In total 18 people were sent and in general all of them would have been able to take part but as we decided we chose 12 of them. We organized interviews with the users, their families and with their professional surrounding. Then we decided in the team whom we will take and whom not. As I wrote in a newsletter the rejected 6 and some others will take part in training from September on. So we used no test because they are all tested a lot, we just talked with them and their trust persons and then we decided based on this, and we are still happy with this procedure. One point people said they are afraid to do a long assessment procedure with a lot of test s and then being rejected again.

## **2.5 Stage 1**

As a first step the Austrian partners didn't do any specialist tests and assessments and they believe that it was a good decision. They staid from the beginning in a close contact with their networks and used these networks also threw the full training and continued it after the training. People were really happy about this procedure. Also the invitation at the beginning to say what they want and what they not want in relation to the programme was surprising for them, because normally everything is fixed and decided from others. The decision who is in and who is out was done in the team and in a close contact with the professional surrounding of the users. The users which didn't had a place in the first round will participate in the shorter version of the training in autumn.

## **2.6 Stage 2**

The trainers in general have developed a very sensitive and soft programme. They respected to start with 12 separated islands and they tried to combine these islands in a process of 5 month. From this side it was very good to do just 2 or 3 days per week and to have in this system a longer period of training. With this duration it was really possible to develop some relations and a social network between the users. Also for the process of



vocational rehabilitation and integration it was good to have such a long period because the users worked also at home in the spare time, discussed with their families and so on.

The main methods used:

1. My expectations – my concern – my anxiety (first step single, second step small groups – third step plenum; discussion of the points the users announced).
2. Anamnesis (different interviews with the users, their relatives; collection of medical data and documents; collection of certificates; introducing the family and the social network).
3. The line of my life and the line of my jobs (intensive reflection of all stages they passed in private and in business life till now; what critical situations they already passed and what kind of competences they gained through passing this critical stages; why something is good and why something is bad; what are / were my feelings in these period; lessons learned).
4. Compass of talents (a professional questionnaire to help users to see their talents and to interpret them).
5. Balance of competence (a huge questionnaire to find out the soft skills of the users).
6. Freedom (what is freedom for me, what supports me to be free and what is combating freedom in my life; how does freedom feel like?)
7. What is it what I really want to do (intensive coaching in single and small group sessions; what I want to do and why I want to do this; what will be the impact; is it my decision or others; .....).
8. Meditation ( get in a close contact with yourself with using relaxation tools; music; soft mattresses on the floor; guided meditation to feel where the heart beat is coming from and where the real wishes are waiting).
9. My personal approach, my personal rule book (after the meditation answering some structured questions to gain the answers).
10. Analyses of potential (collecting all the information and setting them in relation; interpretation of results).
11. Establishing peer groups (a first step in socializing and being prepared for the time after the training).
12. Agora for me (market for ideas for me from my side, from my colleagues, my professional surrounding and my social network; a fair of results and ideas).
13. My life in five years (dreaming and thinking how things will be).
14. Group training of social competences (reflection of my behaviour, discussion and recommendations from professionals and other users; in vivo trainings).
15. Arguing groups (being prepared for concerns and questions from my surrounding).
16. Geo-caching (outdoor pedagogic).
17. Vocational orientation (doing test in relation to interests, work on job profiles, using RIASEC system to start the process of orientation; video studies; reading; interviews with professionals).
18. Laboratories (organizing job challenges in special for these prepared situations in a protected surrounding).
19. Short internship (checking theory based decision with real situations in real companies).
20. Mentoring (identifying mentors in future collaboration companies, train them, create trustiness, develop relationship).
21. Reflection (sessions to reflect passed actual situations).
22. Job coaching (assisting at workplace at the beginning to secure the situation, reduce fear).
23. Fishnet (what I leave in the seminar and what I take with me).
24. Ongoing coaching (how to continue with counselling, rhythm, design).



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## **2.7 Stage 3**

At this stage the trainers realized the Austrian definition of job coaching and also the standards, so as trainers spent full days with the users on their future workplaces to prevent drop outs, to secure the situation, to prevent mistakes, to train the users for several challenges at the work place, to attract the situation to future employers, to show solutions, to prepare the workplace, to prevent prejudice, to strengthen the users, and more of this).

So it was created tailor made solutions for users, some needed more some less and others' didn't wanted to see the trainers on their work places. The problem was at this stage that the trainers consumed a lot of working days but as it can be seen in the results it was a good investment.

## **2.8 Comments on Autism and Employment**

First is to say yes it is possible. In this period it is more difficult because the unemployment rate is also high in Austria and especially for people with special needs it is extra difficult, but yes it is possible. There are employers like this challenge and others close the phone when the trainers are calling, so it was used their existing contacts to find places for them.

They got more or less the same results and experience which the trainers have with other groups which are suffering of a lot of prejudice rumours and fairy tales. Often people are surprised about the performance of the users, their potential, their friendliness and their competences. A lot of people have in mind pwd are for nothing and they don't have talents and capabilities, so it is always a surprise to see what people are able to do. When it is able to develop a relationship at the new place then there was also a lot of support. So the trainers used the social interaction as glue for emplacement.

The Austrian partner had participants which were able to do the self-marketing by them self and others needed a lot of support and for others they did it.

A diagnosis is just a diagnosis and not always a not changeable verdict. It is just to use the right tools and the right approach for the right people, then not everything but a lot is working.

## **3. ROMANIA REPORT**

### **3.1 Overview of the pilot testing**

The Romanian partners have started the pilot testing on 24 of November, but before that was the period for the selection and evaluation of the beneficiaries.

Their evaluation was made in 3 steps:

1. Recruitments of the participants
2. Evaluation of the parents
3. Evaluation of the beneficiaries

The participants were selected based on the data base of the Center Blijdorp and also after different discussion with the doctor's with whom the Association Blijdorp Romania is collaborating.

The families who agreed to participate in this pilot testing were in their turn evaluated, the time for the evaluation was 1hour/family. This evaluation had as objective to deliver the information about the behaviors and the development fields of the participants which are the most affected by the autism, also the



questionnaire of the evaluation offered the image of the abilities of the youngsters on all the levels of their personality through the parents.

By organizing this evaluation of all the family, the trainers could find out the weak and the strong points of each participant, both outside the comfort zone and inside the family.

The programme of the pilot testing lasted 6 months from 24<sup>th</sup> of November till 24<sup>th</sup> of May.

### **3.2 Training the trainers**

The trainers involved in the pilot testing are from the staff of Blijdorp Association and they have been involved from the beginning of the project. They have also worked for the research made by each partners and participate to the others WP in the project. The staff involved has experience in this field; as a professional they are psychologist, physiotherapist, and trainers.

### **3.3 Participants at the pilot testing**

**Cibu Ștefan**, he is registered with the Day center for adults "Blijdorp - O nouă viață" from 22/10/2012, diagnosed with Asperger syndrome and epilepsy. He graduated 12 classes with adapted program.

After the interview we obtained following information:

- he has deep isolations period of time when he disconnect from the present, lack of interest /rigidity for activities even the ones he used to prefer. He needs constant supervision because of the gravity of his epilepsy seizure.
- regarding the problems she faces outside the house the people around noticed his particularities, especially during his stereotypes. Because of lack of information about autism, at times the work with the institutions might be difficult. The family didn't reject him but they don't keep in touch because of the distance, they lives in different areas of the country. The visits to friends are rarely because Stefan's isolations moments during their visits.
- he doesn't like to go in new places and if he goes for an event he won't stay until the end. He has a friend that he tries to maintain her friendship. He can't go to do shopping because he can't understand the role and value of money.

**Adomnicăi Alin Cristian**, He is registered with the Day center for adults Blijdorp from 05.08.2002, diagnosed with autism, severe mental retard, IQ<20. He is in the 9<sup>th</sup> class/year, home education.

After the interview we obtained following information:

- Cristian doesn't respect the interdiction, is very rigid, rarely hetero aggressively. During the time he is in the day center he follows the rules while at home he refuses to comply with the house rules. He has tendency to isolate himself including during the family meals.
- regarding the relations with the institutions at times the relation might be difficult, because of lack of information about autism.
- in new spaces he shows a good behavior but he doesn't detects the danger and don't avoid it therefore he needs permanent supervision. At home, he doesn't socialize; he chooses to go in his room to satisfy his interests, such as photography and to play games on the computer. He has no friends.

He doesn't understand the role and value of money.

**Dziubinschi Francisc Alexandru**. He is registered with the Day center for adults Blijdorp from 27.10.2008, diagnosed with epilepsy with degradative discordant elements dissociative type, severe mental retard, hebephrenic schizophrenia, conform of the permanent certificate for people with special needs who needs



special social protection, number 1588/27.02.2002 given by Territorial Stat Institute for People with Special Needs, Suceava.

- he is very reluctant to any change, minimal level of practical skills.
- the family says that they didn't face any problems in the society with Francisc.
- În new spaces, Francisc stay hooked of familiar people that will escort him. He has no friends. During holidays he visits his grandmother. He understands the concept "to buy" but he can't do simple mathematics operations to be able to pay and receive the right change.

**Hurjui Vlad**, He is on the waiting list for the Day center for young adults "Blijdorp - O nouă viață" since 29.03.2009, diagnosed with infant autism grafted on medium mental retard, dissociative syndrome, behavior problem. He is a student in the 9<sup>th</sup> year to a special school "Centrul de incluziune școlară Sf. Andrei", Suceava. At home he has individual sessions with a therapist.

- he needs permanent supervision from an adult, his behavior is not appropriate in the society; he cannot finish a simple house chore.
- the family will not go out visiting friends and family as often because of his inappropriate behavior outside the house, and we only get the visits of our parents and main relatives. The parents are not happy with the fact that because of the law their child diagnosis was changed from autism to discordant syndrome in order to receive his financial support to buy his treatment. The costs of the individual session with the therapist are high and he doesn't get any financial support from the government. The parents will like to register their son with an institution who provide occupational workshop for people with special needs like their son.
- in new spaces, the family avoids taking him because of his inappropriate behavior. Depending of his mood, he will accept to be involved in different activities but the activities must be done step by step and with an adult support. He is facing problems because he is not able to verbalize his needs. He has no friends.

**Franciuc Emanuel**, his diagnosis: infant autism. He was also diagnosed with severe mental retard with behavior problems schizofreniform type, disorganized schizophrenia. He didn't follow any form of education.

After the interview we obtained following information:

- he needs permanent supervision. He is not able to detect the danger that may occur outside the house (he doesn't stay away from the traffic/cars, leaves home by himself; he is fascinated by drainage leads in the road and the well). His moods changes all the time. He has a compulsive behavior regarding tidiness. He is autonomous regarding satisfaction of personal needs.
- in general, he is accepted by the people from their community but the outsiders are reluctant in his presence ( people move away and just watching). The family communicates well with the staff from the institutions they get involved with.
- outside the house he needs to go always with somebody he is familiar with and he is dependent emotionally therefore he needs constant supervision.

He has no friends; his sibilings are involving him in activities and socialize with him

**Răgăzan Carmen**, based on the medical letter released by this doctor her diagnosis is schizophrenia grafted autism emotional dissociation, disorganized behavior, ideo-affective discordance, Psychotic configuration delirious-hallucinating, medium mental retard, IQ=42-44, GAFS= 44-46 . She graduated 12 classes of a local high school.

- Carmen doesn't communicate with her family. She is often silent and nervous therefore she prefers to be left alone. She may be verbal abusive sometimes. She needs to be permanent supervised because she follows the impulse to go out without taking into consideration the danger. Also she loses interest very quick in doing things.





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- occasionally some people will complain because of her behavior. People are reticent to help them when asked.
- In new spaces, she is socializing mainly with children because she is very suspicious of the adult words. At home, she is socializing well with her mother but avoids her father's company apart the time when she needs to ask him something. Her mother says that she has a good relation with her elderly brother but he is not in the country at the present moment. She goes every Sunday to the local church and has a good relation with the priest. With the rest of the family doesn't have a good relationship because the relatives cannot understand her behavior and her rhythm to do things. She doesn't have any friends and with her female cousins doesn't keep in touch and Carmen thinks she is superior to them (recording to what the mother declared). She knows she has to pay in order to purchase a product but she cannot understand the value of money.

**Borza Alexandra**, she is registered with the Day centre for adults Blijdorp from 02.09.2002, diagnosed with severe mental retard with partial development of language, IQ<30, autistic elements. She graduated 9 classes, home education.

After the interview we obtained following information:

- She arranges obsessively the things in the house, rare mild aggressive manifestation towards the dad, irascible and agitated before her monthly menstruation.
- The family has no problem with the community and the institutions.
- In new spaces she doesn't behave appropriately, tendencies of isolation, communicates minimal nonverbal. She has no friends.

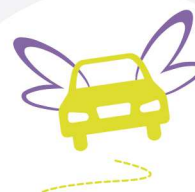
**Gălbău Sebastian**, he is registered with the Day center for adults Blijdorp from 05.08.2002 and he is diagnosed with autism, social-emotional retard. He is in the clase IX- home school.

After the interview we obtained following information:

- he needs additional information to respect an interdiction, refuses educational activities at home; he has a real fear regarding animals especially dogs. He can't understand the role and value of the money therefore he is not able to do shopping/buy things for himself.
- a part of the friends stopped the contact with the family because of Sebastian's behavior. It is difficult to have a good relation with the main institutions (from the social field) because of lack of knowledge of the staff regarding autism and the problems the people have to face it.
- In new spaces he goes often as the parents took him out a lot but he needs information about what is going to happened. He doesn't have any friends in the real meaning of a friend but he is engaged socially with his brother or his colleagues in the day center (encouraged doing so, most of the time).

**Gheorghian Cristian**, he is diagnosed with paranoid schizophrenia, autism, dissociation intrapsychic based on his medical letter. He graduated a trade college "Centrul Școlar Suceava" and he is also qualified as a masseur technician.

- Cristian refuses to work with the family when he is not feeling well, he isolated himself and he is shy outside the house. He wishes that his family will identify a female partner for him as he doesn't want to go out and meet a female friend. Last year he was diagnosed with depression and he attempted to take his life because he didn't have a girlfriend. The client complains to people that he is desperate to have a girlfriend and at times he threatens people that he will suicide because of that fact.
- Because of his inappropriate behavior during his childhood, some relatives refuse home visits and also don't invite them in their house. The family finds difficult the fact that he doesn't get support to find a job from the authorities. The possible employers don't give him a job because of his certificate for people with special needs.



In new spaces avoids to go but he goes alone to do shopping as he leaves with his grandmother and mother who needs his help to do some things. He has no friends. At home he is fine, has his own routine and he manages himself.

**Ciurariu Sebastian**, the young man benefited from adapted therapy with the Day Centre for children Blijdorp, 10 years ago. He was diagnosed with Asperger syndrome, autism. He is a student in the final year of a local high school.

- he is very stubborn, doesn't respect the interdiction. Also the mother has to repeat few times for him to do a task.
- the family don't have problems, wherever they go the child is accepted in new spaces and they receives the support from the institutions.
- he goes rarely in new spaces, is able to buy products following a list and knows the value of money and how much change he needs to receive. In general, he behaves appropriate in the society. He has two friends who come from a disorganized family and he never refuses to go out with them despite the mother's interdiction at times.

### 3.4 Recruitment and Assessment stage

In this period of the selection and evaluation of the participants the Romanian partners have worked on this in 3 steps:

4. Recruitments of the participants
5. Evaluation of the parents
6. Evaluation of the beneficiaries

1. The participants were selected based on the data base of the Center Blijdorp and also after different discussion with the doctor's with whom the RO partner is collaborating.

2. The families who agreed to participate in this pilot testing were in their turn evaluated, the time for the evaluation was 1hour/family. This evaluation had as objective to deliver the information about the behaviors and the development fields of the participants which are the most affected by the autism, also the questionnaire of the evaluation offered the image of the abilities of the youngsters on all the levels of their personality through the parents.

3. For the assessments of the participants were used next tools:

- Initial evaluation file
- Structured interview for the family
- Observation
- CARS\_T test
- Questionnaire for different areas of development/ abilities

Their evaluation lasted 3 hours/family and with these tools they could see at each participant the usual abilities, coarse and fine motor skills, communication and functional communication, cognitive development, socialization, vocational behavior and abilities. All of them took part at this evaluation and try to offer best information about their children and also the participants at the pilot testing, even in different moments it was difficult to communicate with them.

By organizing this evaluation of all the family, the trainers could find out the week and the strong points of each participant, both outside the comfort zone and inside the family.



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## 3.5 Stage 1

As a first step in the pilot testing the participants was classified like this: 2 adults with severe mental level, 5 adults with medium metal level and medium autistic level and 3 adults with easy retard (2 with easy autism disorder and one medium), according to the CARS-T. In this period was working 4 trainers, 1 volunteer (psychologist) from the day center for adults which has constantly get involved and volunteers (educators) with periodical involvement, according to the chosen subject.

The work was with just one group, all 10 participants, had 2 meeting per week, 4, 5 hours per day.

## 3.6 Stage 2

For the testing the trainers have used pictograms a lot, because they need visual support. The methods which they are using are a result of experience and use elements of TEACH, ABA or PECS. They are organising practical activities, motorical games, individual tasks, create moments of social interaction/communication. Starting from April, also because the weather will improve, they will organise activities( role-play) outside and also in different locations ( farms, shops).

As difficulties through which were passing at this stage the team from Romania is the level of autistic disorder which the participants have. They have problem of the social interaction which is the reason that are not a group, and prefer individual tasks. The trainers are working hard to optimise this.

Also they had a case of one boy with a medium metal level, with behavioural problems and very agitated, who need special attention.

The other difficulties and also an obstacle is recruitment of companies, because the Romanian legislation don't give support, job coaching, which is almost impossible because of the attitude and mentality of the society. The Blijdorp team consider that is a positive aspect the involvement of the 10 autistic persons and families, the fact that the beneficiaries start to build relationships.

The trainers have worked more on: **soft skills** – social and communication abilities, management of the anxiety, consciousness of the autism; **vocational guidance** – types of work, occupations (according to the level of autism), consciousness of the barriers/hard points of the persons with ASD involved in the work, experience of the work (work trial) – **role play; stay in the labour market** – examples of best practice, consciousness of what means to work with persons with autism, job coaching.

The methods used from the handbook and which the partners have shared are and adapted to the testin gin Romania:

**Austria:** skills training (in special communication, conflict management, work in small groups for the vocational counselling and learning necessary skills at a work place, using less words, clear words, visiting work places, stimulation of the hard points, involvement of the families).

**Lithuania:** taking in consideration the daily needs, stimulation of the communication and the hard points, practical preparing (encourage participation at artistic activities), KVAC: putting the beneficiaries in different situation, to meet new people, VILTIS: stimulation of the communication with other persons, VILTIS: combination of the social and vocational abilities.

**Italy:** offering the natural context for vocational experience and recreational (woodworking, animal farm, walks), respecting the structure, of the orders and behavioural rules applied, stimulation of the concentration in the communication, family support.



**UK:** forming the manual abilities (in the limit of the developed level and of the resources taken at disposal), stimulation of the interpersonal networking and of the communication, forming social abilities, to travel independent (to come to the day centre and to carry out activities without parents), and consciousness of the autism, of the importance of the mental health.

### **3.7 Stage 3**

For the stage of the job coaching it is difficult to have the same level as in UK, Italy and Austria because in Romania this field is not so developed. The main problem will be the mentality of the others about the people with mental help problem, with gypsy, people with different disability and etc.

In the project the activities which was carried out in Romania for the job coaching was organized visits to different companies where to them was explained what means a job, what responsibilities and wrights they have, the fact that have to respect a program.

Many companies and association which have been contacted to conclude a partnership to involve this persons and for a possibility to be hired wasn't positive, the reasons are: the potential fees that they could get from the directorate of public health, the lack of trained staff who is offering support to those beneficiaries, the lack of the financial stimulus.

## **4. LITHUANIA REPORT**

### **4.1 Overview of the pilot testing**

Before the overview of the pilot testing the short overview of the situation related to autistic people in Lithuania has to be presented:

A person who has autism cannot take care of oneself according to Lithuanian legislation. Until 2015 when a person with ASD turned 18 years old, his / her diagnosis was rewritten into the one of schizophrenic origin, i.e. the condition which has to be treated with neuroleptics. That is the diagnosis of ASD disappeared and at the same time appropriate help corresponding to the actual needs of the people was not provided. Autism in Lithuania is still considered a personal problem / problem of the family.

With the order of Ministry of Health Protection on 24.03.2014 from 01.01.2015 a psychiatrist using CARS methodology will determine the degree / difficulty of ASD for people who are 18 or older. Hopefully, the situation will start to change and step by step autistic people will be able to get help they need.

People who have Asperger's Syndrome usually do not go to medical care centers and do not get this diagnosis. One statistical resource claims that about 97% of people with Asperger's syndrome do not get this diagnosis. Their peculiarities are not treated as some disorder. In society they are just treated as having tough / rough character.

The partner from Lithuania using its network tried to find young people with Asperger's syndrome in the region, but, they could not find them. Therefore, they worked with persons who have autism + mid or severe intellectual disability. It is typical of Lithuania that if a person has been diagnosed with autism, he / she also have learning disability. They usually attend day centers.

The steps of pilot testing:



- 1) Meeting with the director of the day center
- 2) First meeting with the group of participants
- 3) Trying to find people with Asperger's syndrome
- 4) Training of trainers

The partner from Lithuania does not work directly with autistic people we have contacted a day center in Šiauliai to be allowed to test the methodologies described in the handbook. The meeting with the director was successful, but when it was mentioned that the training is about the development of soft skills, the director strongly suggested them to meet with the people with autistic disorder who attend the day center and evaluate them if the methodology may be tested.

After the first meeting with the participants it was clear that other methodology was to be chosen from the handbook. It was decided to focus on the development of autonomy skills and simplify the tasks to their level in order to develop participant's social skills (contact with the trainers and each other, etc.).

At the beginning of the pilot in December there have been 4 trainers involved in the training. From the February there were 3 trainers left as one of them decided to leave the organization. As the pilot was already in process it was decided not to involve a new person in the pilot in order not to cause participants additional stress of having a new person around. In order to achieve the goal of the project (60 days all in all) it was decided to extend the duration of the pilot. The pilot in Lithuania lasted until 12 of May.

At first, trainers worked in the following way:

On Tuesdays two trainers for 4 hours;

On Thursdays another two trainers also for 4 hours;

Their hours were calculated as separate even though they worked together. This was easier to manage the group and give participants more individual attention when it was necessary.

From February all three trainers have worked together.

The material from handbook was the primary source of information used in the pilot. Trainers had to do additional literature and online resources research, in order to meet the needs of the group. Consultations with the specialists working in the day center also were carried out regularly.

The trainers had discussion before each training session and after it. They discussed the course of their work. After training they discussed what was okay and what should be changed, if any changes, development could be noticed.

Methods, tools, techniques which are described in the AUTO handbook had to be simplified as much as possible because the majority of our participants have not got interpersonal relations with each other and cannot take care of themselves, are not verbal, not to speak about reading or writing skills). However, having in mind the situation with the target groups from Lithuania the trainers decided to use the simplified to a minimum material and start from autonomy skills (eating, personal hygiene, etc.) while at the same time incorporating the components of initiating personal contact with other participants, trainers, trying to work in together, become more independent.

Final destination of pilot testing was to provide working experience for participants. What trainers could do was try to work together with participants in the garden. The trainers tried to teach participants how to plant and maintain plants and garden.



Also it should be mentioned that usually not all participants participated in the training sessions as others due to their condition did not come to the day center on that day. Working in a smaller group (having in mind their condition) in this case was even better for them as they got more individual attention and for one trainer it was easier to manage, for instance, the work of two participants.

#### **4.2 Training the trainers**

4 trainers are the employees of organisation: a psychologist, a social worker and 2 social programmes coordinators. First of all, they were introduced with material created within the project. It was short introductory course made by one of the trainers who worked on the handbook.

#### **4.3 Participants at the pilot testing**

The organisation did not have the access to the records of the participants which the day centre possesses. As it was mentioned above their condition is difficult and in this case it would be very difficult to speak about their career interests, work experience or any verbally expressed feedback from them. They have difficulty in expressing their emotions; therefore, their satisfaction with the training could not be properly assessed.

However, to some extent we can speak about their work skills which they had a possibility to use in practice in day centre garden, flowerbeds.

Tomas and Marius prefer/expect certain movements from the staff (to stroke their head (Donatas and Deivydas), Marija does not prefer close contact with anyone, she prefers sitting alone away from the rest. Ilona and Jakaterina positively react to the presence of other people. Simona and Giedrius are able sometimes say separate words expressing basic needs, qualities: eat, go, good.

Another participant initiates social contact with the trainer, but he does not speak so he initiated it by touching the hand of the trainer and leading her to the place where he wanted her to be.

The main progress observed in the participants was that some learners started to do tasks by themselves (or at least showed an attempt). We mean final pilot testing destination – working experience in garden. Another positive progress – at the end of the pilot participants accepted trainers and no manifestations of aggressive behaviour were observed.

All in all, some participants had possibility to experience some work activities outside the day centre, to work together doing some tasks inside as well as outside the day centre.

#### **4.4 Recruitment and Assessment stage**

Day centre where EDUPRO implemented pilot testing helped us with this task. They recruited one group from day centre and worked with them.



## 4.5 Stage 1

First of all, trainers spoke with employees who have been working with participants for several years, finding out from them about each participant's specific behaviour, condition.

Afterwards, trainers tried to make relations, initiate contact with participants. It was not easy because some of them can get aggressive, do not want to communicate with other people, do not like the presence of other people or any close contact.

The majority of our target group do not express themselves verbally so trainers had to make effort to understand their body language, signs. In this process the help of employees of the day centre who have been very cooperative was really valuable.

Things together were the first method which trainers used after making participants feels good among their presence. Trainers tried to show participants how it is necessary to do things so that they could repeat, for instance, to take a cup / pen / book / puzzle, to bring the plate to the sink. In this way the trainers tried to include practical tasks which would develop autonomy skills. So, one of the methods was when participants had to repeat steps. Through observation some participants tried to mimic trainers' moves.

Trainers tried to recognize which tools from the Handbook could be suitable for each participant. The most needful tool was to teach taking care of oneself. The majority of the target group cannot go to toilet by themselves, eat independently. Therefore, it was decided to use very simple tasks at first (making a sandwich, for example). When he /she gave it to somebody else from the group – that was already considered as a progress.

Trainers tried to group participants: for instance, they grouped into a pair two participant with similar temper/character and gave them a puzzle (as they both like this activity) – they are learning to wait patiently for they turn to put a detail.

Another participant was a bit more distant from the group, so trainers tried to give her more space. One of the trainers tried to develop some contact with her. It was not easy because she could become stressed very quickly from the presence of other people.

Another participant initiated social contact with the trainer, but as he does not speak, they played together with some caution as the participant may become aggressive at any time. He likes music. It was used with caution as well because other participants did not tolerate it.

Being together and simple communication, activities with the target group worked well. Trainers made the tasks from the programme suitable for learners.

Other activities: to distinguish concepts of "you" and "I"; to wait for ones turn. These are simple things which participants do not know how to do and this may cause frustration, aggression, therefore, trainers started from these simple things.

But the most suitable was individual work with each person when trainers showed how to make something. A very positive thing was considered when the learner started to do this by himself /herself (or at least showed an attempt). Of course, every time they had to be remembered how the action / activity had to be done.



Participants could be together with the trainers and almost all the time stayed quite calm (no acts of more significant aggressive behaviour). Trainers noticed this change because in the beginning some participants did not want to communicate at all. When we say communicate we mean body language, gestures, behaviour showing the unwillingness to get into contact with the trainers. Most participants do not speak verbally.

## **4.6 Stage 2**

Continuing to get to know each other, trying to initiate social contact with participants, looking how they react and accept new people (i.e. trainers) in the room.

Getting to know the participants was not easy. Several times we observed how they behave in the presence of employees of the day centre. Some of them are aggressive, from time to time are spitting.

As the perception of emotions is a great difficulty to autistic people, the trainers tried to work on that. Also they tried to improve expression and perception of emotions, feelings and desires. The focus was on two main types of feelings: happiness and sadness. Various levels of complexity were used according to the level of each participant. First level – real images and sounds (crying and laughing); the 2nd level – real images replaced by drawings. The highest level of complexity –actions where participants had to recognise whether it's sadness or happiness.

Most of them do not speak verbally. They express only certain sounds. Most of them try to mimic the emotions of sadness and happiness only strongly encouraged as they are not able to focus their attention for long, they sometimes stand up and go somewhere in the room. The highest level of complexity was suitable only for Simona and Giedrius. But sometimes they mimic trainer without perception of that it is sadness or happiness.

## **4.7 Stage 3**

Basic conception of the Lithuanian partner work was useful for the target group, therefore, trainers decided to work on the same direction. As the perception of emotions is a great difficulty to autistic people, the trainers further worked on that and tried to improve expression and perception of emotions, feelings and desires.

Autonomy and self-care were the most important things which the trainers teach. As it was mentioned before, it is not enough to teach something once, so they teach the same things several time and repeat useful methods. In this case, they could observe some changes.

During the final stage of pilot testing trainers and participants went outside and tried to work in the flowerbeds.

## **4.8 Comments on Autism and Employment**

The participants within the day centre had several “job training” sessions outside working in the flower beds, garden next to day centres. It was really quite a challenge because you do not know what to expect when they are outside. Trainers had to keep an eye on them all the time. However, those who are more able tried to repeat work tasks outside.





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## 5. UK REPORT

### 5.1 Overview of the pilot testing

The UK partner recruited 10 adults with Autism Spectrum Conditions (ASC) on to the project. The project focused on adults with High Functioning end of the spectrum autism (HFA) or Asperger syndrome (AS).

The **first stage** of the programme lasted for 8 weeks. Participants attended one day a week and attended a series of 8 workshops focusing on workplace skills. The workshops covered autism awareness in the workplace, communication and social skills at work, anxiety management at work, planning for employment (organizing time, budgeting and travel planning) and interview skills. The anxiety management workshops introduced the participants to relaxation techniques found in the practice of Yoga and Mindfulness.

As well as the workshop, participants received individual support within a group context, to gain support and advice on areas that they wanted to develop and also to focus on searching for work experience in their chosen area of work.

The **second stage** of the programme consisted of a 4 week supported work experience placement. Prior to the placements starting, NAS Trainers contacted the work placements to offer information on autism awareness and advice on how to support the participant in the workplace. Throughout the placement, all participants received regular visits from their employment consultant - frequency and duration will depend on individual need but initially will be once per week.

At the end of the placement, employers were required to complete a feedback questionnaire so the trainers could identify what further support the participant requires from us. They also carried out a review with the participant to find out what they need to focus on in the third stage.

The **third stage** entailed 6 weeks of weekly one-to-one sessions for participants, these focused on supported job finding. The trainers met with participants to develop a CV, cover letters and identify the types of jobs the client is seeking and to receive support with their job search. One of the aims of the programme is to grow and encourage individual independence, and so participants are expected to do some active preparation before each meeting.

At the end of the programme, participants receive a folder with their workshop material, an action plan with signposting to other relevant opportunities.

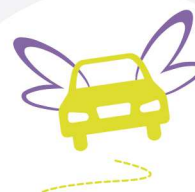
### 5.2 Training the trainers

Trainers were identified depending on their previous experience and qualifications. The UK trainers were NAS employees that had significant experience in working with people with autism and a background in psychology, counselling, or education. Some trainers had prior experience of supporting people with autism in to employment.

The UK partner held a one-day training session for the trainers. This was carried out by two project leads. One who has vast experience in the areas of autism and employment and the other who has experience of teaching, and supporting students at university, including transitioning from university in to employment.

Our training consisted of the following main topics:

- An overview of Autism Spectrum conditions in relation to employment
- Main barriers to job finding and choosing an occupation
- Job searching and CVs



- Finding work experience
- Recruitment process and interviews
- Disclosure
- Equality and support in the workplace
- Reasonable adjustments in the workplace
- AUTO Pilot stages
- AUTO Pilot handbook and materials

### **5.3 Participants at the pilot testing**

Most participants on the programme were recruited from our student support service. This service support students who are studying at higher education level. There is little support available for graduates with ASCs in the UK and many students with ASC have difficulty finding work due to the interview process. In the UK, Students with autism have the highest unemployment rate compared to students with other disabilities – 26% of graduates with autism are unemployed compared to 11.4% of other graduates with disabilities (AGCAS, 2011)

#### **Participants (initials have been used to maintain confidentiality)**

##### **LP**

LP had studied film at university. He was interested in working film or broadcasting. He had been having difficulty finding a job in any area of employment. His self-esteem was also very low and he suffers from depression. LP wanted to develop his confidence in work and interviews. He also wanted to learn how to approach interviews.

**Work placement:** LP carried out work experience as a runner for a TV programme.

**At the end of the programme:** LP went on to gain some further work experience in TV/Film. The project helped him to build his confidence in talking to colleagues in the workplace, and about his own skills.

##### **MW**

MW was a maths and physics graduate, he had found the job searching process difficult, and wanted to learn how to interact with others in the workplace. He had an interest in finance and accounts.

**Work placement:** MW carried out work experience at the NAS in the Data and Information team, organising data, analysing results.

**At the end of the programme:** MW continued on a placement at Transport for London, working with data analysis. He found the programme helped him to feel more positive about employment again.

##### **DM**

DM had not gained many qualifications and had not done any work experience before. He had been experiencing depression and found it very difficult to get a job. He would really like a job but he did not know how to apply.

**Work placement:** DM carried out work experience in a conference centre, setting up the restaurant, polishing cutlery, clearing tables, providing customer service.



**At the end of the programme:** DM got on well at placement and they offered in a 2 week trial with a view to offer him a paid role. He no longer felt as depressed and felt more confident in his own abilities. His comments:

“The programme was a boost of confidence and helped me to believe in myself”

“I can do things more independently now”

“I am learning as I do my job at work (placement) and meeting new people”

## AL

Was a media graduate, interested in making his own film. He was quite reluctant about working and seeking employment. This was due to a combination of despondency about getting a job and also making a decision on occupational choices.

**Work placement:** AL carried out work experience a hotel, assisting the restaurant, setting up meeting rooms, customer service.

**At the end of the programme:** AL felt more able to apply for jobs independently, had more of an idea about employment, more confident in talking about his strengths and found the group discussions very useful. His comments:

“I got on well with people on the placement and feel more confident with this”

“I’m more aware of social skills now”

“The project was good for job searching; I would like further support in other areas”

## OL

OL was a graduate in creative writing; he had an interest in publishing and wanted to become an author in the future.

**Work experience placement:** OL carried out a work placement in publishers. He found it useful to find out more about this area and how the work environment operated on a social level.

**At the end of the programme:** OL felt more confident in job searching independently. His comments:

“I have improved my interview skills and gained confidence regarding my autism”

“I am more aware of my personal strengths and weaknesses”

“My judgment has improved regarding when to reign myself while talking about one of my specialist subjects.”

“It was useful to meet other high functioning autistics. It made me see I wasn’t the odd one out”

## SK

SK had done some work experience in a social care environment before and hoped to get a job in this area, retail or administration.

**Work placement:** Support work in a care home



**At the end of the programme:** SK secured a job at the National Autistic Society as a support worker in the outreach team. He found the programme helped to structure his job searching and boost his confidence in interviews.

## ER

ER had started an IT course a few year ago but left after 2 years as it was too much for him. He had been unemployed since. He lacked confidence in applying for jobs and in interviews.

**Work placement:** In an IT department in a law firm.

**At the end of the programme:** The placement gave him the opportunity to experience different areas of IT in the workplace. It helped ER to identify areas of IT that he would like to work in. His comments:

“I felt more confidence with placement colleagues over time”

## PB

PB had experience of gardening. He was unsure about the type of work he wanted to do and wanted to gain further work experience.

**Work placement:** One day a week at a gardening project .

**At the end of the programme:** The placement enabled PB to develop his independence and ideas of work in the future. It also helped him to manage his stress when working with others.

## JK

JK was a politics graduate with an interest in journalism and policy. As he was unemployed, he felt a lack of structure and confidence which led to feelings of anxiety.

**Work placement:** Internship at the National Autistic Society in the Policy and Campaigns department.

**At the end of the programme:** JK became more confident over the programme, his work experience was very helpful in developing his confidence. These led to less anxiety about his future and own skills. He feels more able to job search independently, and confident with work tasks such as taking call. He also developed strategies for coping with difficulties at work. His comments:

“Mindfulness was particularly helpful”

“I enjoyed being able to evaluate strengths while looking at how to reduce anxiety”

“Working at the NAS has helped me to understand ways that my anxiety relates to it (Asperger Syndrome)”

## AS

AS dropped out from the project in stage 1 as he was studying part time as well and at the time felt it was difficult to do both.



## 5.4 Recruitment and assessment of the participants

To recruit participants we sent out a flyer and application form to our graduates and also local services that we work alongside. We arranged a meeting with the participants to carry out assessments. The assessment tools we used were:

- Impact Star, Pre and Post project job seeker review questionnaire, soft skills questionnaire, pre and Post transitions questionnaire

## 5.5 Stage 1

Materials used:

1. **Autism awareness at work:** Feedback from participants was that they felt the workshop was good for self-advocacy, understanding how to explain their condition at work, and helping them to know what support was available within the workplace
  2. **Social skills:** Participants found the following topics useful – Watching the ‘Socializes’ DVD, how to make small talk, discussing what is socially acceptable, and how to make conversation differently in different situations
  3. **Communication skills:** Participants found the following topics useful – building confidence, conversation topics in the workplace, sharing communication strategies within the group, understanding body language
  4. **Anxiety management at work:** Participants found the following topics useful – relaxation techniques, identifying anxiety and how to manage it, focusing on the positive
  5. **Planning for employment:** Participants found the following topics useful – learning about the expectations of the workplace, preparing for the change, i.e. routine, CV and Cover letter advice
  6. **Application forms:** Participants found the following topics useful - identifying skills, qualities, and strengths, how to cope with changes, how to manage team work, building confidence, structuring free time
  7. **Interview skills 1:** Participants found the following topics useful – preparing answers for common interview questions, interview practice, discussing the non-verbal information in interviews and how to answer questions
  8. **Interview skills 2:** Participants found the following topics useful – learning to specifically talk about the job and give examples when answering an interview question, what employers look for, focusing on your strengths, learning what to expect in an interview
- The trainers already had a set of materials on the above topics, however they used further information and guidance from the handbook, and from other countries materials within these workshops. One of the trainers had a background in counselling and so they added some basic cognitive behavioural therapy techniques to the workshop.
  - They split the group of 10 participants in to 2 groups of 5 as they felt a workshop of 10 people would be too overwhelming for participants. The trainers wanted to encourage them to give their views and



they felt that if there were 10 people in the group it would put others off sharing, and also take longer to discuss each topic. The groups of 5 worked well and would recommend no more than a group of 6 for workshops.

- The workshops were held in the morning from 10-2pm including a lunch break. In the afternoon session, participants would work independently on their CVs, cover letters, looking for jobs. The two trainers facilitated support in this group work session. The trainers found it difficult at times because each participant could require a lot of attention. The trainers felt that it would be better to have 1:1 sessions rather than run it as a group.
- Timing is an important factor in when running a workshop. It is important to keep the pace going otherwise participants found concentration difficult. Regular breaks were also useful, and occasionally some participants would feel overwhelmed with information and need a break as and when required. It was difficult to manage the group at times as some participants would talk for a long time on one topic. Even with prompting it could be difficult to move on. To manage this, we made it clear rules at the start of the workshop and gave each person a turn in responding. With clear boundaries and structured it helped the workshop to run more smoothly.

## **5.6 Stage 2**

- It was important to find work experience placements based on participants areas of interest if possible. The trainers found placement by a mixture of participants contacting organisations and trainers contacting organisations on their behalf.
- It was important to go to visit the employer with the participant for an informal interview and also to find out more about the work placement and create a 'job description' of what they would be doing. This was also useful to clarify what the participant would be doing, who was their supervisor, where they will be working etc.
- Materials: the trainers completed a work placement details form at the beginning of the placement and asked the supervisor to complete a feedback form at the end of the placement.
- Trainers went in to visit participants on a weekly basis to provide support
- Clear information and instruction is required for participants. It can also be useful written down or a timetable of tasks provided.
- The trainer's role was to aid communication and provides clarification to the participant. To advise them and help the participant develop on placement. To liaise with the manager about the participants role, any concerns, and to provide further information about autism.

## **5.7 Stage 3**

- 1:1 sessions worked best when they were in a calm, quiet environment, at a regular time each week.
- Materials: any workshop material that was useful to do again as a refresher, mock interview questions, the trainers made notes from our 1:1 sessions and action points for the participant to work towards for the next session, e.g. finish the application form started in session.



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- At the end of the project they gave participants a folder of their workshop materials to take with them, an action plan to continue to work on, and information of other organisations that could provide support and advice to them

## 5.8 Comments on Autism and Employment

- The employers that offered work experience generally had a positive attitude towards taking on a participant.
- The UK partner offered an autism awareness session for managers/supervisors that would be working with the individual which proved to be very useful. This included: an overview of autism, the strengths and difficulties individuals may have in the workplace, how to support an employee with autism.
- When approaching companies to request a work experience placement, the trainers encouraged participants to contact companies themselves if possible and appropriate. Alongside this, the trainers also contacted companies to enquire about work experience.
- The trainer found that the best practice for approaching companies on behalf of someone they support was to ensure that we describe their strengths and interests, whilst also explaining how they can support the person to perform at their best at work. It would be useful to create a template for this for the handbook.
- Disclosure: disclosure is often a difficult decision for individuals with autism. In our group the participants were mixed about whether they wished to disclose to an employer about their condition. It would depend on the individual's choice, the job, and the need to disclose.
- Feedback from employers was positive and most stated that they would offer work experience for a person with autism again:
- Example of non-disclosure: The UK partner had a case in which a participant gained a job through an agency. It was a two week trial with a view for long term work. It was doing admin work in a bank. The participant decided not to disclose as he wanted the team to know him first and not to be known as a person with 'Asperger syndrome'. However he was 'let go' after 1 week as they stated he was not progressing fast enough. This was perhaps due to his condition, and had he disclosed the trainers could have explained about ASC to the manager and supported the participant around communication.
- Example of success: One success story was that the employer was so impressed with the participant that they created an action plan to enable the participant to work towards the standard of a paid employee with a view to hire him. The participant was elated with this and keen to work towards the targets set.

## CONCLUSIONS

The pilot testing has as aim that each partner to test the methods of the other partners in the project and like this to spread the experience of each of them in working with people with autism. The partners have chosen from the handbook some of the tools which they use in the testing.

The results of the testing is different because in the project were involved countries with different level off development in the system of social economy. The UK, Italy and Austria have the most developed system in the field in comparison with Romania and Lithuania which for many years are working over the legislation. It will take many years to get to the level which the partner's countries are.



In this testing the partners had the opportunity to develop more methods of autistic adult education, to share their experience to the countries which need more best practice.

As methods used in the testing each country have begun the activity with their own methods because it was more easy and step by step when the trainers have started to know better the participants they have adapted some of the methods.

## PARTNERS CONCLUSIONS

**For the Italian** the AUTO project was a positive experience for the students because it allowed the inclusion in the labor market feeling part of the society, even for a short time, and above it has contributed to an improvement of their quality of life.

For the trainers it was not easy to find a way to explain the contents of the meetings, as the group was heterogeneous. Sometimes they needed to adapt the planning of the course in order to improve the comprehension of the topics, and finally they used above all the visual type of communication by slides, movies and role-playing. In the last part of the course it was very touching to see the students at work together with colleagues. It 'was very important that the environment was warm and friendly because it has helped them to be more motivated and satisfied.

Also they believe that this pilot testing has given the opportunity to experience a path that does not help to "fill the time" as often happens in the activities that are designed for adults with disabilities, but to experience a boost for autonomy and Self-awareness, towards a better quality of life.

**Austria says:** "Wonderful training, wonderful people, good results and absolute necessary; we should stop to sort people just with their diagnosis. This focus is blocking a holistic view on our users for us and also for themselves. So we should be more open and a bit slower with our decisions. When we understand why people want to do what and when and where, and when we listen to their arguments we can have a success because the motivation in this case is really high, because it is their decision and not a decision of some professionals.

The training showed us the fundamental need of basic attendance in the coaching process. When we combine basic attendance with respect and appreciation we have a wonderful mixture for a fruitful collaboration.

Our system of communication with the users we call Tetralogue. In all this trainings it is important to deliver also our common approach that PwD are our partners on an equal level. Counselling is not possible in a hierarchic way. When we are doing hierarchic counselling it is just fulfilling orders from the side of the users. When we really want to train our users for being independent we have to take care that they are implementing the new learned skills in their daily behaviour. "

**For the Romanians** the project and the testing have represented a real innovation because each subject was holistic approached, not on sequences, thus how it is working with the people with autistic disorder in the recovery centres from different countries. It's for the first time when the people with ASD were involved in the real work activities, were involved in a real job training on different occupations: gardener, fruiter, carpenter, cooker, housekeeper and have visited many work place. The Romanians appreciate the impact of those experiences to be very extraordinary in social-affective field.

**For Lithuania** the pilot testing was quite a challenge. Training was held 6 months and it seemed that it was a long period but for their target group it was a very short time to make a bigger progress. On the other hand,





they observed some progress in their positive behaviour, acceptance of the trainers and talking with employees who work in day centre, it was a really positive and huge achievement.

**The UK** considers that the structure of the programme was good and it is a useful model which can be adapted depending on the client group. All their participants developed confidence in the area of employment whilst on the programme. The steps which they followed were good and that is referring about the sessions which are better to have it 1:1 rather than run it as a group. This is because some participants needed more support than others and it was difficult to give all participants the support they required. 1:1 sessions require regular and quiet environment and it was also useful for the trainer to spend time preparing for the session with the participant.

They found workshops ran better when information was given in advance, clear boundaries and instruction, facilitation of communication within the group.



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## ANNEXES

### 1. The activity plan:

### ACTIVITY PLAN FOR WP 3 - PILOT TESTING

ACTIVITY	DETAILED ACTIVITY	PERIOD OF IMPLEMENTATION	DEADLINE	USED TOOLS	RESPONSIBLE	OBSERVATIONS
RECRUITING	1. Recruiting of 4 trainers inside the partners organization for the pilot testing.	1 -20 October 2014	20- Oct-14	logistic materials	RO, IT, AT, LT, UK	
	2. Recruiting of 10 people with autistic disorders which will participate at the pilot testing.	1 July - 20 October 2014	20- Oct-14	logistic materials	trainers: RO, IT, AT, LT, UK	establish programme for the beneficiaries of the pilot testing
PRE-TRAINING	Training of the trainers regarding how to implement the path designed in the Hand-Book manual (each expert about the path of his competence)	20 - 25 October 2014	25- Oct-14	logistic materials, internet	each partner will take care to train the trainers involved in the pilot testing	
EVALUATION	1. Evaluation of the people with autistic disorder for the pilot testing, using the tools which each organization has inside.	25 - 31 October 2014	31- Oct-14	logistic materials	trainers: RO, IT, AT, LT, UK	
	2. Make a report of the evaluation and send it to the lead partner.	31 October - 7 November 2014	7- Nov-14	logistic materials	trainers: RO, IT, AT, LT, UK	
PILOT TESTING	1. Pilot running	7 November 2014 - 7 May 2015	7- May-15	logistic materials	trainers: RO, IT, AT, LT, UK	
	2. Report of the first 2 month of the pilot testing by complete a questionnaire created by the lead partner.	7 - 15 January 2015	15- Jan-15	logistic materials, Skype meeting with the lead	trainers: RO, IT, AT, LT, UK	



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				partner		
	3. Report on the pilot testing after 4 month (on going activities )	17 - 21 March 2015	21- Mar- 15	logistic materials, Skype meeting with the lead partner	RO, IT, AT, LT, UK	
	4. Report of the whole 6 month of the pilot testing	15 - 31 May 2015	31- May- 15	logistic materials, Skype meeting with the lead partner	each partner will make a report about the pilot testing and the lead partner will make the final report about the whole WP3	The Final report made by RO partner till 31 May 2015.
	5. Promotion of the activities during the pilot test on the website of the each partner, on the project website, Facebook page if the case	7 Novemb er 2014 - 7 May 2015	7- May- 15	internet	each partner will promote the activities on their website and also will send the informatio n to the coordinato r of the project to upload on the website of the project	



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## 2. QUESTIONNAIRE FOR THE TRAINING THE TRAINERS

WP 3 – Pilot Testing

Author: Association Blijdorp Romania

### EVALUATION QUESTIONNAIRE FOR TRAINING OF TRAINERS

Name of the partner institution:

Name/Surname of the person filling up the questionnaires:

Position in the project:

### THE TRAINING

How would you evaluate the organization of the training activity?

5       4       3       2       1

Evaluate the level to which your expectations were met:

5       4       3       2       1

Evaluate the level to which the objectives of the training were made:

5       4       3       2       1

Evaluate the next aspects of the training:

The period:     Short                       Adequate                       Excessive

The interest:     5       4       3       2       1

Applicability:     5       4       3       2       1

Consider that the training will help you in activity as:



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Personal       Professional       I don't know

Other:

## THE HANDBOOK

How do you consider the handbook like a tool for training the people with autistic disorder:

5       4       3       2       1

Please comment:

Do you think that you can use the methods presented in the handbook with adults with autistic disorder?

Yes       No

Comments:

What improvements should be made to the Handbook?

Thank you for your collaboration!



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## 3. QUESTIONNAIRE FOR THE PILOT TESTING

### EVALUATION QUESTIONNAIRE FOR THE WORK PACKAGE 3 TEAMS

#### Introduction

The AUTO project is aimed at developing alternative learning approaches to integrate disadvantaged citizens into society and the labour market, in particular autistic adults in the pathway from secondary school to a job.

The Pilot Testing consists in:

- Training session for educators
- Testing of the innovative learning tools on the target group (10 adults learners in each country)
- Reporting

For a good implementation of the WP 3 we have created this questionnaire to be filled by the trainers' every two months to observe the ongoing of the testing, the problems occurring to be solved in time and the results to be successful.

These questionnaires is addressed to the trainers involved in Work Package 3 Pilot Testing and please fill in and send it back to email: [blijdorp.association@gmail.com](mailto:blijdorp.association@gmail.com). Deadline for sending the questionnaire is .....

#### I. Your involvement in the project

- How would you estimate your personal level of involvement in the project to date? (Please circle your choice)

Very high

High

Moderate

Low

Very low

- How clear were your tasks and responsibilities as a project partner at the start of the project? (Please circle your choice)

Absolutely clear

Quite clear

Quite unclear

Absolutely unclear

I had no specific tasks/responsibilities at that time



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## II. Progress of, and collaboration within, the project:

- How satisfied or dissatisfied are you with the progress of the pilot testing? (Please circle your choice)

- Highly satisfied
- Quite satisfied
- Quite dissatisfied
- Very dissatisfied
- Unable to say

- What difficulties you have in working with people with autism? How you manage to resolve them?

- Is there any particular obstacle or problem that you are encountering in the running of the pilot test? How might this be solved?

- What methods you are using most in training with people with autism?

- How you decided to use a specific tool in work with people with autistic disorder?

- What worked well in the training?

- What tools do you consider particularly useful from the handbook in work with people with autistic disorder?

- What are the positive aspects in the pilot test so far?

- What do you think you could do as an individual or with your organization to ensure success, in your work package, at this stage?



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- Are you discussing in the team about the pilot testing?

- Do you feel you can bring your own ideas and interests into the handbook and thereby help to shape the handbook? (Please circle your choice)

Absolutely yes

Sometimes

Hardly ever

No, not at all

Unable to say

- Please add your name and organisation here. Please be assured that your feedback will be treated confidentially and your name will not be published or connected with your answers in any way.

- Is there any aspect of this evaluation that you would like to further comment on? Anything else you would like to mention that has not been covered?

**Thank for your time and collaboration!**