

CareCertify LLC

CareCertify Caregiver Training · Autism Spectrum Caregiving

AUT-11

Therapies, Supports & Evaluating Claims

Participant Guide

Professional Caregivers & Direct Support Professionals · A Caregiver's Guide to Autism

Updated July 2026 — FDA, peer-reviewed & clinical sources

Know the supports that help, spot the claims that don't — and understand why 'miracle cures' like stem cells are unproven and risky.

Learning Objectives — by the end of this module you will be able to:

- State the real goal of autism supports
- Name common evidence-based supports
- Discuss behavioral approaches, including ABA, fairly
- Spot the red flags of unproven claims
- Explain why stem cells and similar 'cures' are unproven and risky
- Support families and stay within your role

Section 1: The real goal of autism supports

Support the person — don't try to erase the autism.

- **Not a cure.** There is no cure for autism, and autism is not a disease to be cured — it's part of who a person is.
- **Skills & wellbeing.** Good supports build communication, skills, independence, and wellbeing, and reduce real barriers.
- **The person's goals.** Support should follow the person's own goals and quality of life — not a goal of making them 'normal.'
- **Individualized.** What helps varies by person; the right supports are chosen with the person, family, and professionals.

Section 2: Common evidence-based supports

Well-established supports many autistic people use.

- **Speech-language (SLP).** Supports communication — spoken language, AAC, and social communication — with a speech-language pathologist.
- **Occupational therapy (OT).** Supports daily living, sensory needs, motor skills, and self-regulation.
- **Physical therapy.** Supports movement, coordination, and motor development when needed.

These are supports, not cures — they help a person build skills and navigate the world more comfortably.

Section 3: Behavioral and developmental approaches

Several approaches aim to build skills and communication.

- **Behavioral.** Approaches like ABA are widely used to teach skills and communication (more on ABA next).
- **Developmental / naturalistic.** Play- and relationship-based approaches build skills in natural, child-led ways.
- **Assent & goals.** Ethical, effective support follows the person's goals, honors their assent, and protects wellbeing.

Whatever the approach, it should respect the person and aim at their wellbeing — not mere compliance.

Section 4: More common supports

A toolkit, chosen to fit the person.

- **Communication & AAC.** AAC and communication supports give every person a reliable voice.
- **Social & mental health.** Social supports and mental-health therapy address anxiety, mood, and relationships.
- **Educational (IEP).** School supports and an individualized education program (IEP) support learning and access.
- **Sensory (OT).** Sensory strategies from OT help regulation and daily comfort.

Section 5: A balanced note on ABA

Widely used — and worth understanding honestly.

- **Widely used.** Applied behavior analysis (ABA) is common and can help build communication, skills, and safety.
- **Community concerns.** Many autistic self-advocates criticize older or rigid forms that pushed compliance or suppressed natural behavior like stimming.
- **Modern ethical practice.** Good modern practice centers the person's goals and assent, wellbeing, and dignity — not making a child 'indistinguishable.'
- **Watch the aim.** Support that targets wellbeing and skills is very different from support that targets masking — aim matters.

Section 6: Red flags of unproven claims

Learn to recognize a bad claim fast.

- **Promises a cure.** Any product promising to 'cure,' 'reverse,' or 'recover' a child from autism is a red flag.
- **Miracle or secret.** 'Miracle,' 'secret,' 'breakthrough they don't want you to know' — hype, not evidence.
- **Costly & pressured.** High cost, pressure to act fast, and 'limited spots' are marketing tactics, not medicine.
- **Testimonials only.** Stories and testimonials aren't proof; look for real, peer-reviewed evidence and medical consensus.

Section 7: Unproven and risky 'treatments'

Some 'autism treatments' are ineffective — and some are dangerous.

- **Stem cell therapy.** Not approved for autism, unproven, and carries serious risks (detailed next slide).
- **Chelation.** Chelation to 'remove metals' is not an autism treatment and can be dangerous, even fatal.
- **MMS / 'miracle mineral'.** So-called 'miracle mineral solution' is industrial bleach — dangerous, harmful, and never a treatment.
- **Hyperbaric & 'detox'.** Hyperbaric oxygen and 'detox' regimens are unproven for autism and can carry risk.
- **Megadose supplements.** High-dose vitamins or supplements marketed as cures can be ineffective and harmful.
- **Any 'cure'.** Treat any product promising to cure autism as a warning sign — and consult a doctor first.

Section 8: Stem cells — the facts

Marketed heavily; not supported by evidence.

- **Not FDA-approved.** Stem cell therapy is not approved by the FDA for autism; clinics offering it operate outside approved use.
- **Unproven.** A large, rigorous trial found no significant benefit over placebo; there's no credible evidence it treats autism.
- **Real risks.** The FDA warns of serious risks — infections, tumors, and even blindness — and the treatments are very expensive.

Families are sometimes pressured to pay large sums; the honest, caring answer is that this is unproven and risky.

Section 9: Evaluating any claim

Six questions that cut through the hype.

- Where's the evidence — real, peer-reviewed studies?
- Who says so — qualified professionals or a seller?
- What are the risks and side effects?
- Does it promise a 'cure' or use pressure and secrecy?
- What does the person's own doctor say?
- Does it serve the person's wellbeing — or someone's profit?

When a claim can't answer these, that's your answer.

Section 10: Your role with treatments

Stay helpful and stay in your lane.

- **Don't prescribe or push.** It's not your role to recommend or forbid specific treatments; that's for the family and medical team.
- **Direct to good sources.** Point families to their doctor and reputable, evidence-based organizations.

- **Report danger.** If a family is considering something dangerous (like bleach or chelation), share your concern and report per policy.
- **Follow the real plan.** Support the therapies and supports in the person's actual plan, consistently and well.

Section 11: Acceptance and wellbeing

The most powerful 'intervention' is understanding.

- **Support, don't 'fix'.** The goal is a good life on the person's terms — support and accommodation, not normalization.
- **Self-determination.** Involve the person in decisions about their own supports and life as much as possible.
- **Quality of life.** Judge supports by whether they improve the person's wellbeing, skills, and happiness.

Acceptance, understanding, and the right supports do more good than any 'miracle' ever could.

Apply It — Scenarios

A family considering stem cells

A family tells you they're saving up for a stem cell clinic abroad that promises big improvements for their autistic child.

The right response: → Respond with compassion — they love their child and want to help. → Share the facts kindly: stem cell therapy isn't FDA-approved for autism, a major trial showed no benefit, and it carries serious risks. → Encourage them to talk with their child's doctor before spending money or traveling. → Point them to reputable sources and to proven supports that can genuinely help.

A 'detox' supplement pitch

A relative is urging a family to buy an expensive 'detox' supplement that claims to clear autism 'toxins.'

The right response: → Recognize the red flags — a 'cure,' 'detox,' high cost, and no real evidence. → Gently note there's no evidence autism is caused by 'toxins' to detox, and some regimens are harmful. → Encourage checking with the doctor before giving any supplement. → Report if the product could be dangerous, and keep supporting the child's real plan.

Key Terms

Term	What it means
Evidence-based	Supported by rigorous, peer-reviewed research.
SLP / OT	Speech-language pathology and occupational therapy — common supports.
ABA	Applied behavior analysis — a widely used behavioral approach with ongoing debate.
Assent	The person's willing agreement to participate in their support.
Red flag	A warning sign that a claim is unproven or unsafe.
Stem cell therapy (for autism)	Not FDA-approved, unproven, and carrying serious risks.
Chelation	A metal-removal procedure — not an autism

	treatment and potentially dangerous.
Diagnostic overshadowing	Missing a real problem by blaming everything on autism.

Check Your Understanding

1. The real goal of autism supports is to:

- A. Build skills and wellbeing — not to cure autism
- B. Cure the autism
- C. Make the person 'normal'
- D. Eliminate all autistic traits

Answer: A — Support, not cure.

2. Occupational therapy (OT) supports:

- A. Only speech
- B. Only academics
- C. Only medication
- D. Daily living, sensory needs, and self-regulation

Answer: D — OT supports daily living/sensory.

3. AAC supports give a person:

- A. A cure
- B. A punishment
- C. A diagnosis
- D. A reliable voice / means of communication

Answer: D — AAC = reliable communication.

4. A red flag of an unproven claim is:

- A. A peer-reviewed study
- B. A doctor's recommendation
- C. A modest, tested claim
- D. A promise to 'cure' or 'reverse' autism

Answer: D — Cure promises are red flags.

5. A product promising to 'reverse autism' for \$5,000 should be:

- A. Treated as a red flag; steer the family to their doctor
- B. Purchased quickly
- C. Recommended
- D. Trusted

Answer: A — Red flag; consult the doctor.

6. It is NOT the caregiver's role to:

- A. Follow the real plan
- B. Report danger
- C. Prescribe or forbid specific treatments

D. Direct to good sources

Answer: C — Don't prescribe/forbid treatments.

7. A 'detox to clear autism toxins' claim is:

A. Well-proven

B. Required

C. Harmless always

D. Unsupported — there are no autism 'toxins' to detox

Answer: D — No 'toxins' to detox.

What You Learned

- There's no cure for autism; good supports build skills, communication, and wellbeing
- Evidence-based supports include SLP, OT, PT, communication/AAC, and mental-health care
- ABA is widely used and debated; ethical support centers the person's goals, assent, and wellbeing
- Red flags: promises of a cure, miracle/secret language, high cost/pressure, testimonials only
- Stem cell therapy is not FDA-approved for autism, unproven (a major trial showed no benefit), and risky
- Avoid dangerous fads (chelation, MMS/bleach, 'detox'); consult the doctor first
- Your role: don't push treatments, direct to good sources, report danger, follow the real plan

Next: AUT-12 — supporting families, advocacy, and caregiver self-care.

Legal & Training Basis

This course is caregiver education about autism spectrum disorder, developed from current, authoritative sources including the U.S. Centers for Disease Control and Prevention (CDC), the DSM-5-TR diagnostic framework, and peer-reviewed research. It is general education for caregivers — not medical advice, a diagnosis, or a treatment protocol. Every autistic person is an individual; caregivers should follow each person's own support plan and consult qualified professionals for medical, behavioral, and dietary decisions. Current as of July 2026.

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