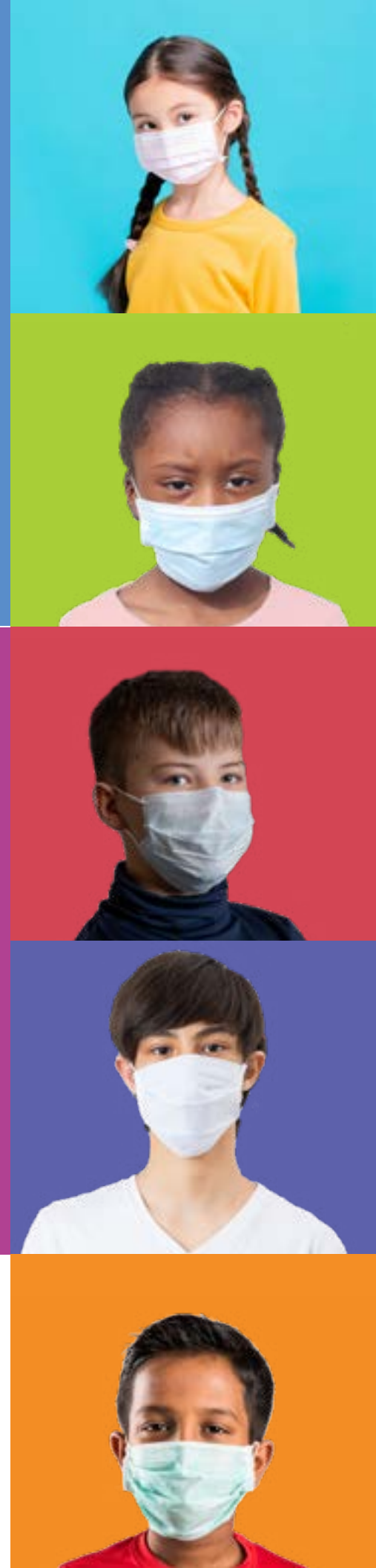


READINESS FOR THE SAFE AND SUCCESSFUL RETURN TO SCHOOL

FINDINGS FROM THE 2020 AUTISM ONTARIO EDUCATION SURVEY



AutismONTARIO

MISSION

CREATING A SUPPORTIVE AND INCLUSIVE ONTARIO FOR AUTISM

VISION

BEST LIFE, BETTER WORLD, MAKING AUTISM MATTER

ENDS

BECAUSE AUTISM ONTARIO EXISTS:

Individuals and families in their communities are equitably and seamlessly supported across their life course.

Individuals, families and communities have meaningful: Supports, information and connections.

Information/knowledge is created, curated and mobilized that is: Trustworthy, timely and relevant.

C

COLLABORATION

We believe in the power of working side by side with individuals, families and communities to make informed choices about autism.

A

ACCOUNTABILITY

We hold ourselves and others responsible to achieve successful outcomes through high standards of integrity and fiscal responsibility.

R

RESPECT

We value equity, diversity and inclusion, and we listen to understand.

E

EVIDENCE INFORMED

We use and create knowledge to guide our decisions and work.

OUR VALUES

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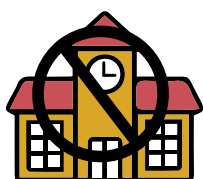
EXECUTIVE SUMMARY

In its 2020 survey, *Readiness for the Safe and Successful Return to School*, Autism Ontario gathered information from *parents or caregivers of Ontario children and youth on the autism spectrum* in the education system regarding:

- Their experiences of the COVID-19 school closure earlier this spring, and
- Their concerns and perspectives for the return to school in the context of COVID-19 this fall.

The base survey consisted of 27 questions (if completing for one child). Caregivers responded to a core set of 19 questions for each specific child with autism in the education system, and could repeat these questions for up to three children. The bilingual survey was available online for the week of July 6-13.

2,413 caregivers responded, completing questions for a total of **2,610 children**—with 183 completing questions for a second child, and 22 completing questions for a third child. **4.1% of respondents indicated they speak French most often at home.** Proportions of visible minority and Indigenous groups were close to those of the larger Ontario population.



45%

Dissatisfied or very dissatisfied with the educational experience during the spring school closure

Many cited losses to their child's social functioning and set-backs to development

EXPERIENCE OF THE SPRING COVID-19 SCHOOL CLOSURE

On average, 27% of caregivers were satisfied or very satisfied, while 45% were dissatisfied or very dissatisfied, overall with the educational experience during the spring school closure. *Caregivers' level of satisfaction varied significantly*, however, with school board setting—it tended to be higher for French Catholic and private school settings compared to English Catholic or public schools.

Most distressing or stressful to caregivers was the extra work caring for the child at home (46%), and *lost social, developmental, and academic opportunities* for the child (45%). Regarding *major impacts of the spring school closure on their child's physical or mental wellbeing*, 48% of caregivers described losses to their child's social functioning, while 30% described set-backs to development, and 21% reported child mental health challenges.

Most caregivers (86%) felt their child had sufficient access to technology to support online learning during the spring school closure. Northern Ontario respondents, however, were over eight times as likely as Toronto Area respondents to report that *Internet bandwidth is a technological barrier* to online learning in the spring.

60%

Felt their child was insufficiently engaged in online learning



Attending school daily is clearly the most popular first choice of reopening scenarios

Caregivers need flexibility in participating in education-based meetings

FOR THE RETURN:

Parent concerns include adherence to COVID 19 safety rules & managing the transition back; and

Children's anxieties are related to COVID risks, restrictions and returning after a long absence

A majority of caregivers (60%) felt *their child was insufficiently engaged in online learning*. Caregivers were less likely to report that children in earlier grades (grade 4 and below) were sufficiently engaged than in higher grades, with the exception of grade 12.

PLANNING FOR THE RETURN TO SCHOOL IN THE FALL

When asked about what aspects of the spring school closure caregivers thought should be retained for the coming school year, 41% of caregivers felt nothing should be retained, while 23% favoured the flexibility of learning at home or at school. Caregivers suggested there is *need for flexibility in participating in education-based meetings*, with 29% indicating they should be offered face-to-face. Reasons for preferring face-to-face meetings included better communication, privacy concerns, greater likelihood meetings will occur, greater adherence to regulations, or technology barriers to meeting online.

Attending *school daily was clearly the most popular first choice for reopening*, while preferences for alternative scenarios were variable. Attending school for blocks of weeks was a less preferred option. Choices were influenced by caregivers concerns for COVID-19 safety, the need for routine, consistency, and predictability for their child with autism with respect to scheduling, and the need for all children in the household to have the same schedule to minimize family stress.

Among possible concerns about their child's physical return to school, *negotiating social interactions was a high concern to the most caregivers*. When asked about their greatest concern about the return to school, 46% mentioned their child's adherence to COVID-19 safety rules, and 28% mentioned their child managing the transition to school including mental health and social situations. As reported by caregivers, 32% of *children expressed anxiety about the possibility of physically returning to school* this September. Children's anxieties related to COVID-19-related risks or restrictions, or returning to school after the prolonged absence.

The most commonly endorsed *need for a successful transition back to school* was increased school-based supports, followed by an individualized transition plan. Some caregivers mentioned the *need to be clearly informed before the return to school* to be able to prepare and support their child. A number of parents highlighted how COVID-19 has exacerbated the *already acute need to enhance internal supports, and allow external supports for learning, skill development, behaviour and mental health*, as students transition back to school.

KEY TAKE-AWAYS AND RECOMMENDATIONS

The closure resulted in worrisome losses to their children's social development and academic progress

» The spring school closure increased caregivers' already high workloads and stress related to caring for their child and managing their education, and resulted in worrisome losses to social development and academic progress.

» Technology-related barriers including limited Internet bandwidth are substantially higher in Northern Ontario—this needs to be accommodated in plans to support remote learning.

Internet bandwidth limitations are highest in Northern Ontario

» There is a need for flexibility in how parents are allowed to participate in education-based meetings, to accommodate their preferences and needs for meeting face-to-face versus remotely.

» Addressing COVID-19 safety will be important for addressing both caregiver and child anxieties about returning to school.

Parents and children have anxieties about how COVID-19 safety will be addressed

» Successful transitioning back to school for children with autism will require increased school-based supports and services, and individualized transition plans for each child.

» Reopening scenarios should be designed with the unique and varying needs of families of children with autism in mind—such as the need for all children in the household to have the same schedule to minimize family stress.

Successful transitioning requires increased school-based supports & individualized transition plans for every child

» For many children, plans will need to promote routine, consistency, and predictability with respect to scheduling.

» COVID-19 has exacerbated the already acute needs within the education system to enhance internal supports, and allow external supports into schools for learning, skill development, behaviour and mental health.

INTRODUCTION

Autism Ontario values the perspectives of all stakeholders in the autism community on a wide variety of issues. In our 2018 province-wide survey, completed by families and adults on the spectrum, education was identified as a top priority among five key areas requiring greater advocacy focus in Ontario. For this reason, Autism Ontario decided to gather the perspectives of caregivers on education-related matters in its 2020 province-wide survey. Surveys in future years will address other priority areas and the perspectives of the relevant groups. With the extraordinary changes brought by the COVID-19 pandemic, Autism Ontario adjusted the focus and length of what was originally planned as a more comprehensive survey on education.

The purpose of this survey, entitled *Readiness for the Safe and Successful Return to School* was to gather the information from **parents or caregivers of Ontario children and youth on the autism spectrum in the education system** about two things:

- Their experiences of the COVID-19 school closure earlier this spring, and
- Their concerns and perspectives regarding the return to school in the context of COVID-19 this fall.

Autism Ontario developed the survey with input from partners and stakeholders. The base survey was 27 questions long (if completing for one child). Caregivers were asked to respond to a core set of 19 questions with reference to one specific child in the education system. If they had multiple children on the spectrum, respondents had the option to complete these questions for up to three children.

The survey was available online only, in English or French, for one week from July 6-13. Autism Ontario distributed it as an openly available link through the organization's channels, and with the help of numerous partner organizations. Incomplete or invalid surveys were excluded prior to analysis. Since not all respondents completed all questions, the number of responses is provided for most questions.

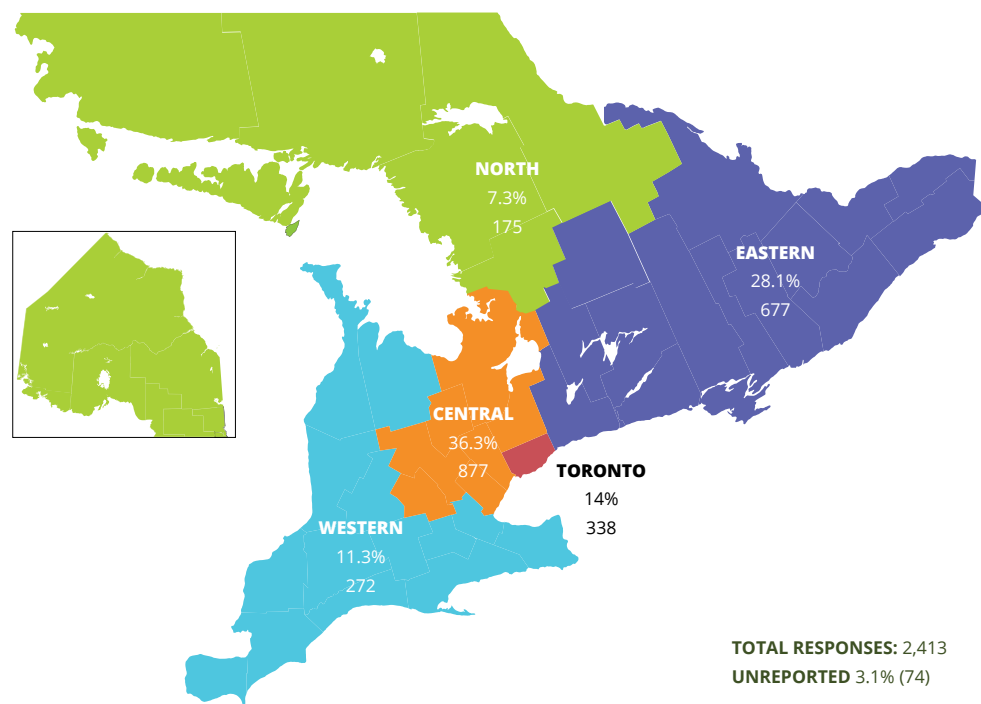
Acknowledgments

Autism Ontario is grateful first and foremost to the caregivers who took the time to complete this survey. Autism Ontario also acknowledges those who contributed to survey development, data analysis, design, and writing of the report¹: Cathy White, Stephen Gentles, Suzanne Murphy, Michael Cnudde, Jessica Bethel, Layne Verbeek, Vanessa Coens, Erin Nightingale, Ishmeet Kaur, Aqdas Malik, Laura Webb, Andrea Armstrong, Carrie White, Estefania Ramirez-Tello, Margaret Spoelstra.

¹ Please cite as follows: Gentles S, White C, Murphy S, Cnudde M, Bethel J, Spoelstra M. *Readiness for the safe and successful return to school: Findings from the 2020 Autism Ontario education survey [Report]*. Toronto, ON: Autism Ontario; July, 2020.

WHO PARTICIPATED?

Figure 1: Respondents by Region



- » **2,413 CAREGIVERS** with Ontario children and youth on the autism spectrum in the education system responded to the survey, completing most or all questions.
- » Respondents completed questions for a total of **2,610 CHILDREN**—with 183 completing questions for a second child, and 22 completing questions for a third child. Of these, 64 children were in a private school setting.

“More than 20,000 students identified with ASD are currently enrolled in Ontario’s publicly funded school system.”¹ We estimate the respondents to this survey represent *approximately 10% of the complete population*.

While this is a good reach for any survey of caregivers in Ontario’s autism community, some groups may have been under-represented. For example, only people with reliable Internet access would have completed this survey.

- » 4.1% of respondents indicated they speak French most often at home. This is close to the proportion² of Francophone Ontarians (4.7%).
- » 18% are single caregivers.

¹ <https://news.ontario.ca/edu/en/2017/10/ontario-launching-pilot-program-to-support-students-with-autism-in-schools.htm>

² Profile of the Francophone population in Ontario – 2016, <https://www.ontario.ca/page/profile-francophone-population-ontario-2016#:~:text=Ontario%20has%20more%20than%20622,000,increase%20of%2010,915%20since%202011.>

Figure 2: Caregiver Gender

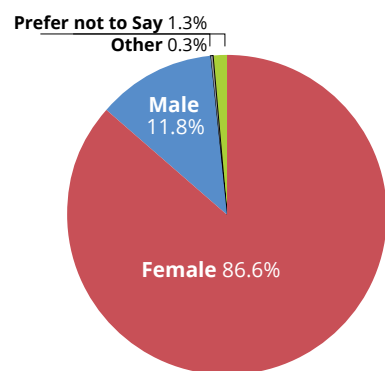


Figure 3: Child Gender

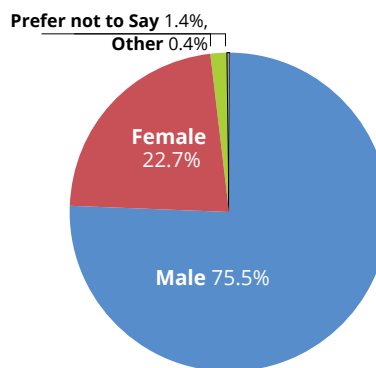


Figure 4: Indigenous or Visible Minority Status: Respondents

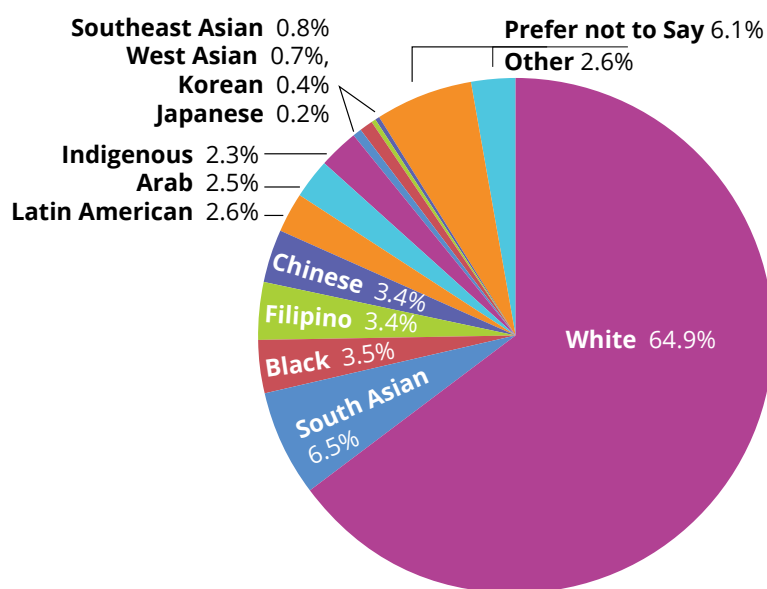
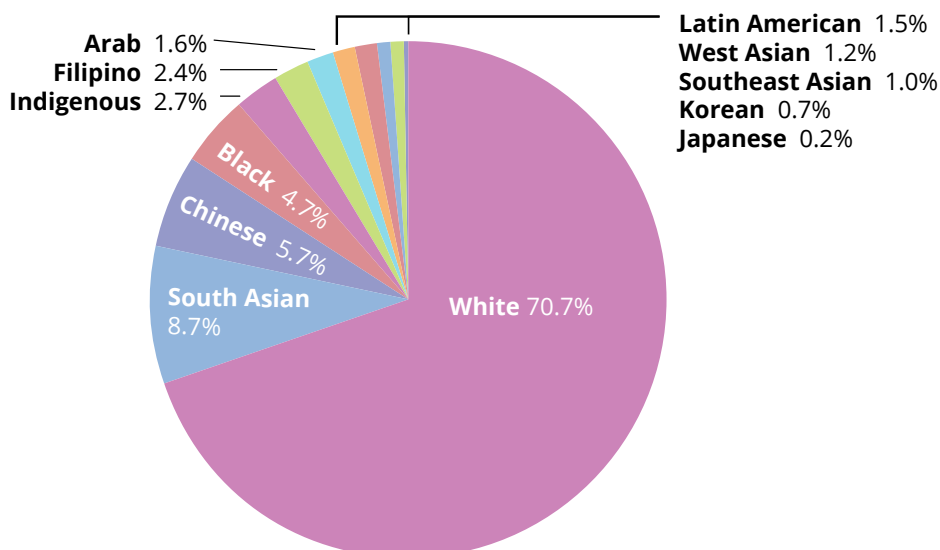


Figure 5: Indigenous or Visible Minority Status: All Ontario¹



¹ Census Profile, Ontario, 2016.

I. SPRING COVID-19 SCHOOL CLOSURE

OVERALL SATISFACTION

- » Caregivers' overall level of satisfaction with the educational experience during the spring school closure varied significantly with school board setting. The level of satisfaction tended to be higher for French Catholic and private school settings compared to English Catholic or public school settings.
- » Caregivers' overall level of satisfaction did not vary significantly with grade level (i.e., Junior Kindergarten to Grade 12); nor did it vary significantly with educational placement (i.e., regular class [n=1550], or special education class [n=729]).

Figure 6

Stratified by School Board Setting	Dissatisfied or Very Dissatisfied			Neither Satisfied nor Dissatisfied			Satisfied or Very Satisfied			Not Applicable		Total
	n	% of row	% Diff from Expected	n	% of row	% Diff from Expected	n	% of row	% Diff from Expected	n	% of row	
English Catholic	284	43.6%	-2%	176	27.0%	12%	162	24.9%	-7%	29	4.5%	651
English Public	659	45.5%	2%	357	24.7%	2%	371	25.6%	-5%	60	4.1%	1,447
French Catholic	44	36.1%	-21%	23	18.9%	-24%	52	42.6%	55%	3	2.5%	122
French Public	28	49.1%	9%	8	14.0%	-43%	19	33.3%	23%	2	3.5%	57
Private School	28	46.7%	5%	3	5.0%	-79%	26	43.3%	62%	3	5.0%	60
	1,043	44.6%		567	24.3%		630	27.0%		97		2,337

Chi Square (df)=37.61 (8), $p < 0.0001$. % Difference from Expected: Larger numbers (either positive or negative) indicate larger deviations above or below what would be expected (i.e., column total x row total / grand total) for that cell.

POSITIVE ASPECTS

Among comments about the most positive effects of the shift to home learning during the spring school closure, caregivers said the following (n=2,226):



Child's mental health benefited	25.2%
Caregiver's involvement /awareness of child's education improved	25.2%
Child's skills improved	15.8%
Less worry about child safety (bullying, flight risk, COVID exposure)	14.2%
Exceptional support from school staff	12.5%
There was nothing positive	12.8%
Other	9.9%

It gave me a chance to participate in his learning and realize how much he knows. I had no idea. We worked very successfully as he enjoys learning, math, typing and writing. It was always a positive experience as I seen him smiling the whole time. Very proud of his learning as he gained confidence.

I cannot think of one positive thing. It was absolutely financially devastating, my son has been completely frustrated and has become even more of a danger to himself, my daughter and myself. Sleep patterns are worse than ever.

L'anxiété de mon enfant a été réduit puisqu'il ne participait pas à aucun cours en ligne. *[My child's anxiety was reduced because he didn't participate in any online courses.]*

DISTRESSING OR STRESSFUL ASPECTS

Regarding the most distressing or stressful aspects of the shift to home learning during the spring school closure, caregivers' comments related to the following (n=2,302):



Extra work caring for the child at home (including lack of supports, managing time)	46.4%
Lost opportunities for the child (social, daily structure, & academics)	45.5%
Online learning	11.4%
Managing change to the child's mental health	10.1%
Impact on caregiver's employment or work	9.6%

The lack of socializing for my son had a huge impact on his mental health. He already suffers from anxiety and depression. He ended up spending a week in the hospital in early May. The doctors said that Covid played a huge part in this.

It was difficult dealing with work and school at the same time, especially with meltdowns.

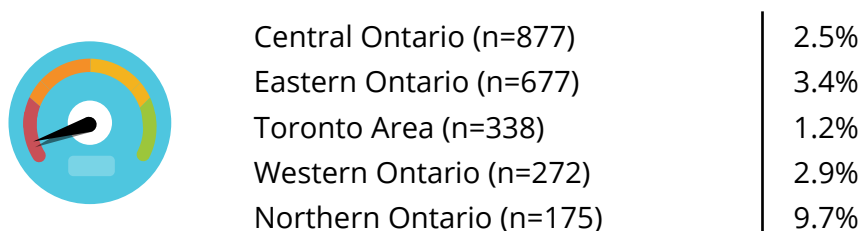
Mon enfant avait été dit par un membre du personnel de son école que les travaux en ligne ne comptaient pas envers son bulletin qu'ils se baseront sur la note du 13 mars. Donc, il a refusé carrément de faire ses tâches scolaires en ligne. Beaucoup de stress entre parent et enfant!

[My child was told by school personnel from his school that online tasks did not count on the report card, that it was based on marks on March 13th. So, he categorically refused to do his online school tasks. Lots of stress between the parent and the child!]

ACCESS AND SUPPORT FOR REMOTE LEARNING

- » Most caregivers (86.2% of 2384 responders) felt their child had sufficient access to technology to support online learning during the spring school closure.
- » Northern Ontario respondents, however, were over 8 times as likely as Toronto Area respondents to report that Internet bandwidth was a technological barrier to online learning in the spring.

Percentage of Respondents Within each Region Reporting Internet Bandwidth as a Technological Barrier to Online Learning



This finding highlights the importance of not relying on online methods as the sole means of outreach in Northern Ontario. This applies to provision of educational supports and services, and to assessing needs such as through surveys. Autism Ontario plans to supplement its province-wide online surveys with focus groups or interviews of Northern Ontario residents in the future.

Caregivers found non-online forms of remote support very useful:

- » 24.4% of caregivers' children received non-online remote forms of learning support from their school, such as books or worksheets, to support their remote learning.

Some caregivers specified the types of materials received: books (including library books, textbooks), paper resources (including worksheets, workbooks), and other equipment or materials (PECS boards, OT equipment, activity packs, crafts, visual schedules, etc.). Materials were sometimes personally delivered. A few caregivers noted how their child's teacher reacted quickly and with foresight, sending materials home at the beginning of the extended March Break.

CHILD ENGAGEMENT WITH ONLINE LEARNING

- » Overall, 36% of caregivers felt their child was sufficiently engaged in online learning during the spring school closure, while 60% of caregivers felt their child was insufficiently engaged.
- » Caregivers' impressions of their child's engagement in online learning varied significantly with grade level: Caregivers were less likely to report that children in earlier grades (grade 4 and below) were sufficiently engaged compared with children in higher grades (with the exception of grade 12). Engagement in online learning was less relevant for Junior Kindergarten.

Figure 7: Child Engagement

Stratified by Grade Level	Yes			No			Not Applicable		Totals
	n	% of row	% Diff from Expected	n	% of row	% Diff from Expected	n	% of row	
Junior Kindergarten	19	16.7%	-31%	55	48.2%	18%	40	35.1%	114
Senior Kindergarten	47	28.7%	-19%	109	66.5%	11%	8	4.9%	164
Grade 1	62	29.1%	-17%	139	65.3%	10%	12	5.6%	213
Grade 2	70	32.4%	-11%	142	65.7%	7%	4	1.9%	216
Grade 3	67	36.0%	-3%	119	64.0%	2%	0	0.0%	186
Grade 4	64	36.0%	0%	108	60.7%	0%	6	3.4%	178
Grade 5	81	40.7%	10%	116	58.3%	-6%	2	1.0%	199
Grade 6	60	35.5%	-3%	107	63.3%	2%	2	1.2%	169
Grade 7	72	40.2%	10%	104	58.1%	-6%	3	1.7%	179
Grade 8	63	38.2%	5%	98	59.4%	-3%	4	2.4%	165
Grade 9	62	41.3%	12%	87	58.0%	-7%	1	0.7%	150
Grade 10	59	43.7%	20%	73	54.1%	-12%	3	2.2%	135
Grade 11	55	47.0%	30%	59	50.4%	-18%	3	2.6%	117
Grade 12	44	32.8%	-8%	85	63.4%	5%	5	3.7%	134
Graduated in 2020	10	55.6%	49%	8	44.4%	-29%	0	0.0%	18
	835	35.7%		1,409	60.3%		93	4%	2,337

Chi Square (df)=28.91 (14), p=0.011. % Difference from Expected: Larger numbers (either positive or negative) indicate larger deviations above or below what would be expected (i.e., column total x row total / grand total) for that cell. Information about ability levels of children within grade levels was not collected.

Caregivers cited the following barriers to a child's sufficient engagement in online learning (n=892):



Child lacks interest, motivation, or attention	39.6%
Work exceeds child's ability or developmental readiness	28.0%
Caregiver lacks capacity to mediate online learning	16.5%
No online learning provided	10.3%
Technology problems	5.6%

A number of caregivers also appreciated the work their child's teacher put into online learning.

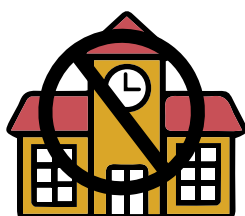
EVERYDAY his teacher sent 2 YouTube videos that he personally taught a lesson on. He sent emails, worksheets, assignments, etc. The teacher was amazing and totally dedicated.

Il n'est peu lire ni écrire, l'internet qui ne pas suffisant, oui nous avons l'appareil fournis l'école. [He can't read or write, internet was not sufficient, yes we had a device from school.]

With 4 kids in the family, Internet could be slow and sometimes we had to share devices. Also, he had to spend time setting up devices for his younger siblings. (Honestly, he is much better at tech than me so a life saver.)

IMPACT OF THE SCHOOL CLOSURE ON CHILD WELLBEING

Regarding major impacts of the spring school closure on their child's physical or mental wellbeing, caregivers' comments related to the following (n=2281):



Decreased social functioning or opportunities	47.5%
Set-backs or disruption to development	29.5%
Mental health challenges	21.1%
Decreased physical health or activity	17.2%
Lost supports or services	5.6%
Improved physical or mental wellbeing (including "happier")	8.7%
There was no major impact	5.0%

My son found it extremely difficult to deal with the uncertainties [...] For him uncertainty causes extreme anxiety and stress and he never knew if all of a sudden he'd be told he's going back to school tomorrow, next week, or not until September. He was in a constant state of stress and moderate anxiety about getting sick and/or going back to school and getting sick there.

Stims and tics exploded, he was anxious and sad a lot. He originally assumed they were strike days and when we were able to get him to understand it was sadness. His friends are his EA's. His sleep is terrible for the first time in 5 years. Scripts and trigger words are on the rise and are overtaking what he has for "normal" speech.

Elle est trop bien à la fin... le retour à l'école sera difficile. [She was very well at the end...the return to school will be difficult.]

II. RETURN TO SCHOOL IN THE FALL

When asked about what aspects of the spring school closure caregivers thought should be retained for the coming school year, they suggested the following (n=1571):

Flexibility to learn at home and at school	23.3%
Online supports	17.2%
Exceptional support from school staff	15.5%
Improved communication between home and school	12.3%
Option to learn from home	11.5%
Increased parent involvement	9.8%
Nothing should be retained	41.1%

He did not have 1:1, or any extra support at school. He greatly benefited from individualized learning at home. This must be available for him to be successful at school.

Nous avons prouvé en travaillant avec lui que lorsque des stratégies gagnantes sont utilisées, il est capable de faire des apprentissages; j'aimerais que l'accompagnant(e) de mon fils apprenne et utilise ces stratégies afin qu'il connaisse autant de succès à l'école. [We proved, by working with him, that when the right strategies are used, he is capable of learning. I would like that my son's support person learn and use these strategies so that he can experience as much success at school.]

EDUCATION PLANNING MEETINGS

Parents suggested there is need for flexibility with respect to education-based meetings (i.e., face-to-face versus online).

- » 29% of respondents (n=2287) felt that education-based meetings, such as Identification, Placement, and Review Committee (IPRC) or Individual Education Plan (IEP) meetings, should be offered face-to-face in the fall.

Reasons for preferring face-to-face meetings included better communication, privacy concerns, greater likelihood meetings will occur, greater adherence to regulations, or technology barriers to meeting online.

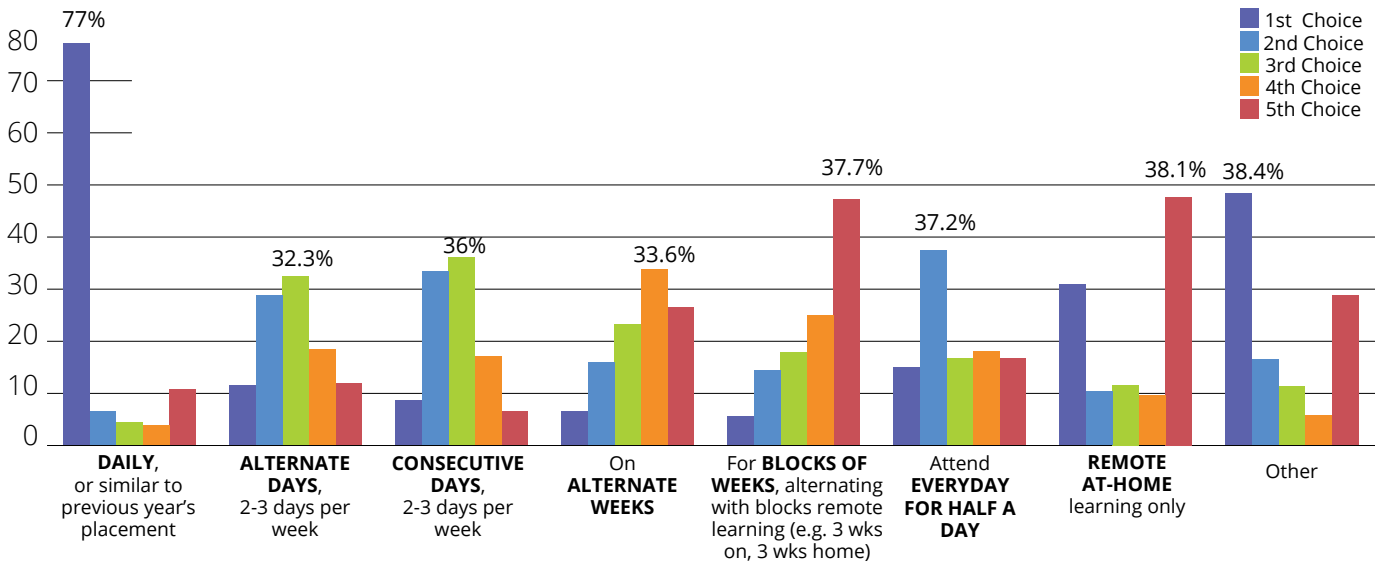
Elles devraient avoir lieu en personne, par contre, si ce n'est pas possible, elles devraient être tenues en ligne. Donc elles ne devraient pas être annulées à cause de la covid. [They should be in person, but if this not possible, they should be online. So, they should not be cancelled because of COVID.]

I think it should be at the parent's discretion. Some may feel comfortable doing online meetings, while others worry about privacy or struggle with communicating effectively remotely.

REOPENING SCENARIOS

- » While *attending school daily* was the most popular first choice reopening scenario among caregivers, preferences for alternative scenarios were variable; although attending school for blocks of weeks was a less preferred option.

Figure 8: Caregivers' Ranking of Their Top Five Preferred Choices



Of 103 caregivers who left specific comments:

- » Half noted COVID-19 safety as an important consideration in their choice—for example, doubting their child could be kept safe, or preferring to keep their child home until a vaccine was found.
- » A number of caregivers stressed the need for routine, consistency, and predictability for their child with autism with respect to scheduling.
- » In addition, caregivers highlighted the need for all children in the household to have the same schedule to minimize family stress related to coordinating childcare and employment obligations.

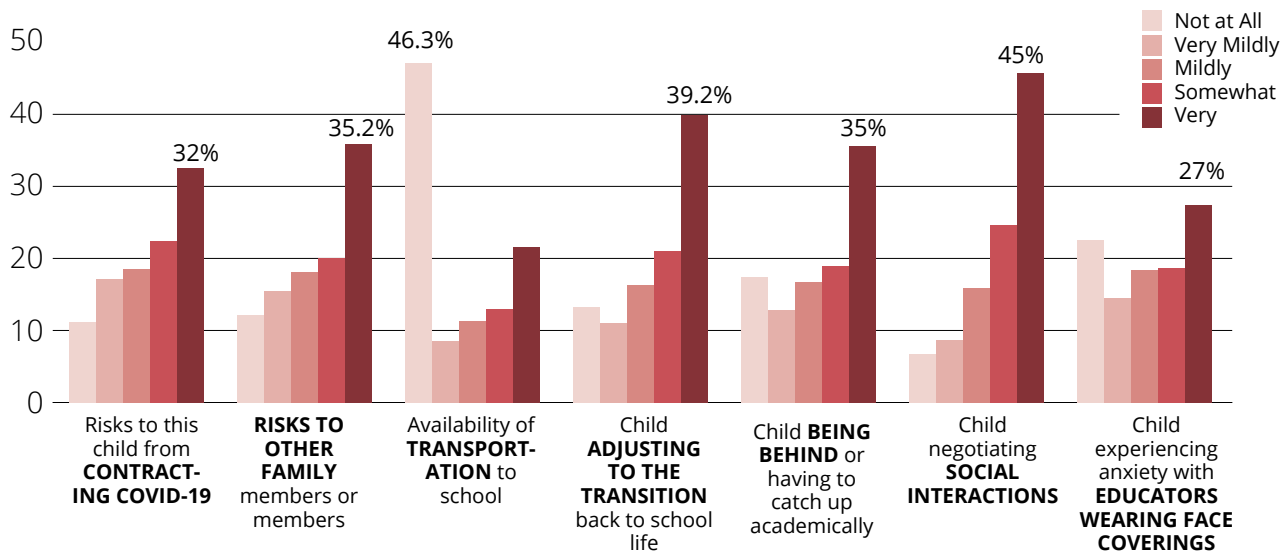
De plus, j'ai répondu selon ce qui serait le mieux pour lui, ça ne veut pas dire que c'est le scénario qui est le plus facile pour nous, considérant que ça implique encore une gestion travail/école très compliquée. [Furthermore, I responded based on what is best for him, this does not mean this is the easiest scenario for us, as it involves work/school management, which is very complicated.]

CONCERNS

Attending School

» Caregivers reported varying levels of concerns about different outcomes of their child physically returning to school. Negotiating social interactions was of high concern to the most caregivers, while transportation availability was of no concern of most caregivers.

Figure 9: Caregivers' Level of Concern Regarding Their Child Physically Attending School



Caregivers' descriptions of their biggest concerns about the return to school related to (n=2,086):



Child's adherence to COVID-19 safety expectations and restrictions	46.5%
Child managing the transition to school (including mental health, social situations or safety)	28.2%
Health risk to child or family member	22.3%
Development-related challenges	18.8%
Need for extra support or resources	10.9%
Adequate planning for positive learning environment	5.8%
Impact on the family (stress, parents' work, childcare needs)	6.7%
Had no concerns	2.6%

For part time schooling I'm concerned over his being exposed to school children and then another group of kids in a daycare. Also the extreme expenses for daycare if it's part time or home schooling.

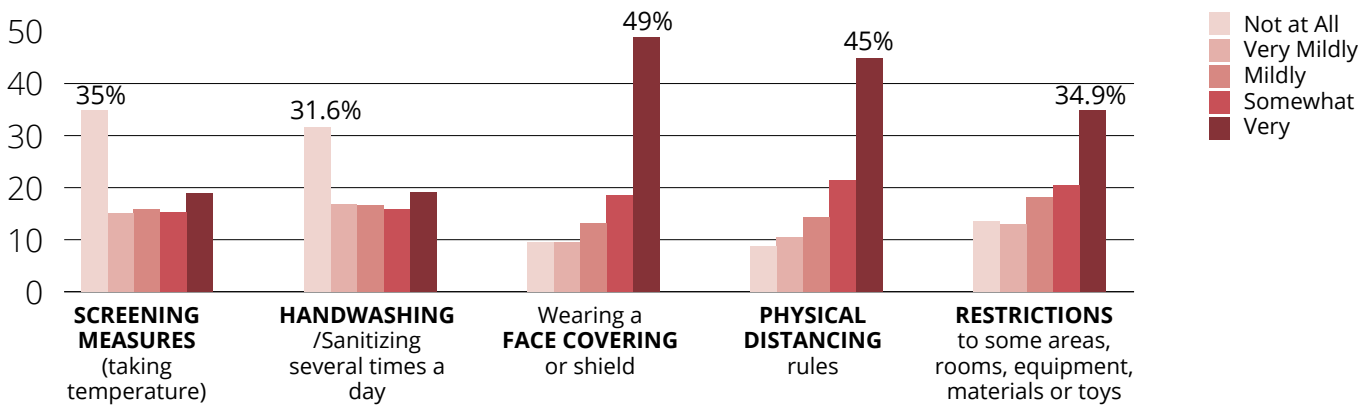
He will regress for lack of routine and consistency of a school schedule. We'd have to take a work leave of absence to care for our children.

He has a compromised immune system and an underlying heart condition, so we're very worried about him catching the virus. His health is the biggest concern.

Child's Ability to Observe Rules

» Regarding rules intended to reduce COVID-19 transmission, caregivers were more likely to be highly concerned about their child's ability to wear a face covering, observe physical distancing, and observe restrictions to areas or equipment.

Figure 10: Caregivers' Level of Concern Regarding Their Child's Ability to Observe Rules Intended to Reduce COVID-19 Transmission



Child Anxieties About Returning to School

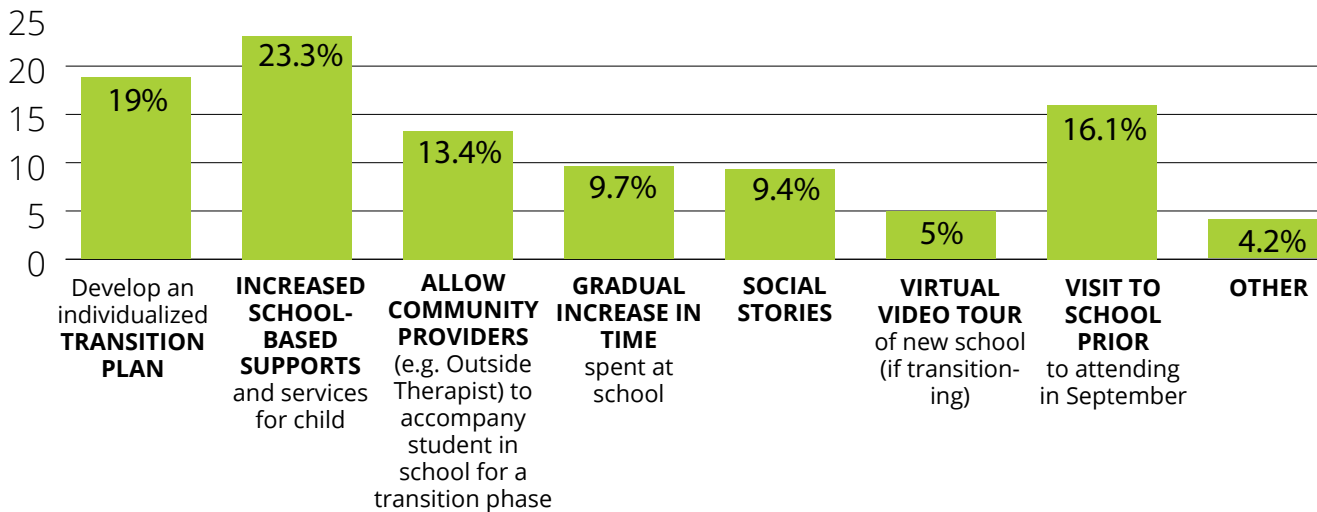
» As reported by caregivers (n=2,288), 32.4% of children expressed some form of *anxiety about the possibility of physically returning to school* this September.

Of 385 explanations for a child's anxiety, 61.8% (238) were related to COVID-19 risks or restrictions, while 42.6% (164) were related to the child's transition back to school after the prolonged absence.

SUPPORTING A SUCCESSFUL RETURN TO SCHOOL

The most commonly endorsed top need for a successful transition back to school was increased school-based supports and services, followed by an individualized transition plan.

Figure 11: Top Needs for a Successful Transition Back to School



Among 69 suggestions for supporting a successful transition back to school, 14 caregivers mentioned the *need to be clearly informed before the return to school to be able to prepare and support their child*. Some suggested transition planning had already occurred through online meetings, some of which allowed the parent and child to meet new staff or plan dates for school visits. A number of parents highlighted how COVID-19 has exacerbated the already acute need to *enhance internal supports, and allow external supports for learning, skill development, behaviour and mental health*, as students transition back to school.

