JK LAKSHMIPAT UNIVERSITY
Institute of Design
NAAC 'A' Grade Accredited

Supporting Autism Care at Home:
A digital platform designed to support and simplify the caregiving journey for parents and caregivers of autistic children

Student : **Reefah Alvi**

Sponsor : **A self-sponsored project**

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Programme :
Bachelor of Design (B.Des)
Interaction Design

THE GRADUATION PROJECT 2025

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"Ilm se behtar hai ishq, ishq hai rehbar-e-haqeeqat."

Allama Iqbal

Translation:
Love is superior to knowledge; love (passion) is the guide to ultimate truth. This quote reflects Iqbal's philosophy that while knowledge is important, it is love (or passion) that truly leads one to the essence of reality.



ACKNOWLEDGEMENT

I would like to extend my gratitude to he following individuals nd organisations whose support and guidance laid the foundation for this entire project.

CRC Rajnandgaon

I sincerely thank The Composite Regional Centre for Skill Development, Rehabilitation & Empowerment of Persons with Disabilities (Divyangjan)CRC Rajnandgaon for allowing me to conduct my field research within their premises. Their openness and support gave me invaluable access to the real-world caregiving ecosystem I aimed to understand and design for.

Farzana Shah

A special thanks to Farzana Shah, a mother of a child with autism and the force behind an inspiring Instagram page where she shares her journey to help and empower other mothers ,whose honest sharing offered deep insights and grounded my work in empathy and lived experience.

Dr. Sandesh Phalke

My sincere appreciation also goes to Dr. Sandesh Phalke, whose extensive experience in the field of accessibility design made him an invaluable external mentor. I reached out to him by choice, knowing his expertise would elevate the quality and inclusiveness of my work.

Dr. Devanuj Balakrishna

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JK Lakshmipat University
Institute of Design

Lastly, I thank JK Lakshmipat University, Jaipur, for providing the academic space, resources, and mentorship that shaped the foundation of this project.

PROLOGUE

As part of my **final semester at JK Lakshmipat University**, this graduation project offered an opportunity to apply my design learning to a real-world context. I conducted my research within an Autism centric organization to explore a critical issue within the autism caregiving space, using research-driven methods to arrive at thoughtful, user-centred solutions.
This document's perspective is of a young designer from understanding people around them and their needs to developing a functional intervention while reflecting on the challenges and insights that shaped the process.



JK Lakshmipat University, Jaipur, Rajasthan, India.

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01 PROJECT

1.1 Project Background
1.2 Context & Relevance
1.3 Problem Statement & Objective
1.4 Project phase & Timeline

1.1 Project Background

Understanding Autism Spectrum Disorder

Autism Spectrum Disorder (ASD) is a neurodevelopmental condition that affects communication, behavior, and social interaction. The term "spectrum" reflects the wide variability in symptoms and functioning levels among individuals. ASD is typically diagnosed in early childhood and persists across the lifespan, though its presentation evolves over time.

What is DSM-5-TR ?

DSM-5-TR stands for the Diagnostic and Statistical Manual of Mental Disorders, 5th Edition, Text Revision. It's a manual published by the American Psychiatric Association (APA) used by clinicians to diagnose mental health conditions.

DSM-5-TR Criteria and Diagnosis

According to the latest revision the DSM-5-TR (2022) ASD is diagnosed based on two core domains:

1 . Persistent Deficits in Social Communication and Interaction:

- Difficulty with social-emotional reciprocity (e.g., understanding emotions, conversations).
- Challenges in nonverbal communication (e.g., gestures, facial expressions).
- Difficulty developing and maintaining relationships.

2 . Restricted and Repetitive Behaviors (at least 2 required):

- Stereotyped movements or speech (e.g., echolalia, hand-flapping).
- Insistence on sameness or rigid routines
- Highly fixated interests.
- Atypical sensory sensitivities (e.g., hyper- or hypo-reactivity to sound, touch, light).

Symptoms must be evident in early development, significantly impact daily functioning, and cannot be better explained by another condition.

Levels of Support Needs

DSM-5-TR categorizes ASD by three support levels based on the intensity of intervention needed

Level 1 - Requires Support

- Mild symptoms, often termed "high-functioning autism.

Level 2 - Requires Substantial Support

- Marked social and behavioral impairments.

Level 3 - Requires Very Substantial Support

- Severe impairments, often with minimal speech or extreme rigidity.

1.2 Context and Relevance

This project focuses on autistic children aged 7–11, a stage when academic demands increase and social expectations intensify. Many children in this age group are in Level 1 or 2, which means they may:

- Appear verbal or "high-functioning" yet struggle with planning, emotional regulation, or independence.
- Need personalized, structured, home-adaptable tasks that are guided by therapists but supported by caregivers.

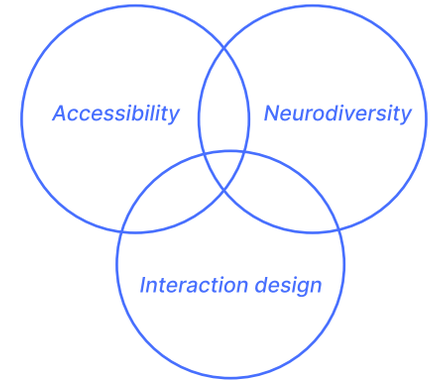
Understanding ASD not just diagnostically but ecologically — as it manifests in homes, schools, and therapy spaces — provides the foundation for designing meaningful, inclusive, and responsive caregiving interventions.

Designing a system that helps caregivers track goals, follow through on tasks, and share progress with therapists can drastically improve consistency in care and reduce caregiver stress. By understanding caregiving as both emotional labor and skillful practice, the project contributes to building inclusive health systems that recognize caregivers as active participants not just passive supporters in the developmental journey of autistic individuals.

1.3 Problem Staement & Objective

Design a solution that helps parents (of kids aged 7- 11) recognize early developmental cues, actively engage in therapy as collaborators, and integrate therapy practices at home. The solution should simplify progress tracking, provide accessible guidance for navigating resources, and create emotional support through parent networks.

- **Self-Reliance:** Helping caregivers feel equipped, confident, and capable in their role.
- **A Sense of Being Heard:** to make caregivers feel acknowledged, supported, and connected to a larger community.



This project is situated at the intersection of accessibility, interaction design, and neurodiversity. It is especially relevant in today's context where mobile technology is widely available but not necessarily leveraged for inclusive care.

1.4 Project phase & Timeline

Total Duration : 3.5 Months

Date : 15th January - April 30

PHASE 1 : Ground work exploration

Duration : 4 weeks

I explored various domains and spent a month immersed in the field, observing the system and understanding people's routines within that structure.

PHASE 2 : Sector Analysis

Duration : 3 weeks

I learned about the existing system and its branches and relationships.

PHASE 3 : Synthesis

Duration : 3 weeks

The gathered research was synthesised using various tools and methods and narrowed down to important findings.

PHASE 4 : Design Decisions

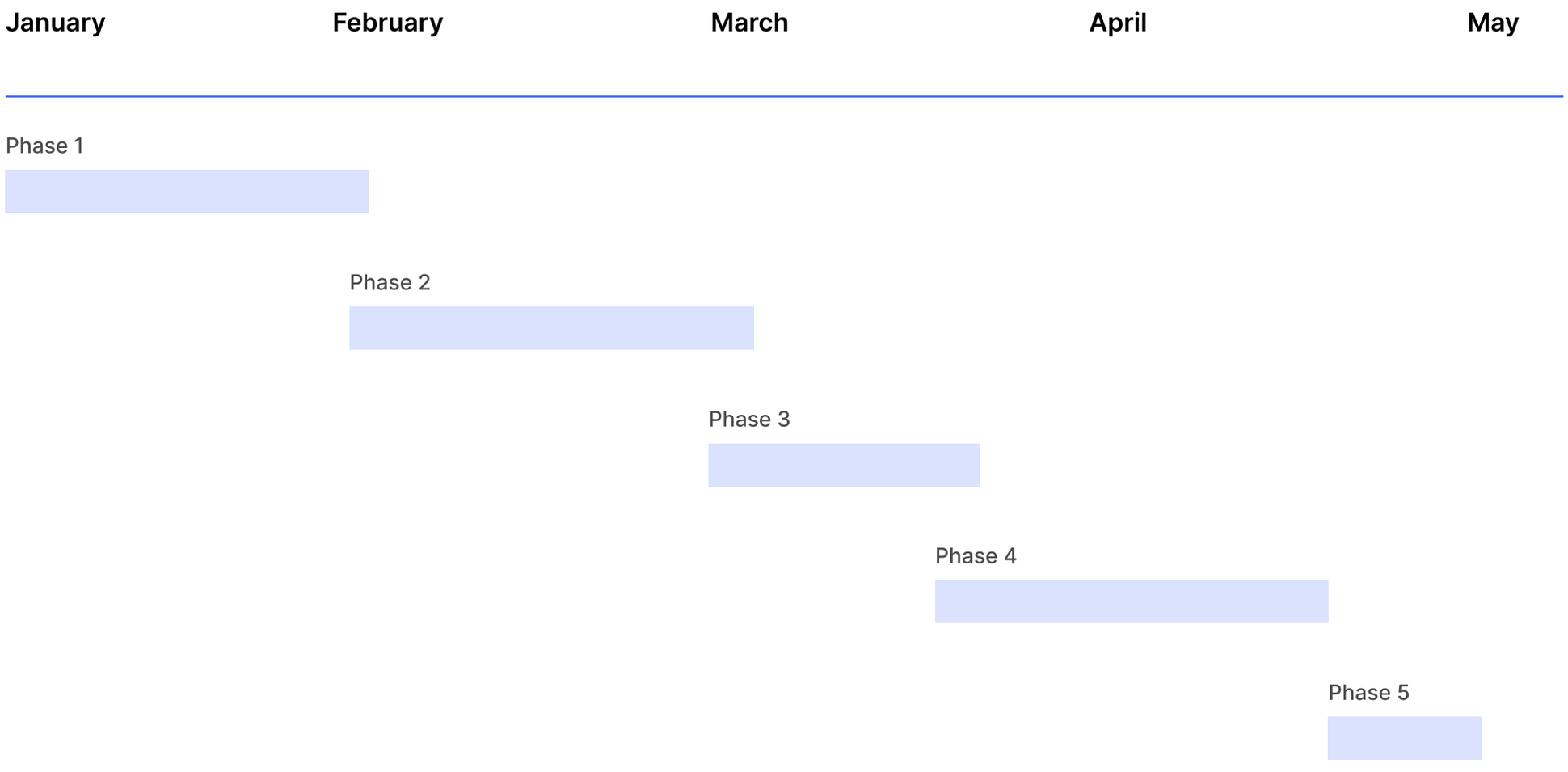
Duration : 4 weeks

On basis of my research and findings design decisions were taken to design final solution.

PHASE 5 : Documentation

Duration : 1 weeks

The final phase involves documenting the entire project process.


January
February
March
April
May
Phase 1
Phase 2
Phase 3
Phase 4
Phase 5

02 LITERATURE REVIEW

2.1 Related Case Studies & Benchmarks
(Table 1 , Table 2 , Table 3)
2.2 Design Gaps Identified

2.1 Related Case Studies & Benchmarks

Case Studies

Caregiver Well-being and Support Needs

- Caregivers of neurodivergent children, including those with Autism Spectrum Disorder (ASD), experience significantly lower quality of life due to high caregiving demands, social isolation, financial stress, and lack of accessible support (MacKenzie & Eack, 2022; Vaz et al., 2021).
- Barriers such as stigma, community disengagement, and limited knowledge of support services further exacerbate caregiver stress (Parsons et al., 2020).
- Caregivers emphasized the need for practical support like education, training, and accessible services (Iadarola et al., 2018

Interactive Technologies for Autism Support

- Interactive technologies like MaskMe, MagicBLOCKS, and Tidd demonstrated success in enhancing social skills, cognitive abilities, and daily life skills for autistic children (Wu, 2024).
- These tools effectively combined augmented reality, tangible interactions, and visual feedback, which sustained user interest and motivation.
- Collaboration with therapists and caregivers was essential for ensuring that the tools met real-world needs.

Design Guidelines for ADHD Applications (Relevance to Autism)

- Effective health informatics (HI) design requires clear visual guidelines, user-centered flow, and adaptive content (Phalke & Shrivastava, 2023).
- Guidelines emphasize using gamified, visually engaging interfaces to maintain user attention, which is also applicable for designing autism caregiving apps.
- Interviews with designers and experts revealed that a balance between engaging visuals and accessible navigation is crucial.

Table 1: Practices from Global Case studies Programs

Program	Focus	Country	USP (Unique selling point)
Early Start Denver Model (ESDM)	Early childhood therapy	USA	Play-based early intervention for toddlers with autism
Autism Speaks Community	Caregiver networking & resources	Global	Provides evidence-based tools & expert advice
Mandatory screening	Infant Screening at 12 Months: One of the few countries with nationwide autism screening as early as 12 months.	Denmark	Helps in early detection
Home based services	A government-supported program where specialist teachers visit homes to train parents in therapy techniques.	UK	Educates and train parents in home for better handling their kids
Benefits for caregivers	• Parents receive government stipends to stay home and care for neurodivergent children. • Companies offer flexible hours and paid caregiving leave.	Denmark	Helps caregivers balance their lives better

Table 2 : Feature Comparison of Autism Support Apps Globally

Tools	Function	Country	USP (Unique selling point)
TCARE	Caregiver burnout prevention	USA	AI-driven personalized self-care recommendations for stress management
Autism 360	Parent coaching & therapy tracking	UK	AI-powered customized strategies for handling meltdowns, routines & communication
HABITICA	HABITICA (Gamified Task Management App)	Japan	Helps neurodivergent individuals develop executive function skills by turning daily tasks into a game
Autism Tracker Pro	Behavior tracking & therapy logging	Global	Helps caregivers monitor emotions, sensory triggers & therapy progress
Goally	Home-based visual schedules & reminders	USA	Assists caregivers in structuring therapy, learning & daily routines

Table 3: INDIAN Case studies Programs , Practices and Applications

Category	Tool / Practice	Limitation	Strength
Developmental Screening	CDC's Milestone Tracker App	Free, evidence-based	• Only 18% Indian paediatricians recommend it • Lacks Indian household examples
AAC Tools	Avaz AAC App	11 languages, offline use	Provides evidence-based tools & expert advice
ABA Therapy	1to1 Therapy Centres	Structured programs	• 68% home implementation failure • High cost (₹1.5-2.5k/session)
Govt Schemes	UDID + Niramaya	Disability benefits , Financial coverage	• 54% need 3+ submissions • complex process, no offline help
Home Learning	Nayi Disha Kit	Free activity guides	Static content
School Advocacy	ADI Inclusion Toolkit	IEP negotiation guide	• 54% need 3+ submissions • complex process, no offline help
Telehealth	1SpecialPlace	Online speech therapy, Saves travel time	Internet dependent

2.2 Design Gaps Identified

Gap 1: Lack of User-Specific Customization

- The tools and programs mentioned lack clear user-specific customization for different levels of autism or age groups.

Gap 2: Limited Emotional and Behavioral Tracking

- Only a few tools address emotional understanding but none emphasize tracking emotional progress over time.

Gap 3: No Emphasis on Caregiver Connectivity

- Most programs and tools focus on task completion but do not facilitate communication between caregivers, therapists, and parents.

Gap 4: Insufficient Multi-Sensory Activities

- Existing tools seem limited to visual or text-based tasks. There is little focus on auditory, tactile, or kinesthetic learning.

Gap 5: Absence of Progress Tracking Feedback

- While tasks are assigned, there is no clear mechanism to provide real-time feedback or rewards for children.

03

SECTOR & SYSTEM ANALYSIS (INDIA)

3.1 Sector Overview
3.2 Existing Framework & Stakeholders
3.3 Policies, Schemes, and Institutional Landscape
3.4 Current Challenges / Gaps
3.5 Structure Mapping

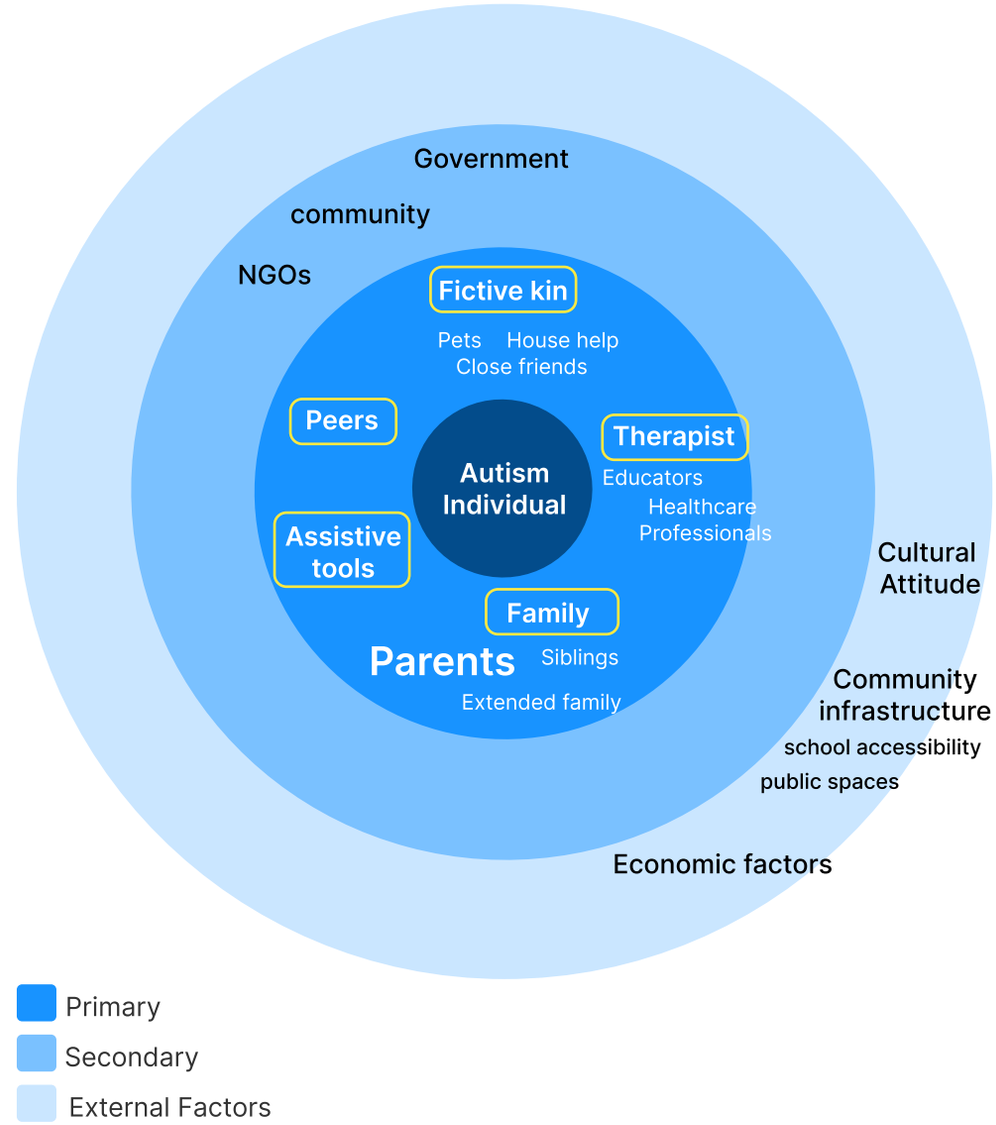
3.1 Sector Overview

Autism caregiving in India

Autism caregiving in India lies at the intersection of health, education, disability rights, and informal family labor. The rise in autism diagnoses has brought attention to neurodevelopmental disorders, but the systems supporting autistic children and their caregivers remain fragmented and often inaccessible. While clinical therapy and special education are concentrated in urban areas, the burden of day-to-day caregiving overwhelmingly falls on parents especially mothers without formal recognition, structured guidance, or technological tools tailored to their needs.

Caregiving here is not just about support; it is about navigating a complex ecosystem of diagnosis, therapy, schooling, government schemes, and emotional labor often without adequate information or systemic support.

3.2 Stakeholders



3.2 Existing Framework in India

Care Delivery Channels

- Clinic-based therapies (Speech, OT, ABA) in private centers or hospitals
- Home-based care (informal caregiving, parent-led therapy)
- Special schools & inclusive classrooms
- Community-based support via NGOs

Diagnostic & Assessment Pathways

- Pediatric neurologists, psychologists, and psychiatrists conduct diagnosis
- Tools used: INCLEN tools, M-CHAT, ADOS (Autism Diagnostic Observation Schedule), BKT ,GDT (Gessel Drawing test), ISAA (indian scale for Assessment of Autism)
- Mostly private sector–led, with long wait times and urban concentration

Support Systems

- Government bodies: RCI, National Trust, MSJE
- Schemes: Niramaya insurance, Samarth residential support
- Disability certification: needed for accessing any formal benefit
- Parent communities and NGOs

Training & Knowledge Access

- Most caregivers learn through trial-and-error or informal advice
- Structured caregiver training is rare and non-scalable

Technology & Media

- Some apps and tools exist, but few are India-specific or caregiver-facing
- WhatsApp and YouTube are informally used by caregivers

3.3 Policies, Schemes, and Institutional Landscape

#Government Policies & Initiatives

Samagra Shiksha Abhiyan (SSA)

Supports inclusive education for children with special needs, including those with neurodivergent conditions.

National Trust Act, 1999

Provides financial and legal support for caregivers through schemes like NIRAMAYA(health insurance) and GHARAUNDA (residential care for individuals with disabilities).

The Rights of Persons with Disabilities (RPWD) Act, 2016

Recognizes Autism, Learning Disabilities, and other neurodevelopmental disorders as disabilities, ensuring legal protection and entitlements.

Unique Disability ID (UDID) Card

Helps families access government benefits and healthcare services.



An issued UDID Card

#Therapy & Rehabilitation Centres

CRC (Composite Regional Centres)

Government-run centres offering therapy, diagnosis, and special education support.

NIEPID (National Institute for the Empowerment of Persons with Intellectual Disabilities)

Provides training, therapy, and vocational support.

Private and NGO-run Therapy Centres

Offer speech therapy, occupational therapy, Applied Behavior Analysis (ABA), and other interventions.

#Parent & Caregiver Support Networks

Parent-Led Support Groups

Action for Autism (AFA), Forum for Autism (FFA) and many WhatsApp/Facebook communities provide peer support.

Workshops and Training for Caregivers

Organization like Ummeed Child Development Center provide training on caregiving and early intervention strategies.



Government-supported autism care in India is provided through Composite Regional Centres (CRCs), offering diagnosis, therapy, and early intervention services.

3.4 Current Challenges / Gaps

Despite the existence of policies aimed at supporting neurodivergent individuals and their caregivers, significant gaps and challenges persist in the Indian context.

1. Limited Access to Formal Diagnosis and Early Intervention

- Diagnostic services are concentrated in urban centers, leaving rural families underserved.
- Most parents rely on schools or informal advice for the first signs of autism rather than trained professionals.

2. Fragmented Care Delivery System

- No centralized platform, split across CRC, NIEPID for training , private therapy centre.

3. Overwhelming Burden on Parents, Especially Mothers

- Day-to-day caregiving is informal, with no official recognition for the emotional and physical labor parents, especially mothers, undertake.

4. Inadequate and Inequitable Distribution of Services

- Day-to-day caregiving is informal, with no official recognition for the emotional and physical labor parents, especially mothers, undertake.

5. Insufficient Use of Technology for Caregiver Support

- Existing apps are either for children (learning) or therapists (tracking), with very few directly targeting caregivers.
- Most digital tools (like Autism 360 or Goally) are international, expensive, and not localized for Indian users.

6. Social Stigma and Cultural Barriers

7. Financial Strain and Hidden Costs

8. No Centralized Data or Record-Keeping System

04

RESEARCH & METHODOLOGY

4.1 Primary Research
(Interviews, Observations, Field Visits)
4.2 Tools Used
(Affinity Mapping, Surveys, scenario etc.)
4.3 Personas / User Profiles
4.4 User journey
4.5 Key Insights & HMW

4.1 Primary Research

In the primary research phase, I conducted in-depth interviews with parents of autistic children and experts in the field. These interviews provided firsthand insights into the challenges, coping mechanisms, and unmet needs of caregivers.

The research majorly took place in CRC Rajnandgaon as it provided me ground for diverse range and Established Government Support System making it a reliable site for understanding structured.



Google maps image

User Statements

Sample Size : 19

The objective of these interviews are to immerse in the user's daily experiences empathising with their challenges and needs enquire about their specific behaviours and preferences and probe further to uncover deeper insights

- "paida hote waqt roya nahi tha tab kisi ne bola he nhi kuch sans chal rahi thi sab kuch thik laga , vo toh baad main pata laga ye normal nhi hai rona chahiye "
- "progress record manually hota hai"
- "sir kaam dete hai par ghar jaake bhul jaati hu main copy par likhti bhi hu iski par yaad nhi ata "
- "iske papa subha jaate hai tab sota rehta ha"
- "ghar par leke baithti hu abhi jo lines karwa rahe vo karwa rahi hu ghar par"
- "school main pata laga"
- "scheme ke baare main toh nhi pata samaj nhi ata sarkari sarkari site abhi koi aayi hai kya nayi"
- "yaha aao na therapy main toh accha bhi lagta hai dusri maaon ko dekh kar baat karte hai ghar ki saas ki accha relax hojata hai "

Direct Observation 1



It wasn't just the therapy for kids **but for the parents** as well **caused exhaustion for both** the kids and parents

Mothers involvement in the therapy (family participation)

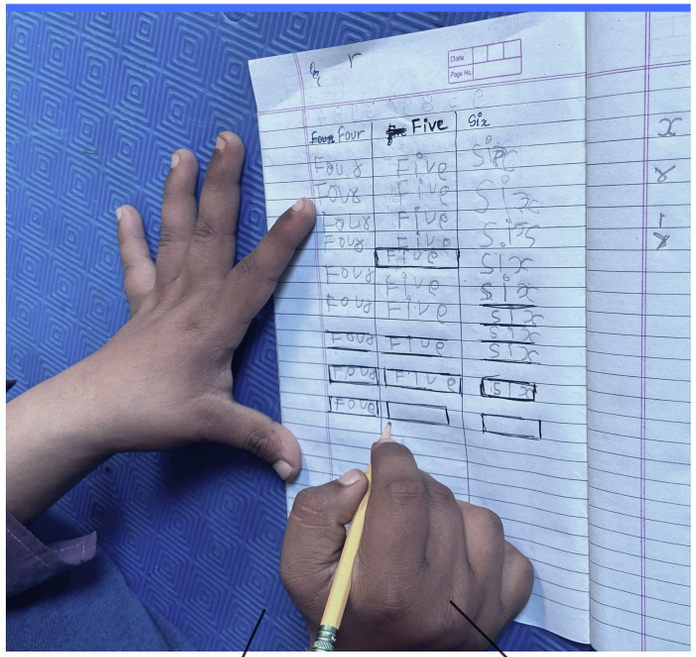
Shift from **'Treatment' to 'Empowerment'**



Each session involves 40 mins, The selection of departments such as occupational therapy (OT), speech therapy, or psychology depends on the child's diagnosis and specific needs.

The child's been engaged in a **circle**

Direct Observation 2



Every kid comes with a unique way of understanding things which **can be used to customised an approach based on the individual needs, strengths, and challenges of each child** (design personalised tools)

Before it was difficult to write when vertical lines were made **but making a box helped.**



Emotional Co-Regulation
A simple conversation or shared experience helps ease their stress.

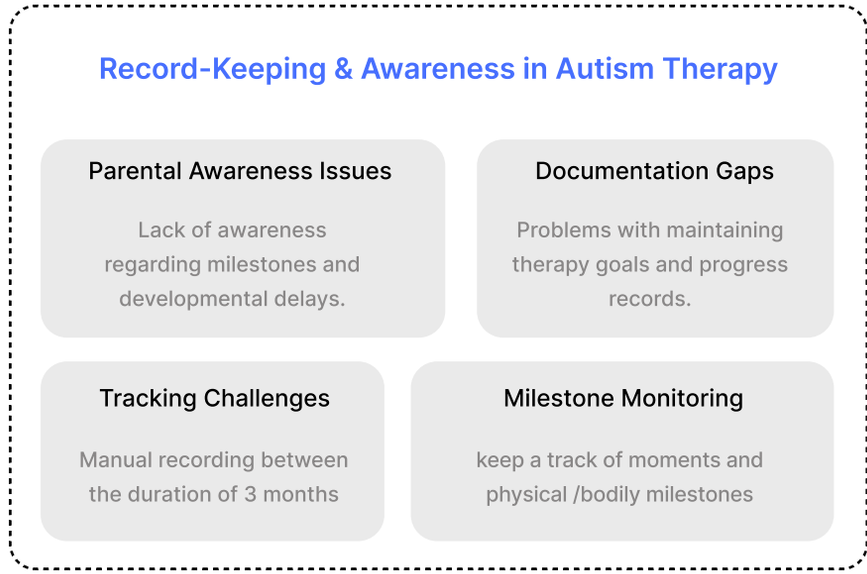
Micro-moments of relief

Between therapy sessions **Mothers find it relaxing when meeting other mothers** in the centre, they would share reports , discuss daily home chores and more

4.2 Tools Used

For this project, a combination of qualitative and analytical research methods was employed to gain a comprehensive understanding of autism caregiving:

- **Interviews**: Conducted in-depth, semi-structured interviews with primary caregivers and experts.
- **Affinity Mapping**: Used to organize and categorize interview insights, identifying common theme.
- **5 Whys Technique**: Applied to uncover the root causes of key challenges faced by caregivers
- **Scenarios :** visualizes user interactions, behaviors, and needs within a given context.



Affinity mapping- one of the patterns found

Parents struggle with home-based reinforcement due to lack of guidance or structure but they desire to have one.

Why do parents struggle to reinforce therapy at home ?

↓

Because they lack clear, actionable guidance tailored to their home environment

↓

Because therapy instructions are typically designed for clinical settings and don't translate well into the rhythms of home life.

↓

Because therapists may assume parents understand how to adapt strategies or they underestimate the complexities of family dynamics.

↓

Because there's often limited collaboration btw therapists and parents in co-creating personalized strategies.

↓

Because therapy systems often priortize standardized methods over flexible, family-centred approaches.

The challenge isn't just a lack of guidance it's that existing guidance feels disconnected from the lived realities of home life. Parents need a system that feels achievable, adaptable, and encourages small wins.

5 whys technique- one of the examples

Scenario A

Usual Case

Child: Rohan, 7 years old, recently diagnosed with autism
Location: Tier-2 City (Jaipur, Rajasthan)
Family Background: Working parents, limited awareness, some financial constraint

"Rohan's parents had concerns since he was 3 speech delay, repetitive behaviors, difficulty socializing. However, they assumed he would "catch up."

"At age 5, teachers noticed his struggle with following instructions, emotional outbursts, and difficulty adapting to routines. After multiple school complaints, the parents finally consulted a specialist, who diagnosed Rohan with autism "

Typical Challenges in India

- **Delayed Diagnosis** - Seen as a "phase" until school complaints arise
- **Inconsistent Therapy** - Limited access due to cost, distance, and awareness
- **Mother as Primary Caregiver** - Father's involvement remains minimal
- **School Challenges** - Lack of inclusive learning environments





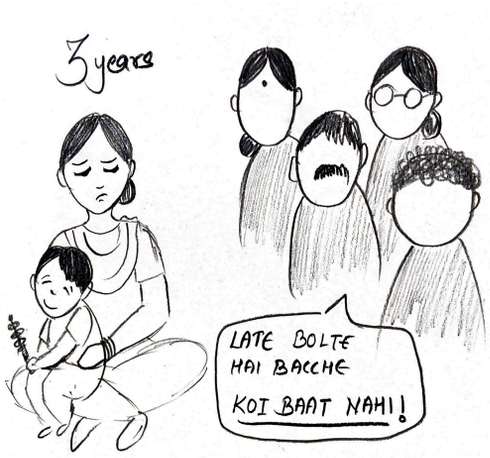


Scenario B

Worst Case

Child: Aarav, 6 years old, diagnosed with moderate autism
Location: Rural India (small town in Uttar Pradesh)
Family Background: Lower-middle class, single mother, no access to specialized therapy

" Aarav's mother noticed unusual behaviors early-lack of eye contact, speech delay, and sensitivity to noise. However, family members dismissed her concerns, saying, “late bolte hain, koi dikkat nahi”

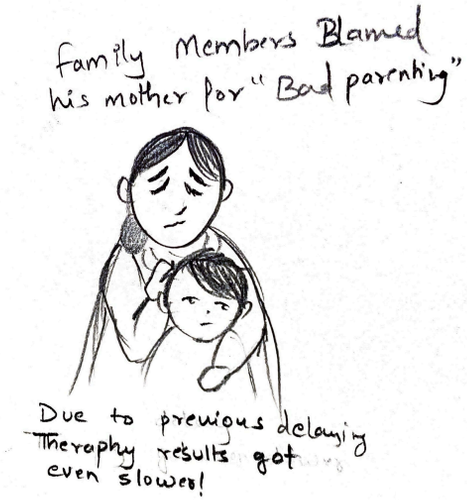


By the time Aarav turned 6, his behaviors became more intense - frequent meltdowns, difficulty interacting with peers, and an inability to communicate his needs. Schools refused admission, citing lack of resources for "special children."



Key Issues

- **Delayed Diagnosis** -Missed early intervention window
- **Slower Therapy Rate** - Due to severe case it takes longer therapy time
- **Emotional struggles & Breakdown of Mother (caregiver)**



Scenario c

Ideal Case

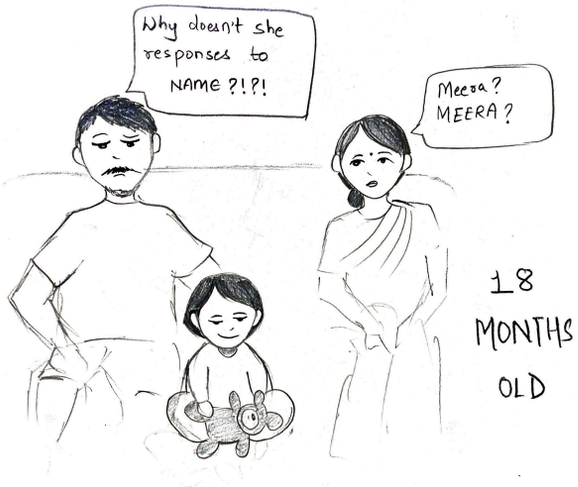
Child: Meera, 4 years old, diagnosed with autism at 8 months
Location: Bengaluru, Karnataka
Family Background: Educated, middle-class, proactive parents

"Meera's parents noticed early signs—lack of response to name, repetitive behaviors, and speech delays. Instead of ignoring them, they consulted a developmental pediatrician, who confirmed an autism diagnosis at 8 months".

Due to early intervention by age 3 her condition was stabled and handled better for mothers they had a once in a 15 days meet to share , create a sense of belongingness ,note progress and neutralise stress

Key steps

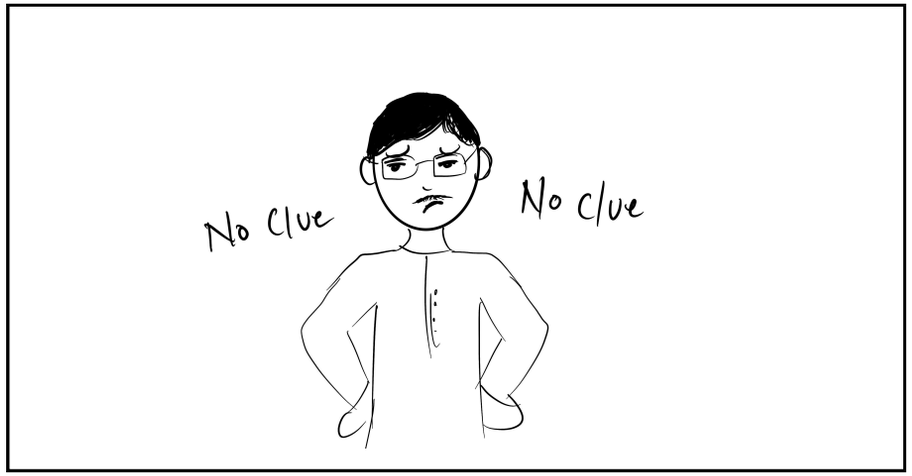
- **Early Diagnosis & Intervention** -Therapy started at 8 months
- **Parental Awareness & Proactive Approach** - Active learning & involvement.
- **less Emotional struggles & Breakdown of Mother (caregiver)**
- **Stepping in of schools in therapy** - easy and effective







4.3 Personas



The Newly Diagnosed Parent (Anxious Beginner)

Name: Mehul Sharma
Age: 32
Occupation: School Teacher
Child's Age: 5 years
Diagnosis Stage: Recently diagnosed with Autism Spectrum Disorder.

Pain Points:

- Overwhelmed by medical jargon and therapy options.
- Struggles to understand what therapy her child needs.
- Lacks clarity on how to integrate therapy into daily life.
- Feels isolated, unsure if she is doing enough.

Goals: Wants to know the right steps for early intervention and ensure his child's progress without feeling lost.



The Experienced Caregiver (Confident Navigator)

Name: Rajni Sharma
Age: 40
Occupation: Marketing Manager
Child's Age: 10 years
Diagnosis Stage: Diagnosed at age 3; in therapy for 7 years.

Pain Points:

- Knows the therapy goals but struggles to maintain consistency at home.
- Feels burnt out managing work, therapy, and home life.
- Has difficulty tracking progress without a clear system.

Goals: Wants a system to easily track and update progress without feeling burdened.



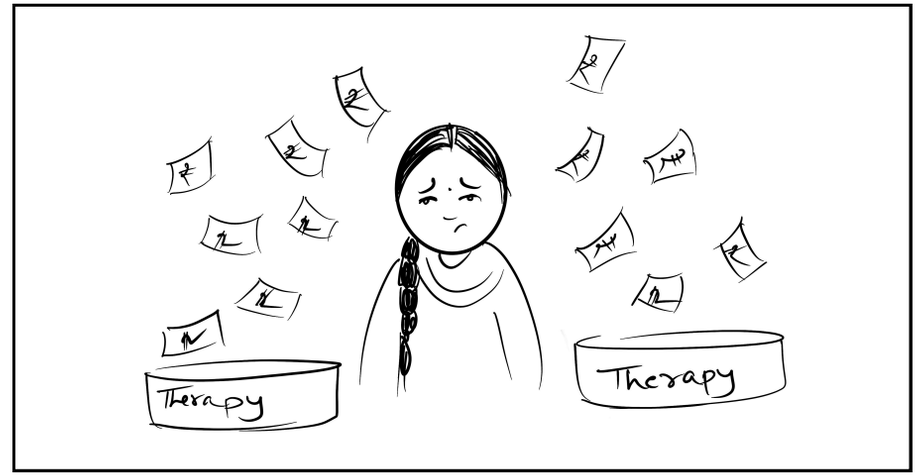
The Over-Informed Parent (Lost in Options)

Name: Shalini Verma
Age: 35
Occupation: Homemaker
Child's Age: 7 years
Diagnosis Stage: Diagnosed at age 4.

Pain Points:

- Consumes a lot of information online (videos, articles, webinars) but feels confused.
- Tries different therapies but lacks a consistent approach.
- Cannot distinguish between reliable and unreliable advice.

Goals: Wants a clear, guided approach that aligns with her child's needs without the overload of conflicting information.



The Underserved Parent (Resource-Limited)

Name: Seema Yadav
Age: 29
Occupation: Domestic Worker
Child's Age: 6 years
Diagnosis Stage: Diagnosed at age 4 but has no consistent access to therapy.

Pain Points:

- Cannot afford expensive therapy.
- Has limited access to medical professionals.
- Feels helpless and judged by her community for her child's condition.

Goals: Wants affordable, accessible support and a simple way to track her child's progress without feeling overwhelmed.

4.4 User journey

"Is This Normal?"
(Ages 1.5–2.5 Years)

Touchpoint
- Family gatherings ("Boys talk late!")
- Paediatrician visits ("Wait and watch")
- YouTube parenting videos

Emotions
- Confusion
- Self-doubt
- Occasional panic

Pain point
- No clear developmental guidance at routine checkups
- Cultural dismissal of early signs

"Something's Wrong"
(First Crisis – Age 3)

Touchpoint
- "Teacher meetings ("He's just spoiled")
- Late-night Google searches
- Arguments with husband/in-laws
- Preschool complains Arjun "doesn't follow instructions"

Emotions
- Guilt ("Did I cause this?")
- Isolation

Pain point
- schools label behaviors as "discipline issues"
- No local parent networks

Diagnosis Limbo
(3.5 Years)

Touchpoint
- Government hospital (6-month waitlist)
- Private clinic (₹5,000 for 15-minute assessment)
- Facebook parent groups

Emotions
- Bureaucratic fatigue
- Information overload

Pain point
- No guidance on what to do while waiting
- UDID application rejected twice for missing documents

Therapy Trial & Error
(Age 4)

Touchpoint
- ABA centre (30km commute)
- WhatsApp updates from therapist
- Failed attempts at home exercises

Emotions
- Hope → Frustration ("Why won't he do this at home?")
- Financial stress

Pain point
- Therapy feels disconnected from home life
- No way to track small wins

Advocacy & Acceptance
(Age 5+)

Touchpoint
- IEP meetings at school
- Local parent meetups
- Filing RTI for disability benefits

Emotions
- Empowerment
- Exhaustion

Pain point
- Schools demand "normalcy" for inclusion
- Lack of peer mentors

4.5 Key Insights

Insights were revised after validating from professionals

- Missed Early Signs: The issue isn't just lack of awareness - **it's how developmental guidance is structured, communicated, and normalized in daily life.**
- Tracking Challenges: The problem isn't forgetting to track - **tracking feels like a chore, judgmental**, or designed for professionals rather than parents.
- Home-Based Support Gap: The challenge isn't just time or discipline - t**herapy is often seen as rigid and session-based (clinical) rather than adaptable to everyday routines.**
- **Schools becomes the first place of diagnostic** for kids with neurodiversity than parents themselves.
- Mothers turn to other mothers not just for answers but for validation, reassurance, and **a sense of belonging**.
- Navigating Systems: The issue isn't just awareness of certifications, schemes, and UDID - it's about accessibility, guidance, and trust in **navigating complex systems.**
- Parental Guidance Struggles: Existing guidance feels disconnected from real-life parenting, making it hard to apply at home. **Parents need systems that are achievable, adaptable, and encourage small wins.**

How Might We

- HMW make **developmental milestones feel like natural observations** (Noticed your child lining up toys? Here's why that matters)?
- HMW **turn daily routines** (meals, small chores) **into therapy** moments without overwhelm?
- HMW help parents **track progress in a way that feels like storytelling**, not report cards?
- HMW create judgment-free zones **(No advice, just same behen)**
- HMW design tools where **therapists and parents co-create goals** (This week, focus on pointing during bath time)
- HMW **make it less clinical in visual sense ,use playful visuals** (a growing tree where leaves = milestones) instead of grids
- HMW let **parents define their own metrics** (Less screaming during haircuts) , allow them to design their day
- HMW use **local mentors (moms who've succeeded) to guide others** through schemes?
- HMW **simplify UDID applications into picture-based checklists**
- HMW **gamify bureaucratic steps** (Complete Step 1 → Unlock 'Disability Rights 101' badge)

05

DESIGN SCOPE & INTENT

5.1 Scope of the Project
5.2 Target Audience
5.3 Leverage Points
5.4 Intent

5.1 Scope of the Project

Constraints:
Requires caregiver involvement for task tracking, and relies on therapist-provided skill recommendations.

Objectives:
To design an autism caregiving app that helps caregivers track skill development for autistic children aged 7–11 through home-adaptable tasks and therapist-assigned goals.

Exclusions:
Not intended for children below 7 or above 11, emergency support, or behavioral management.

Deliverables:
A fully functional app with task tracking, progress monitoring, skill customization, and caregiver feedback features.

Inclusions:
Skill tracking, customizable home-adaptable tasks, therapist recommendations, and caregiver feedback.

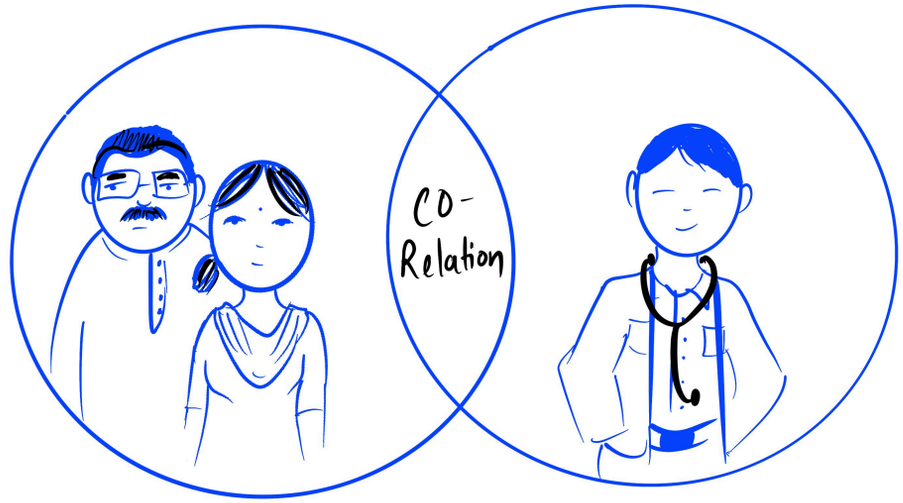
Boundaries:
The app focuses on home-based skill development, excluding direct therapy or medical diagnostic capabilities.

5.2 Target Audience

The primary target audience for this project includes:

- Parents or primary caregivers of children with autism (aged 7-11).
- Special educators who guide parents on home-based activities.
- Child therapists seeking a tool for assigning and tracking progress.

Secondary audiences include healthcare professionals, social workers, and autism advocacy organizations who may recommend the app to families.



5.3 Leverage points

Customizable skill tracking

Skills are categorized based on the child's specific challenges, allowing personalized guidance.

Building a strong community

A dedicated space for parents from different regions and experiences to engage, share insights, and support one another.

Home-adaptable activities & Visual progress tracking

Clear progress updates that motivate continued efforts, with tasks designed for easy completion in a home setting.

Evidence-backed design

Activities are derived from clinically recommended practices and expert feedback.

5.4 Intent

The intent of this project is to create a supportive solution for autism caregivers, empowering them with clear, actionable guidance for skill-building in a home-adaptable setting.

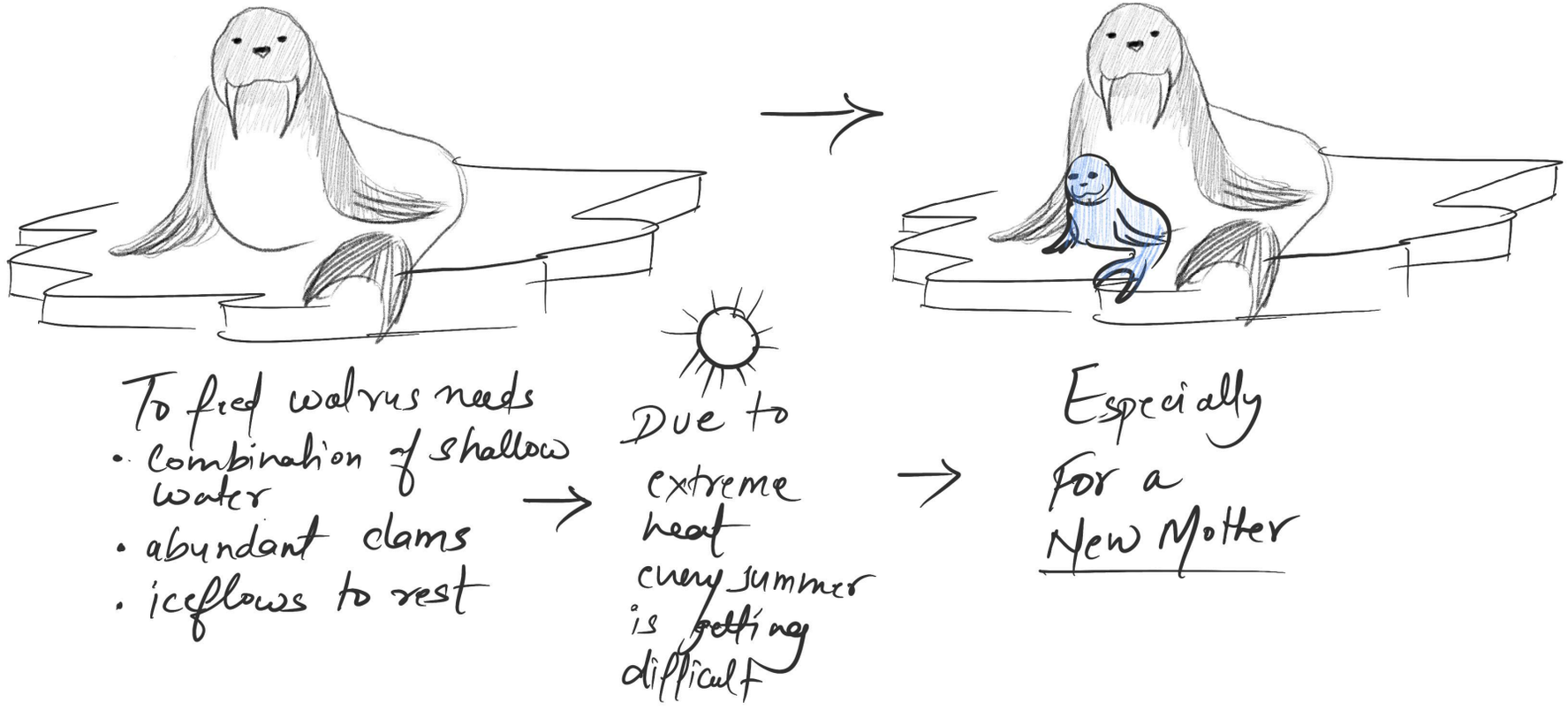
The design runs on empathy, clarity, and adaptability, ensuring that the platform is a reliable partner for caregivers on their journey.

06 CONCEPT DEVELOPMENT

6.1 Sketches
6.2 Explorations & Alternatives

6.1 Sketches

Inspired by Our Planet, exploring how mothers across different species provide care and nurture their young.



What could help Mama Walrus in this situation?

She goes on search to find her herd to look after the calf for her, so she can go long enough to find food.



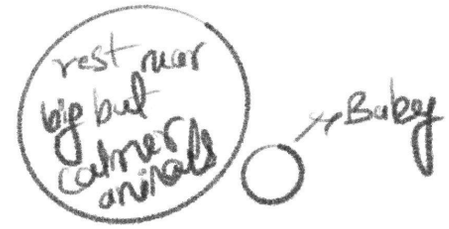
Games task to engage



easy direction to return



Robot Walrus Babysitter



Sea Allies



Look for experinced Mom



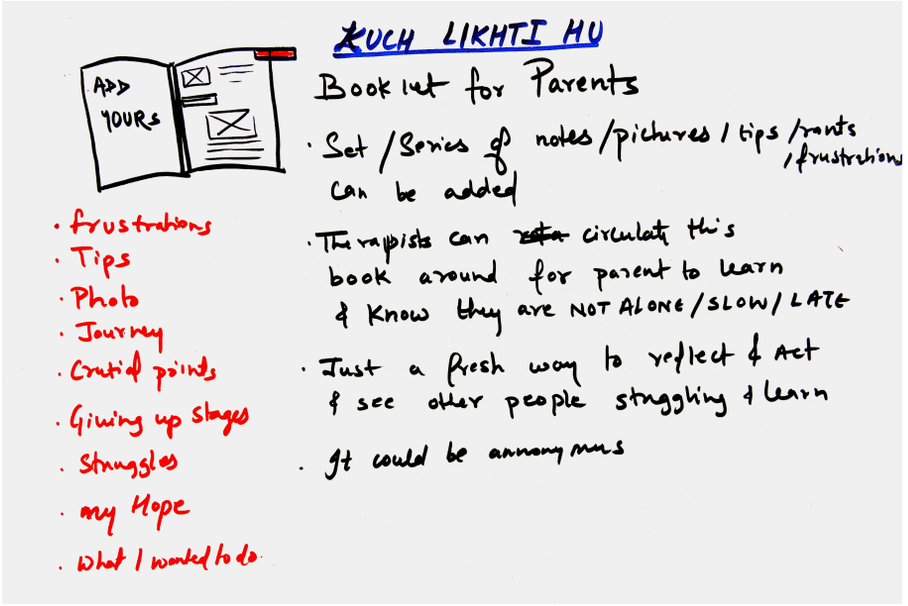
Visual alert - When kid is in danger / Vocal alerts

6.2 Explorations & Alternatives

1 . Kuch likhti hu

A specially designed journaling experience for mothers, providing a space to express thoughts, share experiences, and document moments.

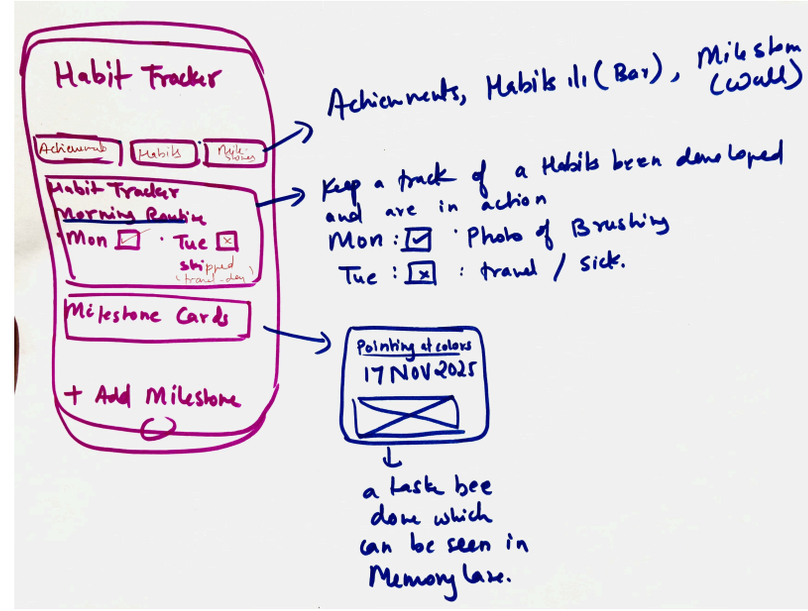
- **Content Variety**: Includes a series of prompts, notes, picture spaces, practical tips, and discussions on sensitive topics.
- **Experience Sharing**: Can be circulated between parents through therapists, allowing them to add their insights and experiences.
- **Supportive Space**: Encourages emotional expression and mutual support among parents.

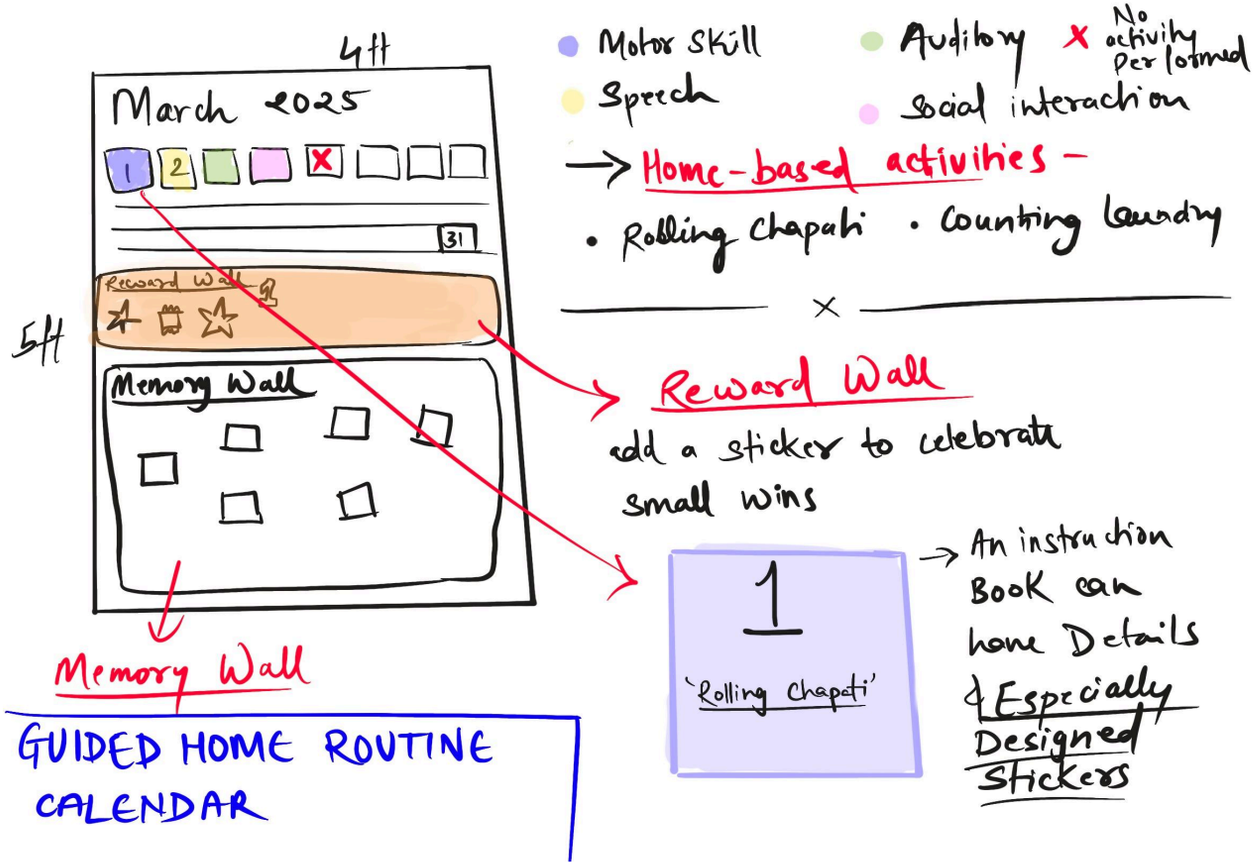


2 . Caregiving Support App

Comprehensive digital platform designed to streamline caregiving for children with Autism Spectrum Disorder (ASD).

- **Progress Tracking**: Monitor skill development and task completion in real-time.
- **Home-Adaptable Activities**: Assign personalized tasks that can be easily practiced at home.
- **Caregiver Connectivity**: Foster communication between caregivers, therapists, and parents.
- **Simplified Navigation**: User-friendly interface that makes complex caregiving processes easy to manage.





3 .Guided home routine calendar

The Guided Home Routine Calendar is a daily activity planner designed to help children with Autism Spectrum Disorder (ASD) develop essential skills identified by their therapist. Each day, the child completes a task linked to a specific skill, with tasks color-coded for easy recognition.

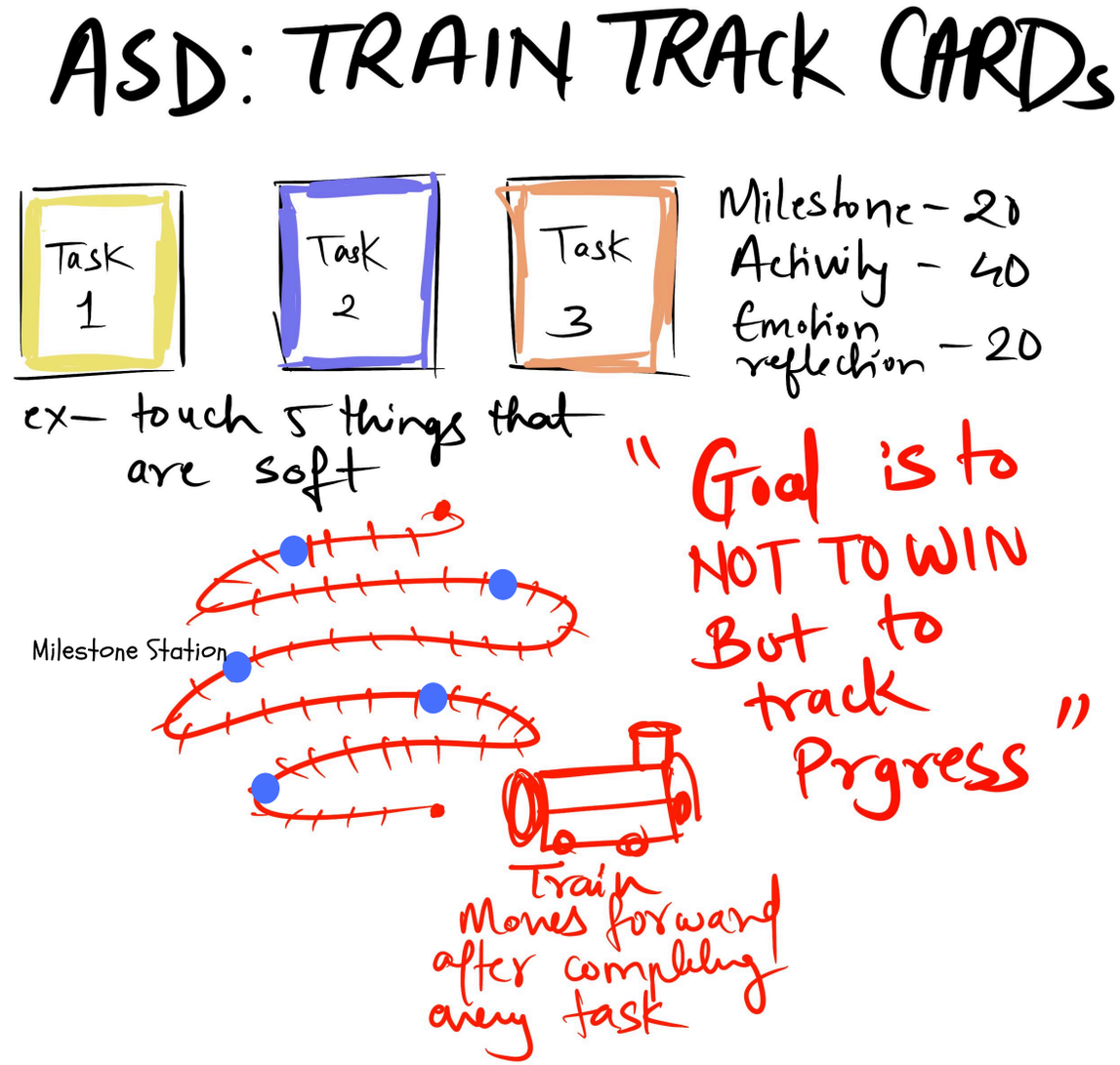
- Task Completion: Upon completing a task, the child earns a star on the Record Wall.
- Memory Wall: A photo can be taken and added to the Memory Wall as a keepsake of their achievement.
- Monthly Routine: This guided routine repeats each month, encouraging consistent skill development.

4. ASD Train Track Cards

Train Track Cards is a deck of 80-100 cards designed to support skill development in children with Autism Spectrum Disorder (ASD). The deck is categorized into three color-coded types:

- Yellow Cards (Milestone Tasks): Represent challenging tasks that require higher skill levels.
- Purple Cards (Simple Tasks): Represent basic, easily achievable tasks.
- Red Cards (Emotion Reflection Cards): Encourage children to express and understand their emotions.

As children complete each task, a small train toy moves forward along a track, visually representing their progress. The objective is to motivate children by tracking their achievements as the train reaches each milestone station.



07

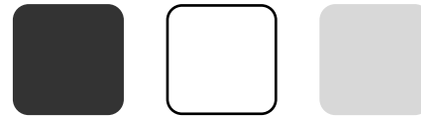
Design Decisions

7.1 User-Centred Design Decisions
7.2 Information Architecture
7.3 Wireframes

7.1 User-Centred Design Decisions

Color Scheme

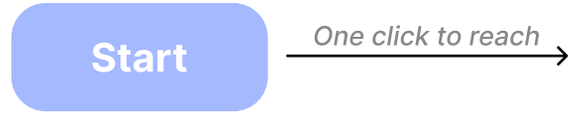
- Darker tones used for the color scheme to promote a calming atmosphere, reduce eye strain making it more comfortable for parents or caregivers
- Better Contrast and Readability
- Design aims to create a non-distracting, focused environment.



Primary colors for the app

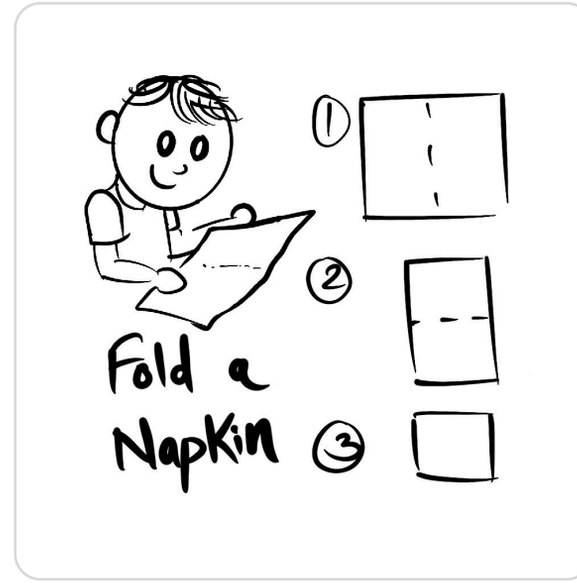
Simple Interaction Design

- Maintaining a clean layout with minimal movement/animation and a clear, straightforward flow.
- Click-to-open mechanism for ease of use, reducing cognitive load.
- Contrasting/ clickable/ attention grabbing

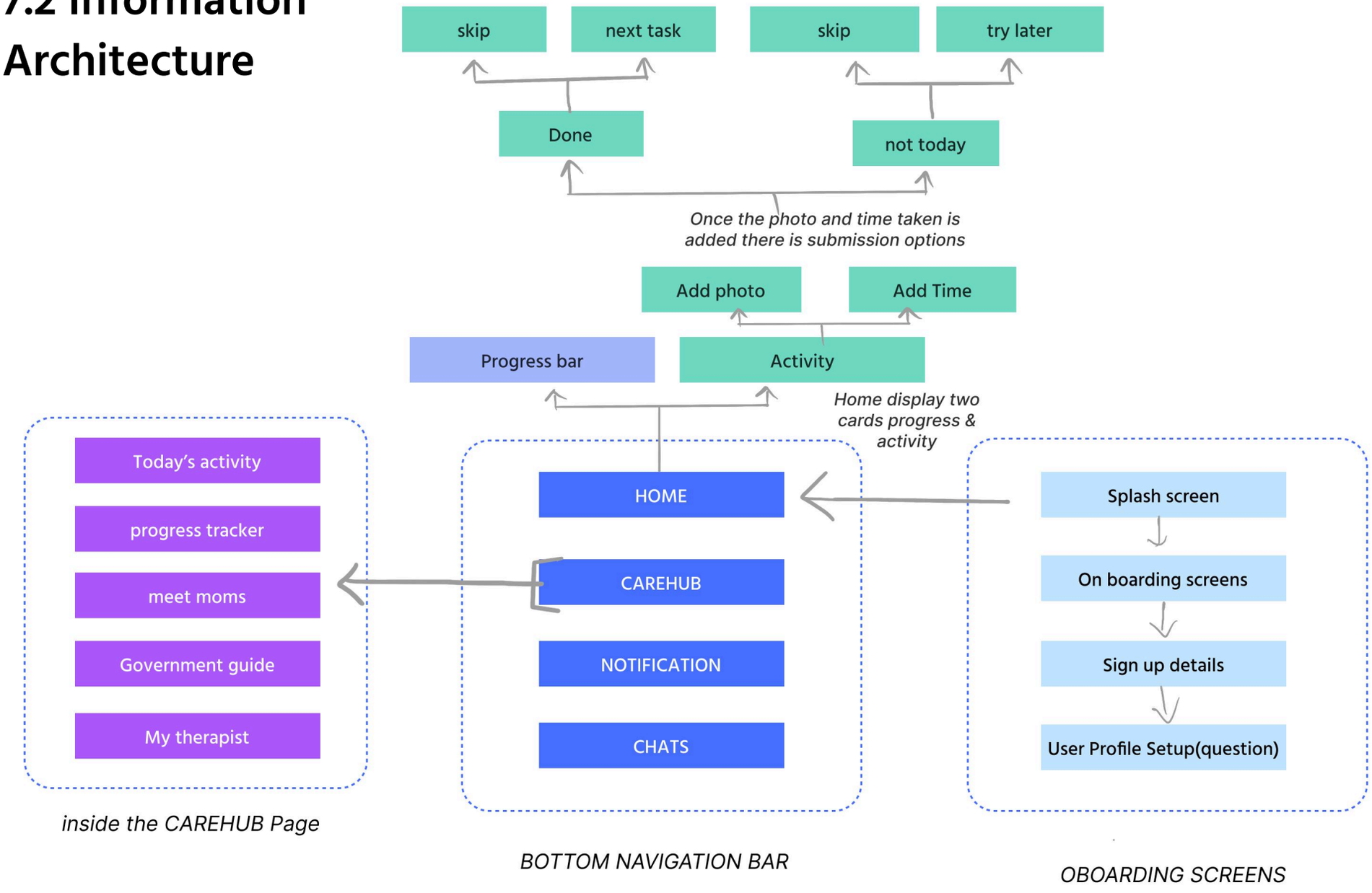


Illustrations for Task Understanding

- Simple line drawings /Visual aids added to represent instructions and progress tracking.
- Helps caregivers better understand and engage with tasks.
- Gives clarity, especially for those not familiar with technical language.

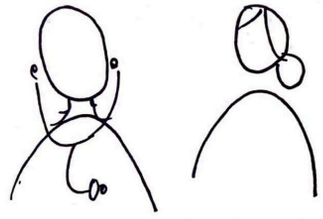


7.2 Information Architecture

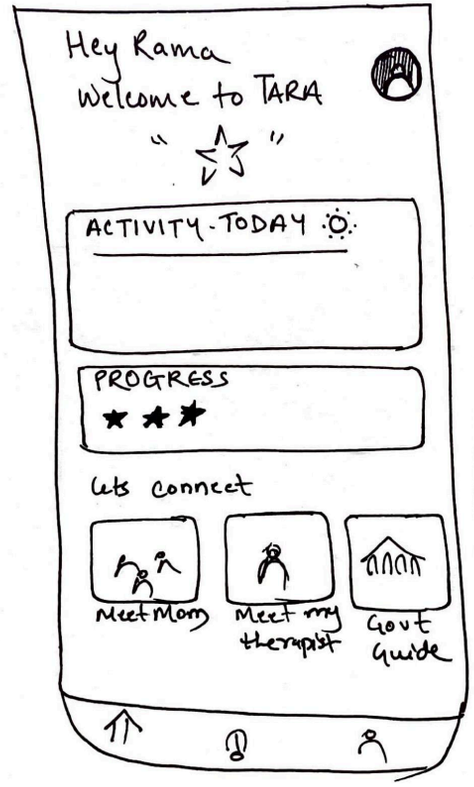


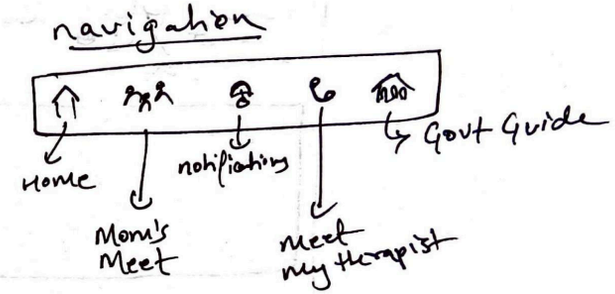
7.3 Wireframes

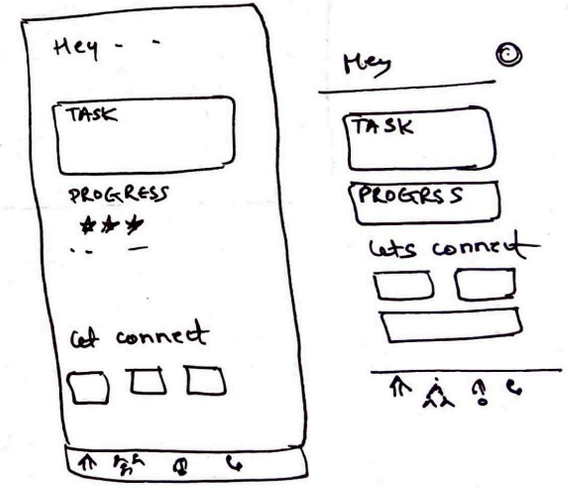
Home screen



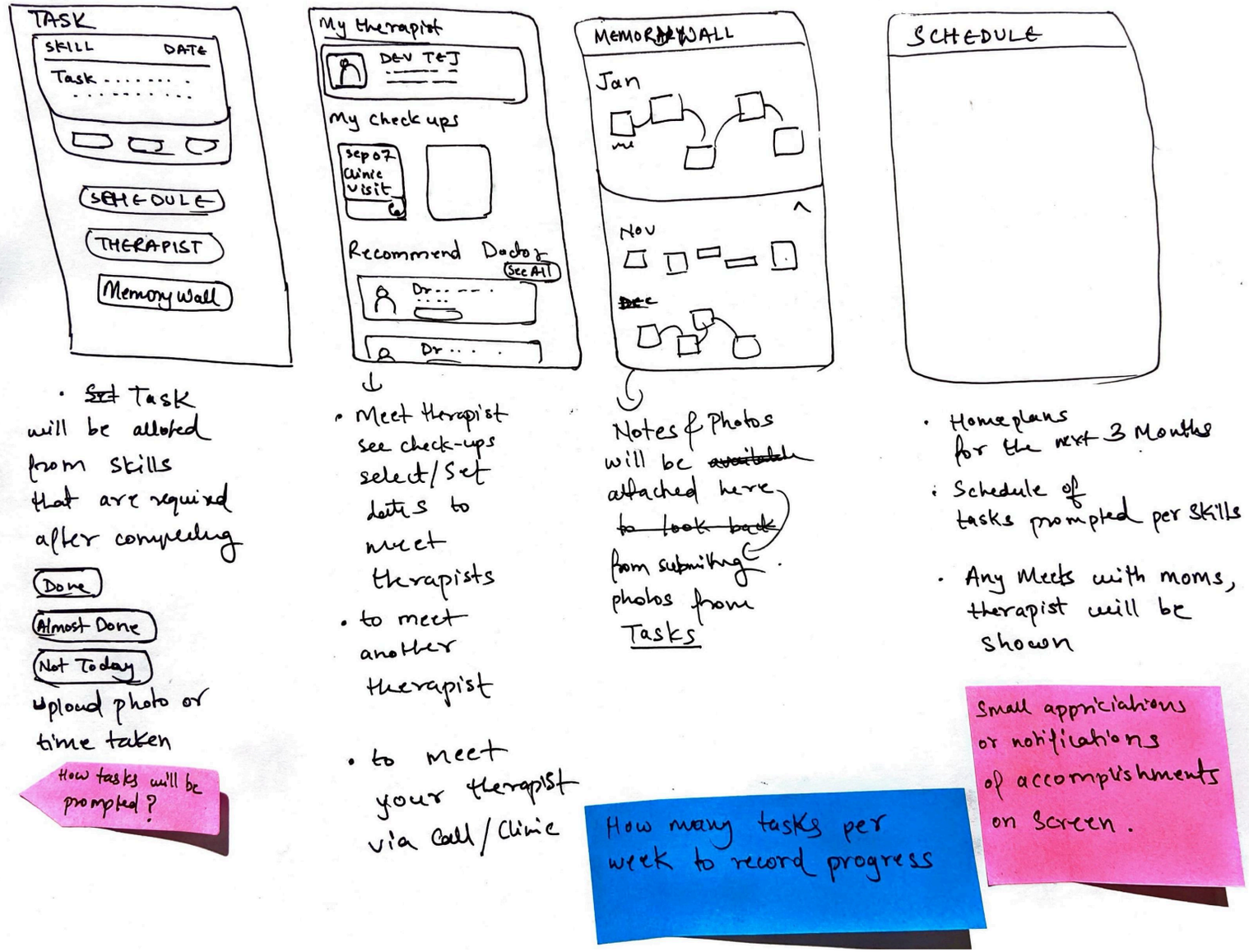
Physically Meet Therapist & discuss Homeplans or Skills which needed to work on.

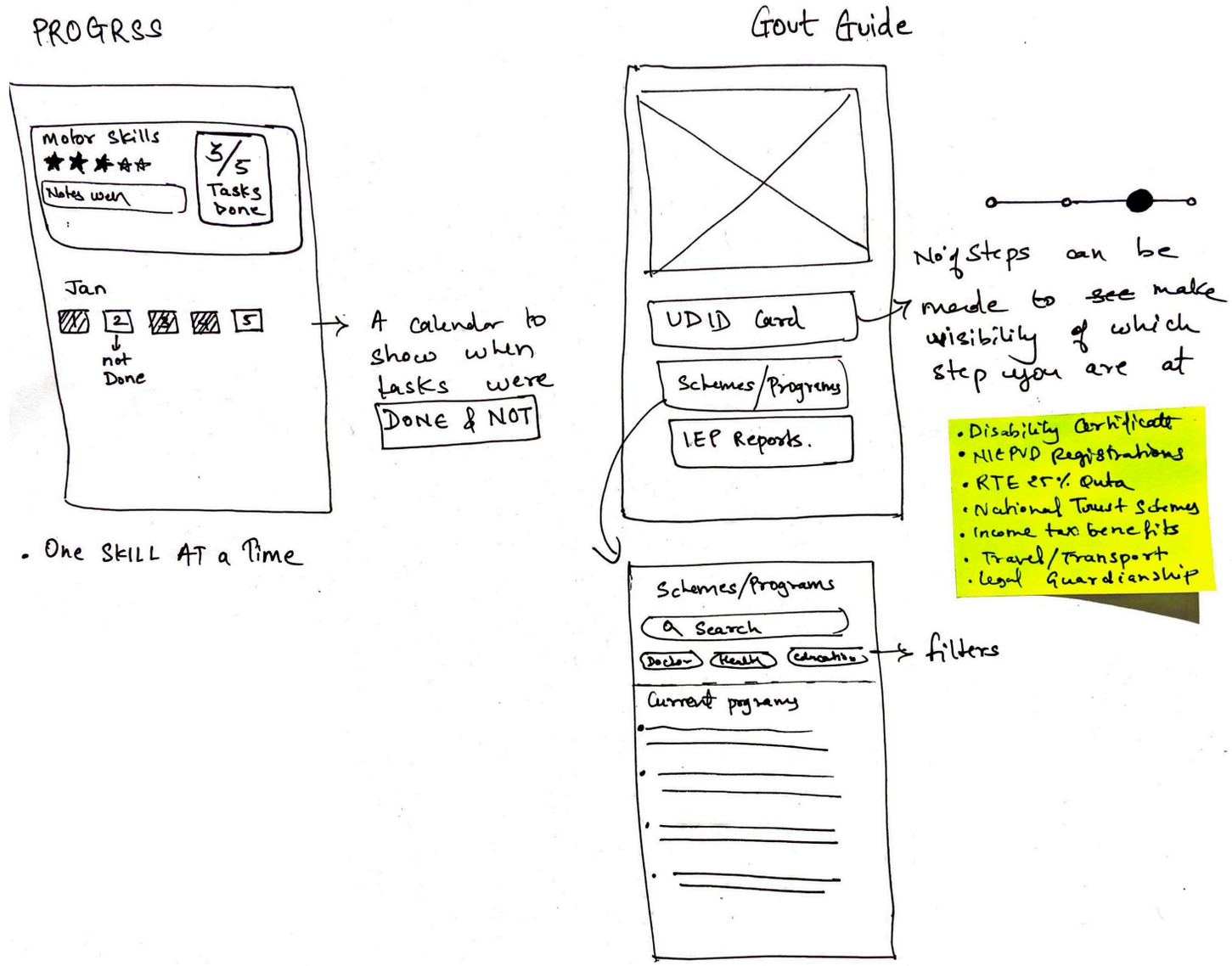


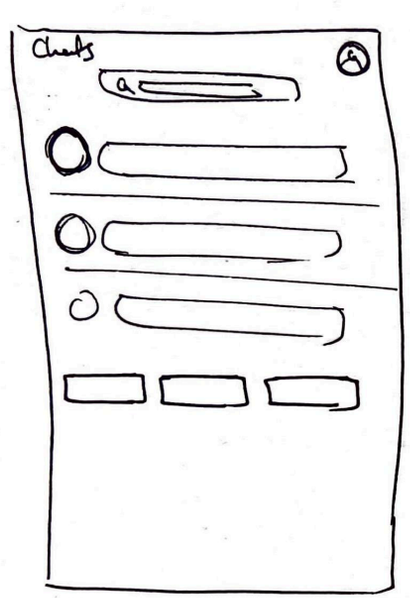


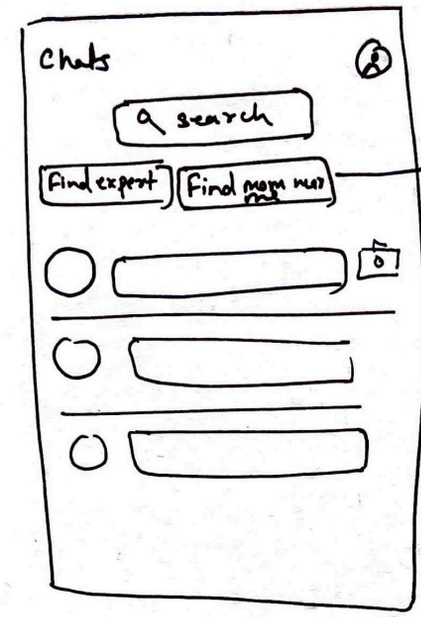


TODAY'S ACTIVITY'S WIREFRAMES




PROGRESS
Motor Skills
Notes work
3/5
Tasks done
Jan
2
not Done
5
A calendar to show when tasks were DONE & NOT
• One SKILL AT a Time
Govt Guide
UDID Card
Schemes/Programs
IEP Reports.
No of steps can be made to see make visibility of which step you are at
• Disability Certificate
• NIEPVD Registrations
• RTE 25% Quota
• National Trust Schemes
• Income tax benefits
• Travel/Transport
• Legal Guardianship
Schemes/Programs
Search
Doctor
Health
education
filters
Current programs



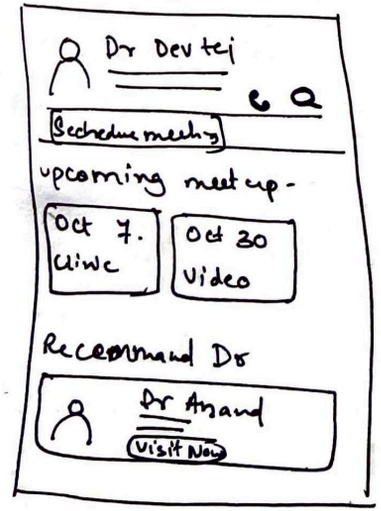


find moms by using filters

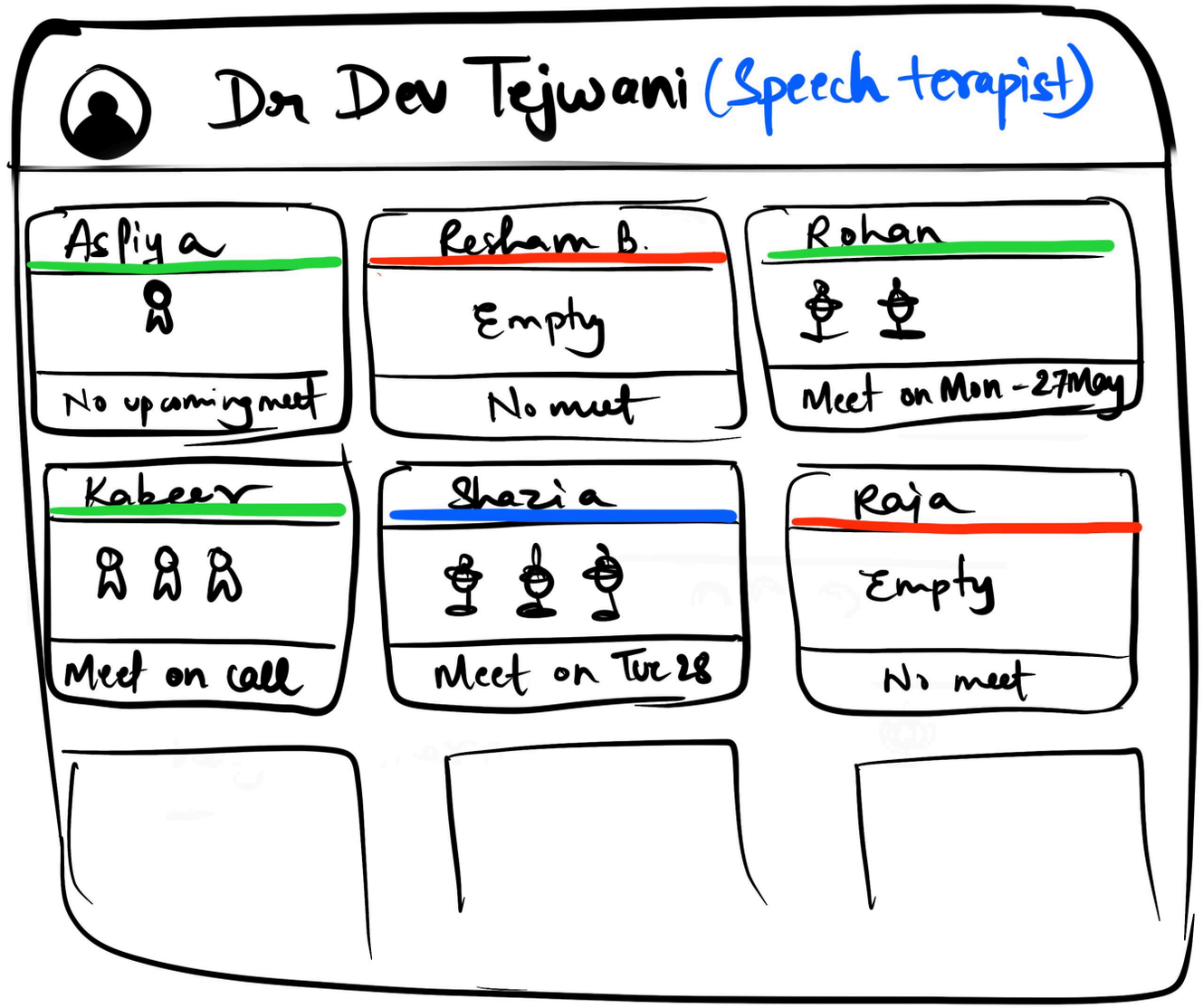
" find expert mom " who has an experience of more than 5 years.

- apt option to set a meet to meet moms

Meet my therapist



- Dr's information → Option to ~~call~~
  - Call
  - Book appointment
  - text.
- Upcoming Checkups
  - Video consulting
  - Clinic Visit
- Recommandation
  - meet other Dr's
  - Book appointment



for kids who's activity has not began

who are in their final month for their goal or achieved it (time to set another goal)

who have started their task journey

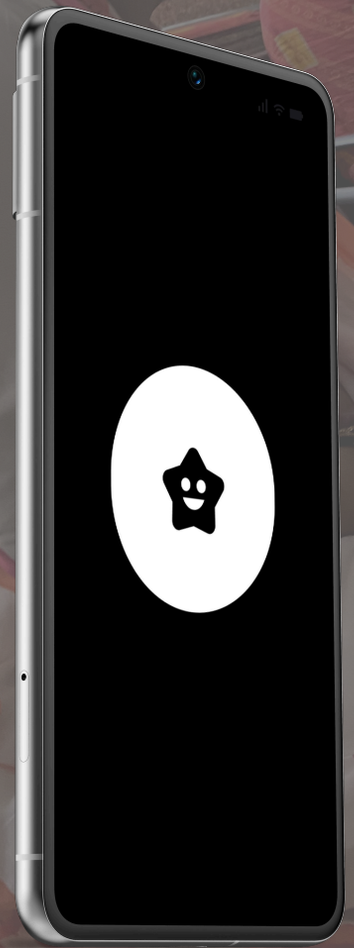
08

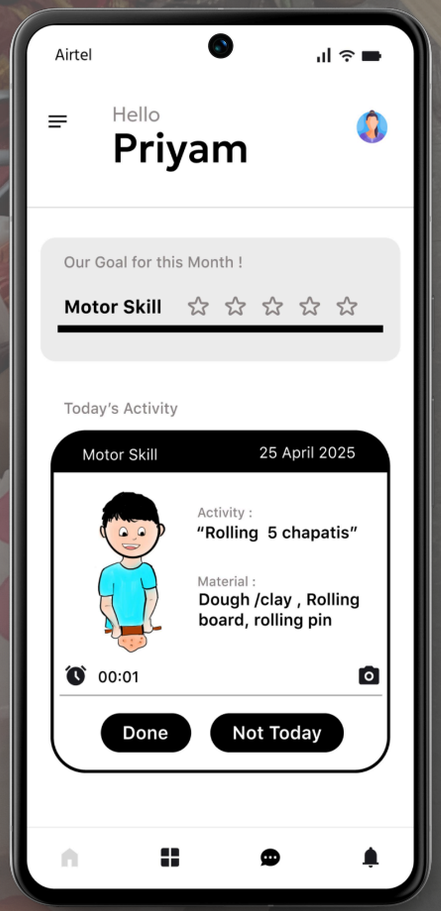
Final Design/ Solution

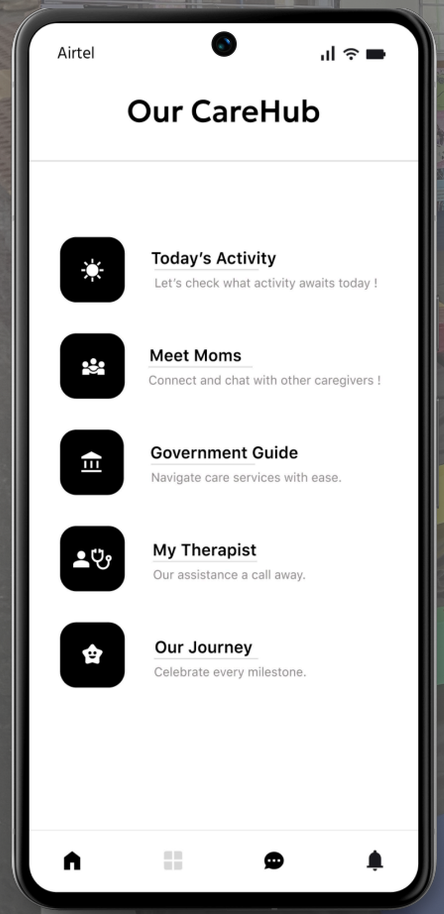
8.1 Final screens & Flows
8.2 User Testing II
8.3 Story Boarding
8.4 Constraints

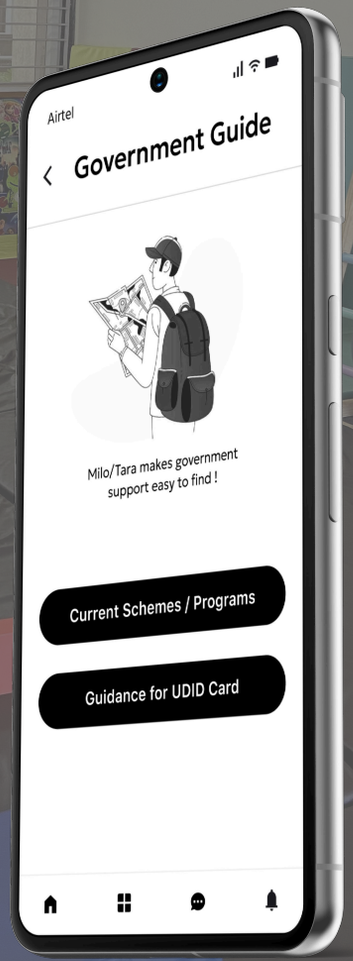
TARA

Your gentle Guide

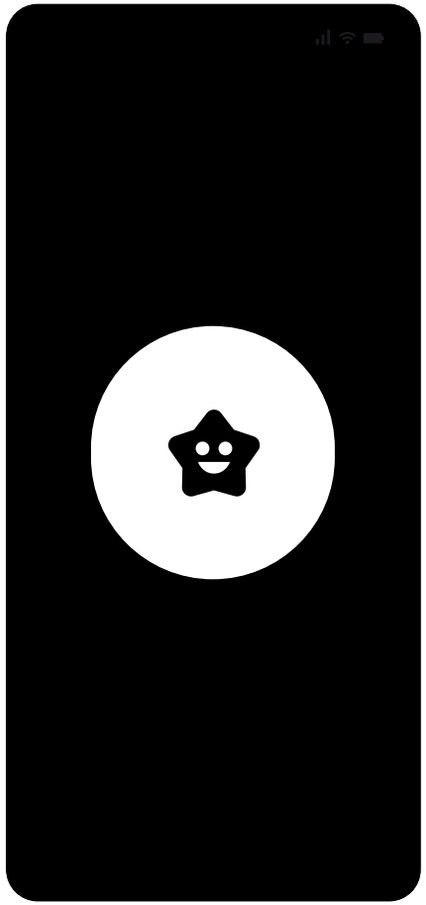


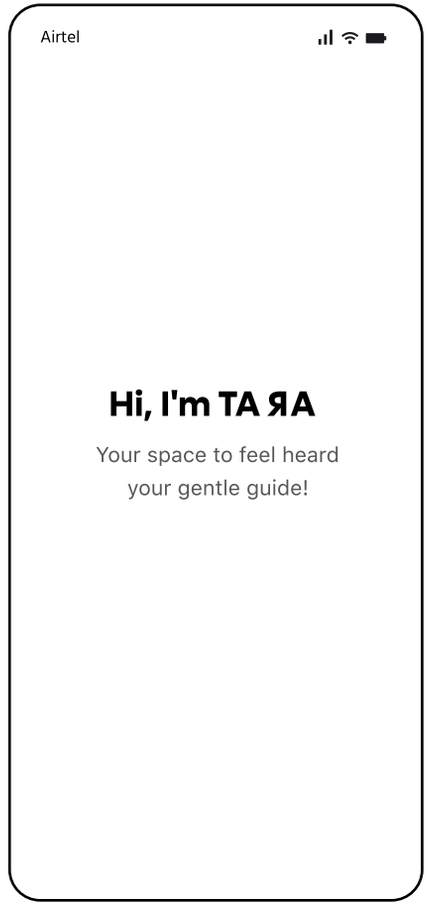


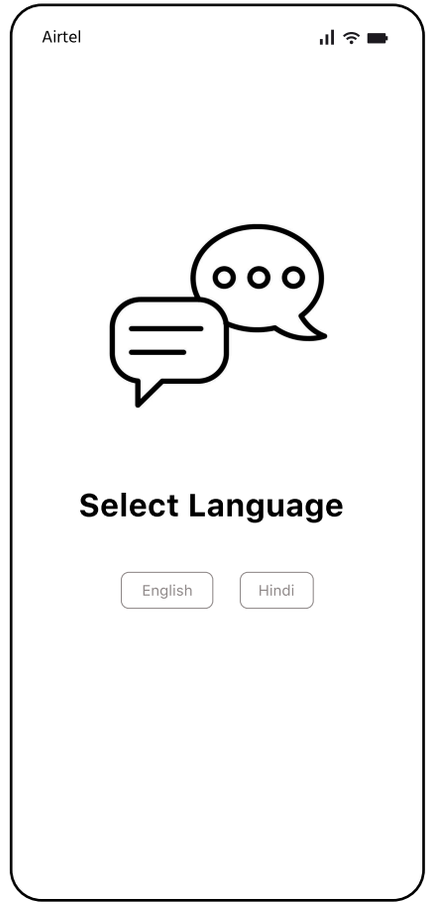




ONBOARDING SCREENS





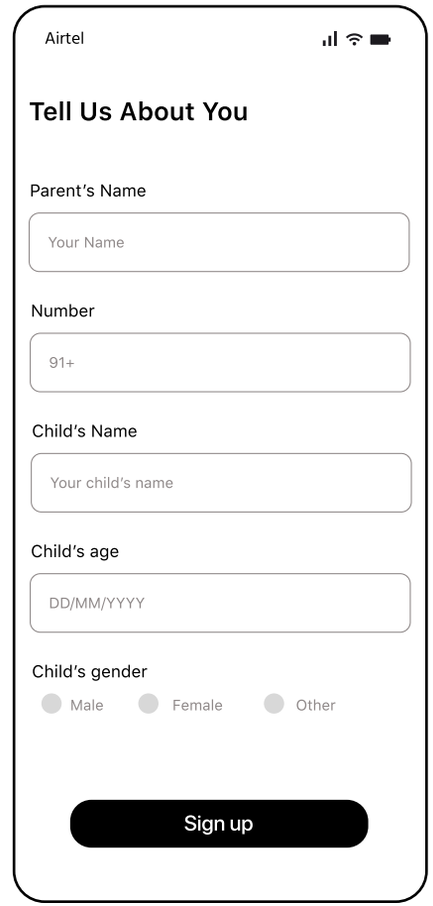


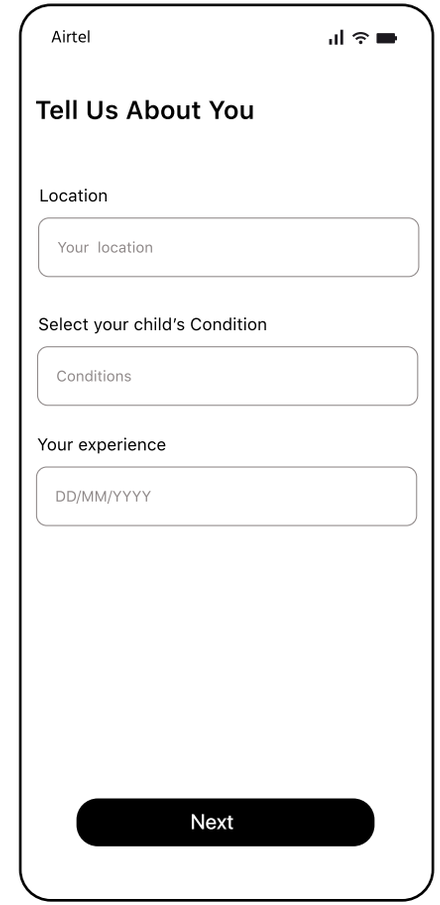
It is a localized community model

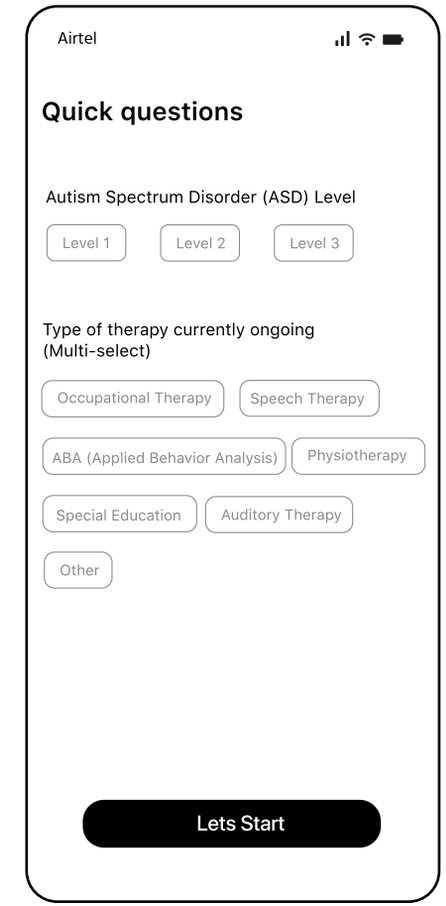
- One therapy center =
  one connected group of parents
- The therapist acts as a central figure who assigns tasks and tracks progress
- Parents can share experiences, ask questions, and support each other
- The focus is on building trust and support within that micro-community first.

These screens initiates the onboarding process, where caregivers input essential information about the child. The app asks for details such as the child's condition (e.g., age , condition type and location.

This information is used to personalize the app experience and tailor tasks to the child's developmental needs and local resource availability.







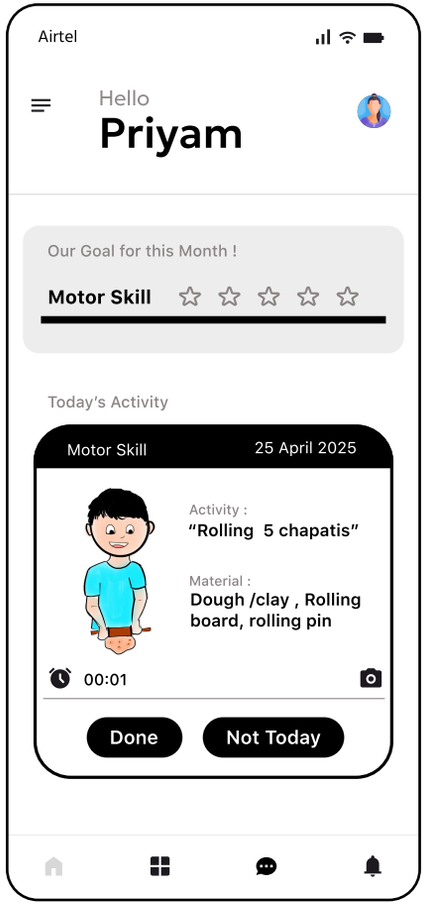
HOME SCREEN AND NAVIGATION BAR SCREENS

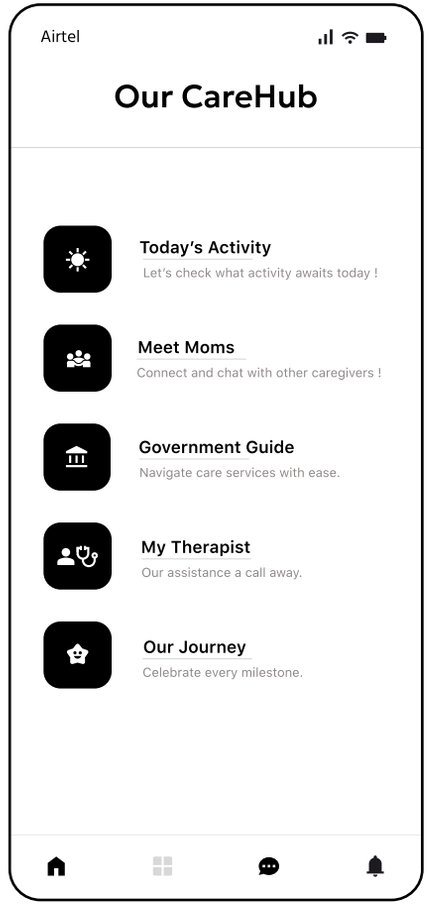
Home screen displays - progress bar and task of the day .

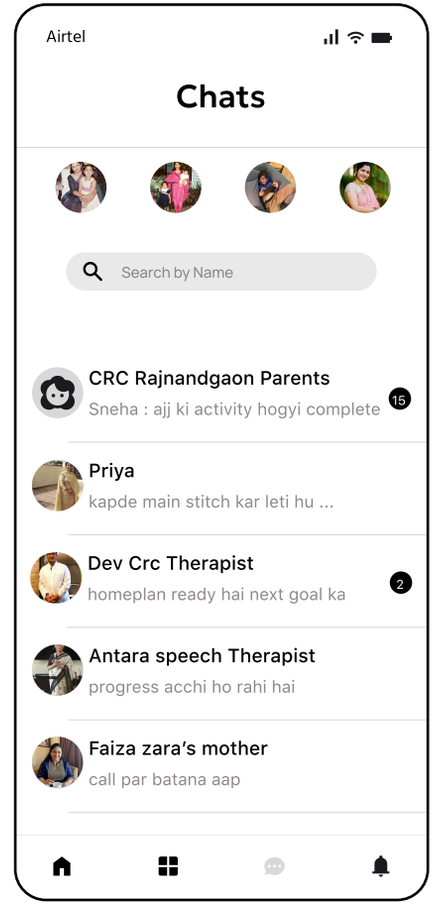
Our CareHub -This is your one-stop place for everything you need on your caregiving journey.

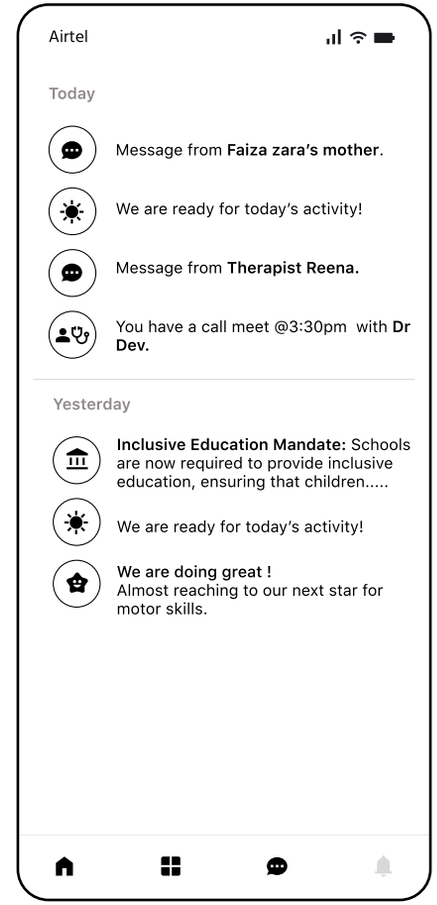
Chats - Chats let you privately connect with caregivers and It's a safe space for stories you might hesitate to post elsewhere, with people who truly understand.

Notification - keep you updated on what's new, what's next, new messages, and upcoming meets all in one place.



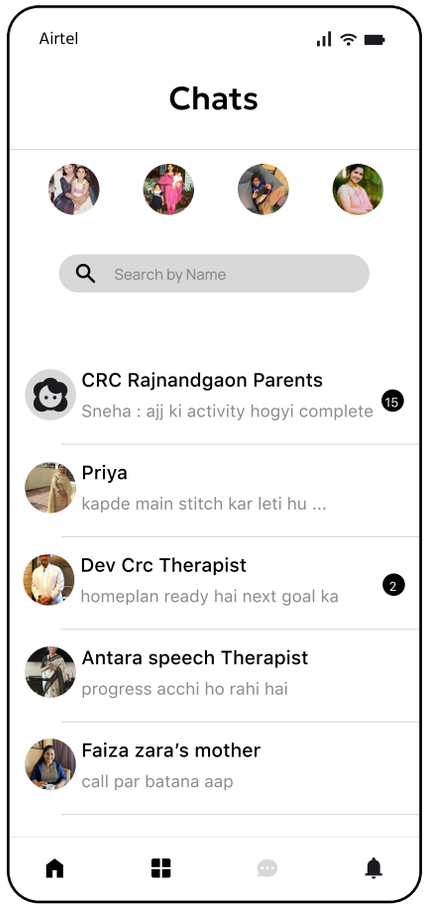


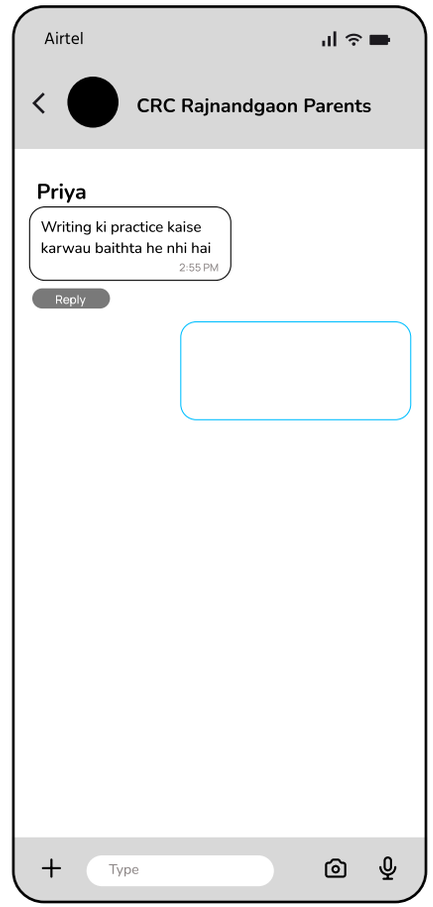


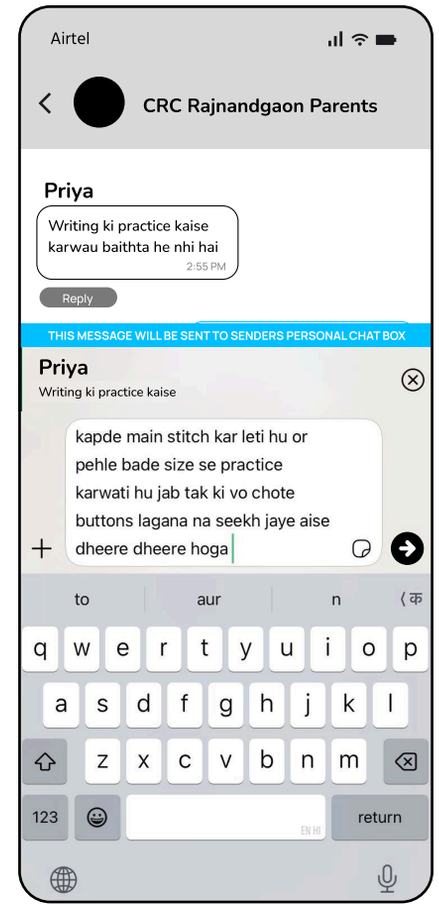


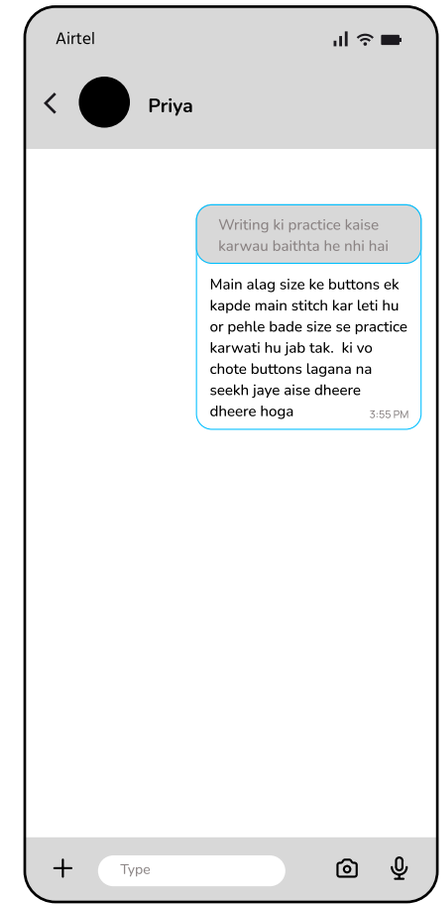
For the chat

- *Questions can be posted publicly (in the group)*
- *But responses go directly to the user's personal chat inbox,*
- *Preserving both clarity (no group chat spam) and privacy (no pressure to be seen answering).*





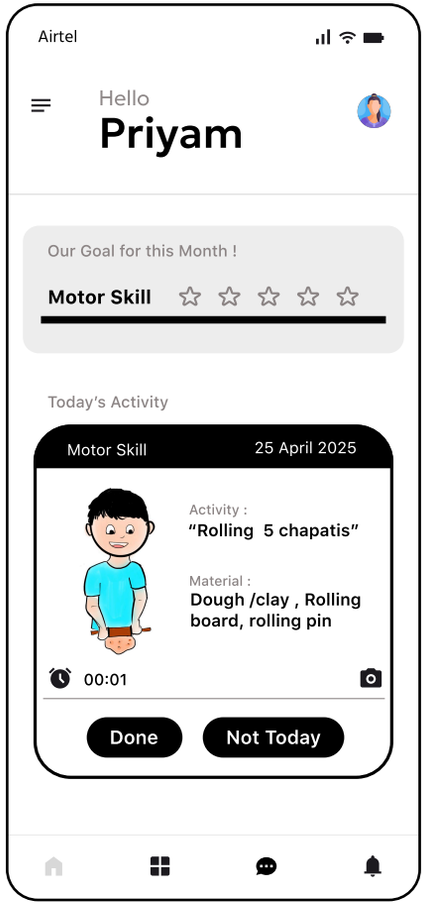




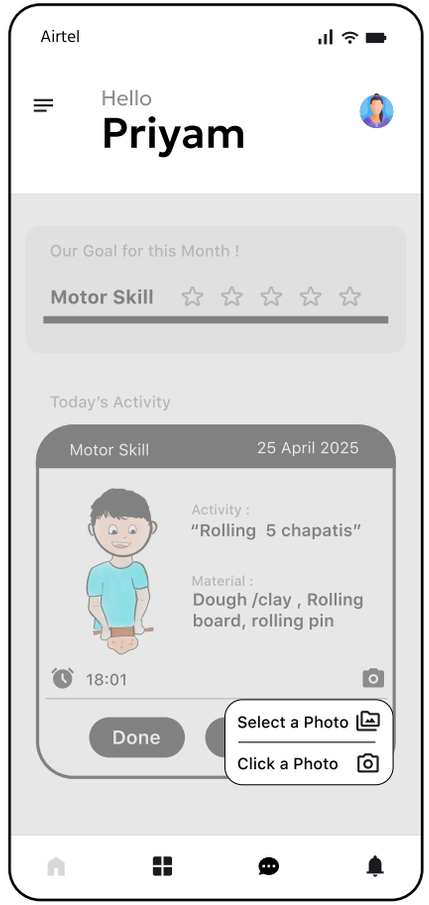
"ACTIVITY 1" TASK FLOW- *Daily Task System – How It Works*
Two tasks per day for your child:

1. Skill Task (Quick & Easy)

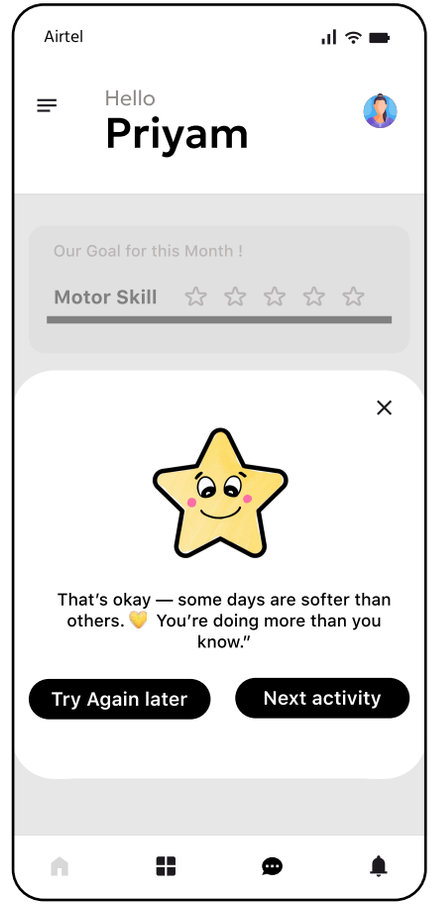
- *Based on your child's current skill goals*
- *Simple and achievable — builds confidence*
- *Keeps daily progress going with small wins*



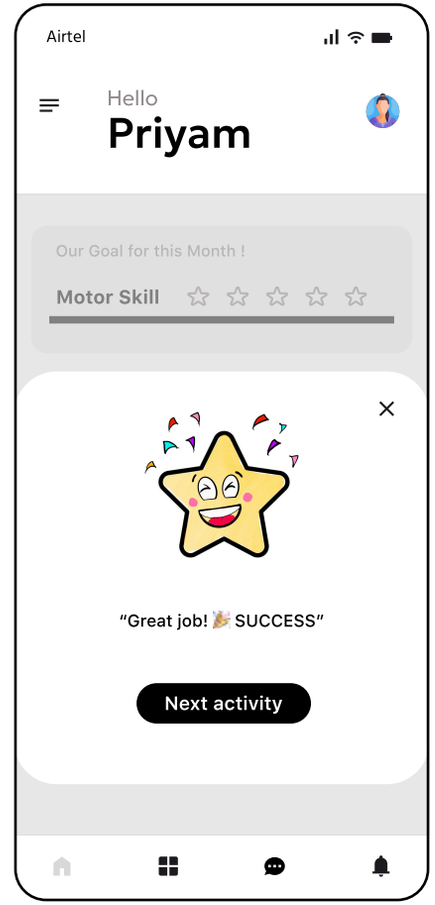
Start timer



Add a photo once the task is done .



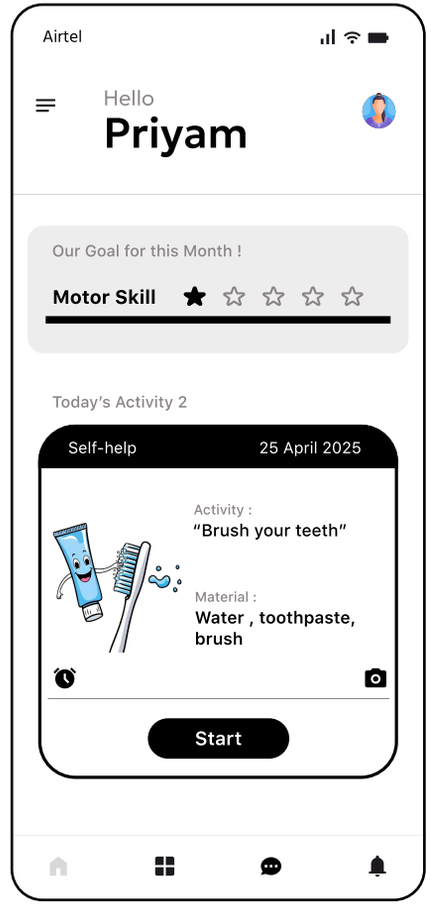
If clicked on **Not Today**

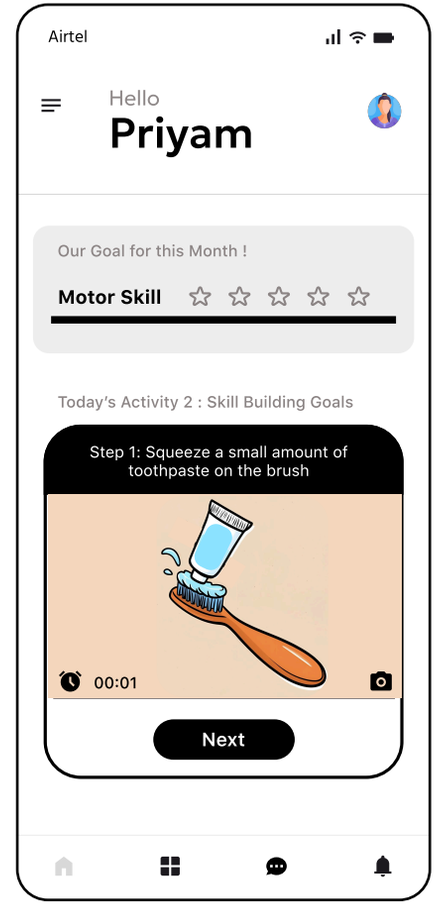


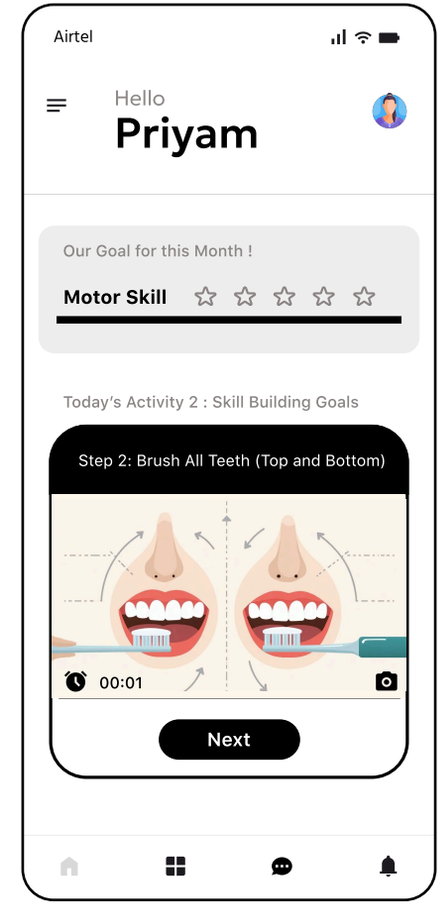
If clicked on **Done**

2. Habit-Building Task

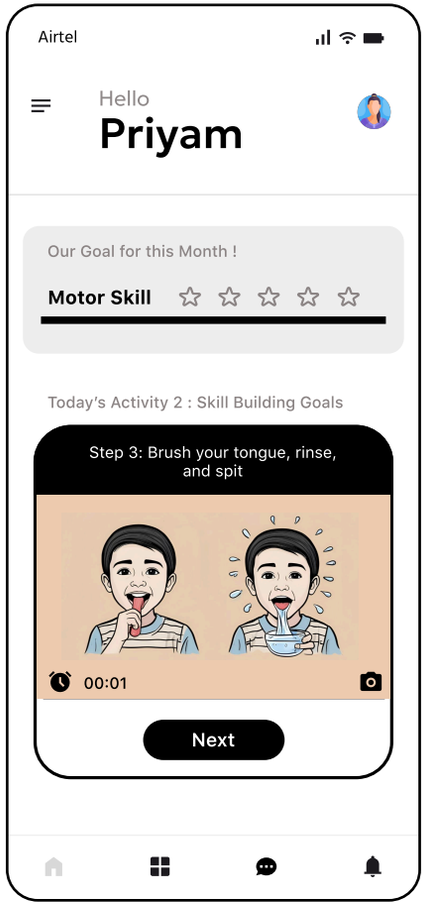
- *Focuses on daily routines (e.g., brushing teeth, washing hands, buttoning clothes)*
- *We track the time taken to complete it*
- *Helps measure how close the habit is to becoming automatic*

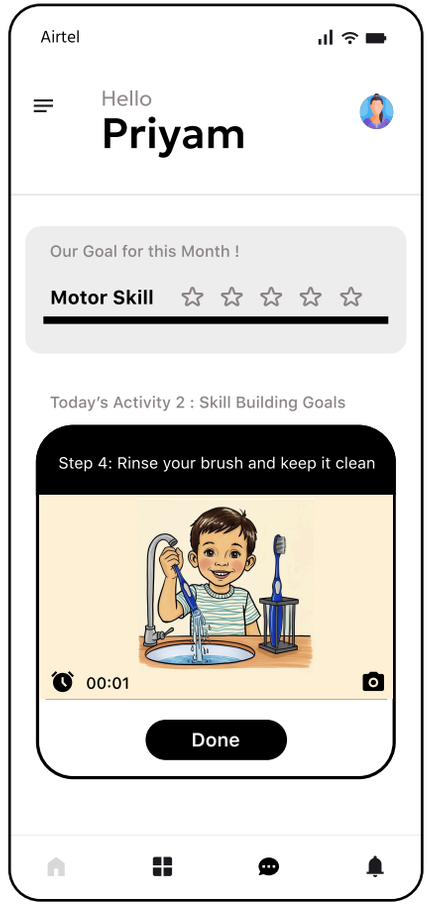






"ACTIVITY 2" TASK FLOW

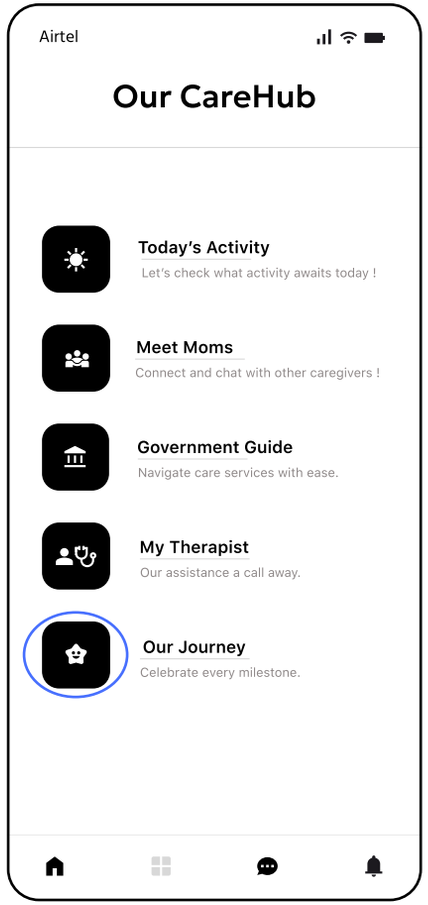


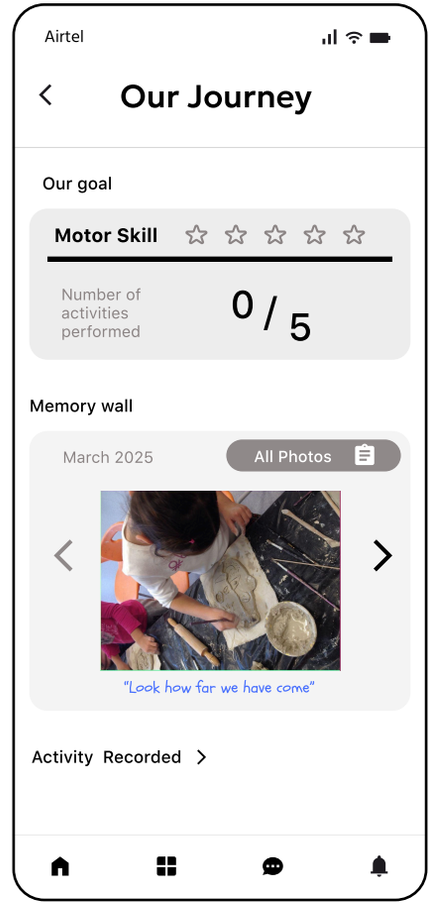


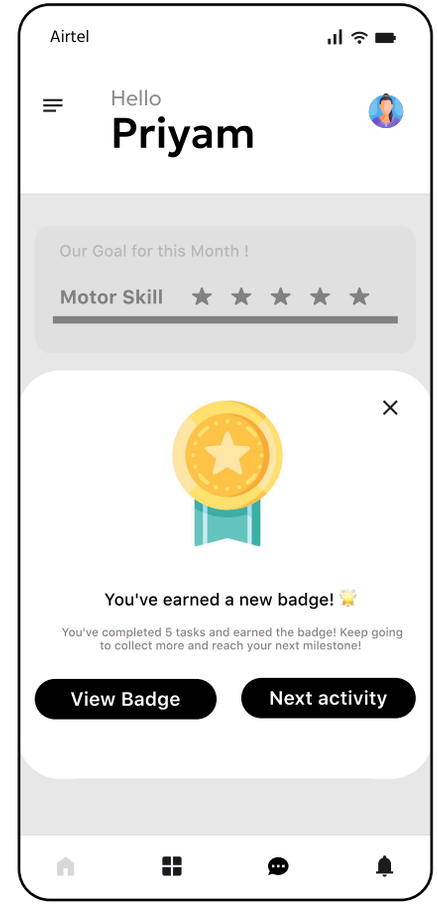
Over time, you'll see:

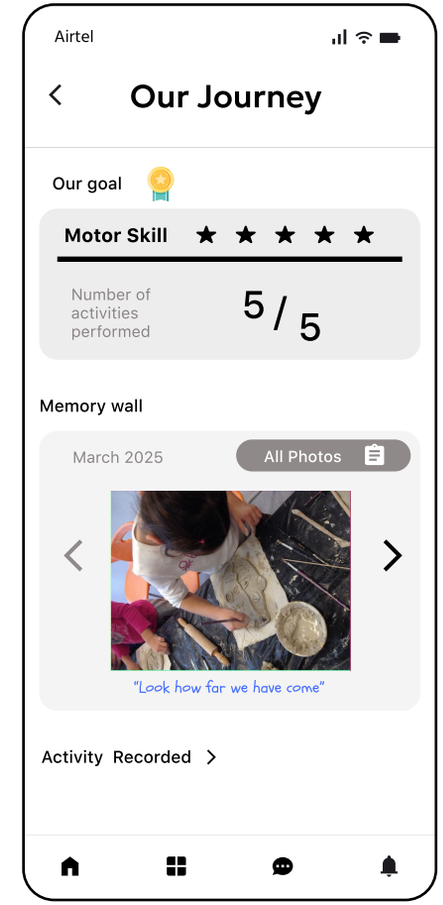
- *Improvement in time taken*
- *Increased independence*
- *Consistent progress*

In Our Journey, every time you complete a task, you earn a star. For every 5 skill-based tasks, you get a badge.





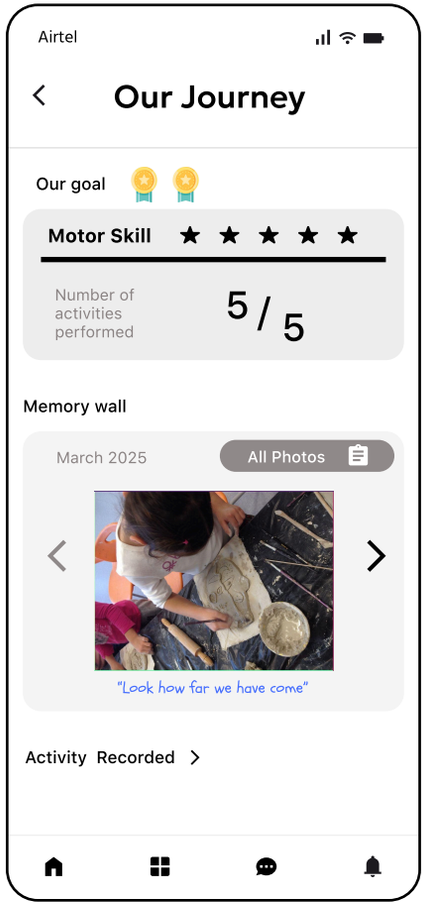


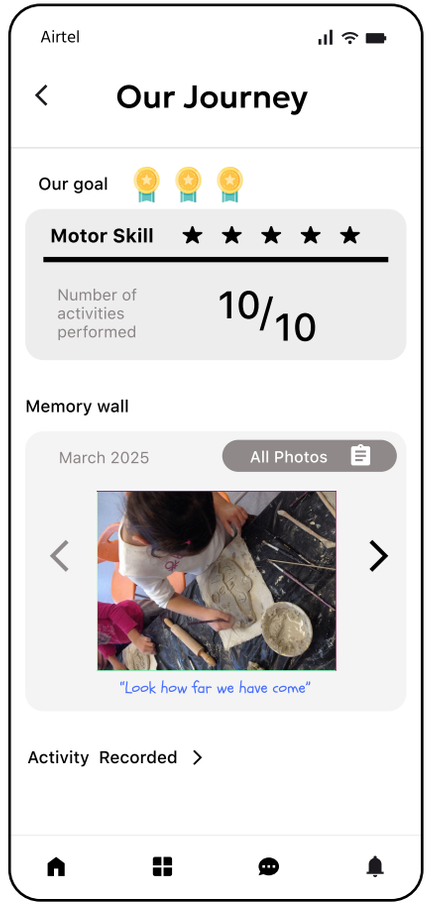


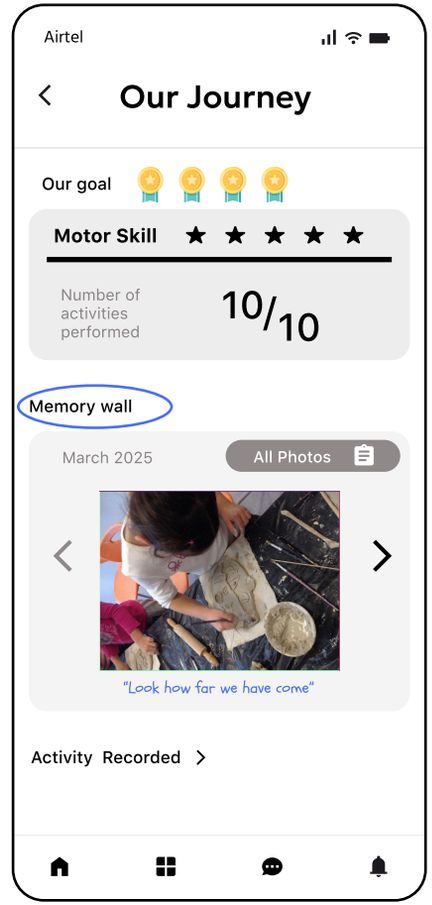
" OUR JOURNEY" SCREEN FLOW

Each month is divided into 4 task sets (5, 5, 10, 10), so you can earn 4 badges per month.

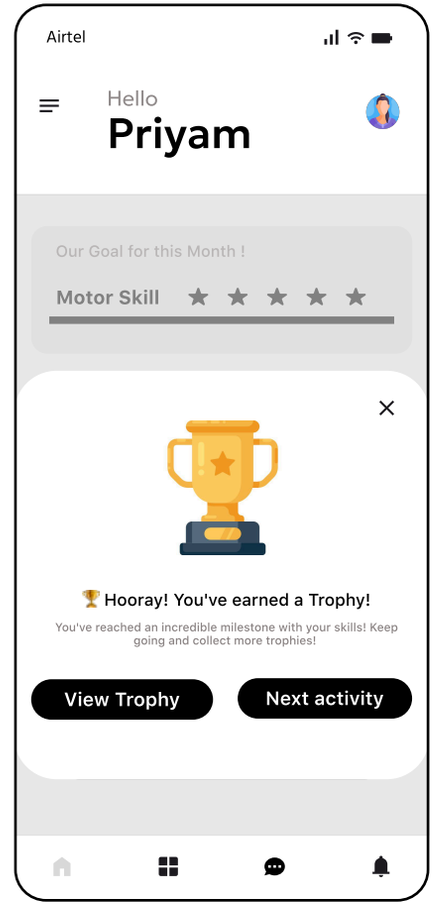
Once you complete 30 tasks in a month, your badges are converted into 1 trophy.
Over 3 months, you can collect a total of 3 trophies — a fun and rewarding way to see your child's growth over time!



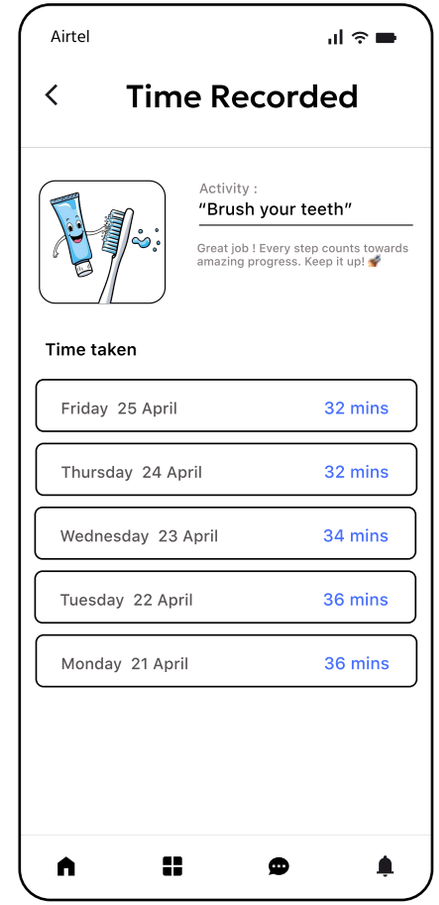




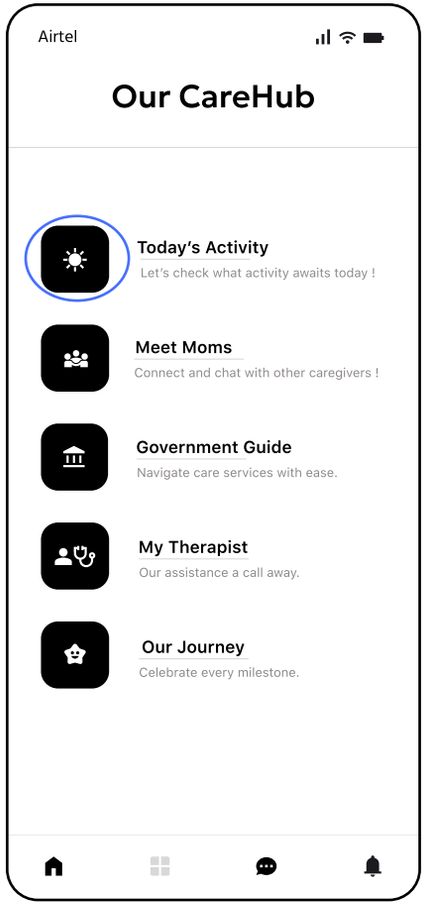
Memory wall shares all the pictures taken in past while finishing activities.

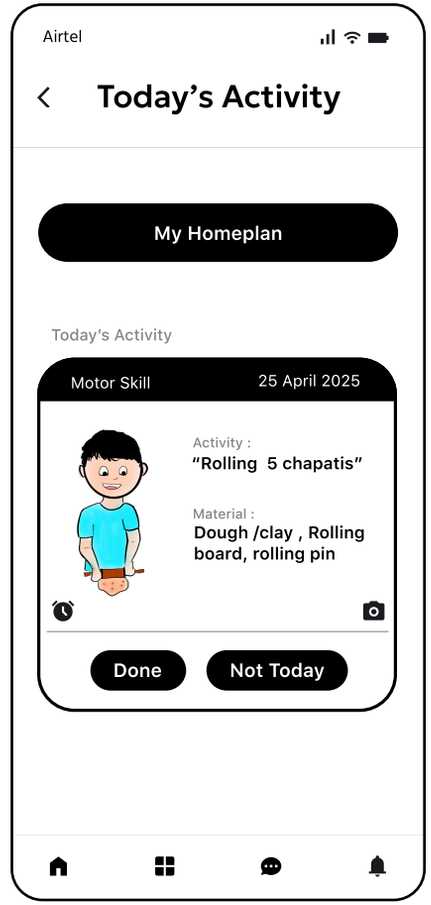


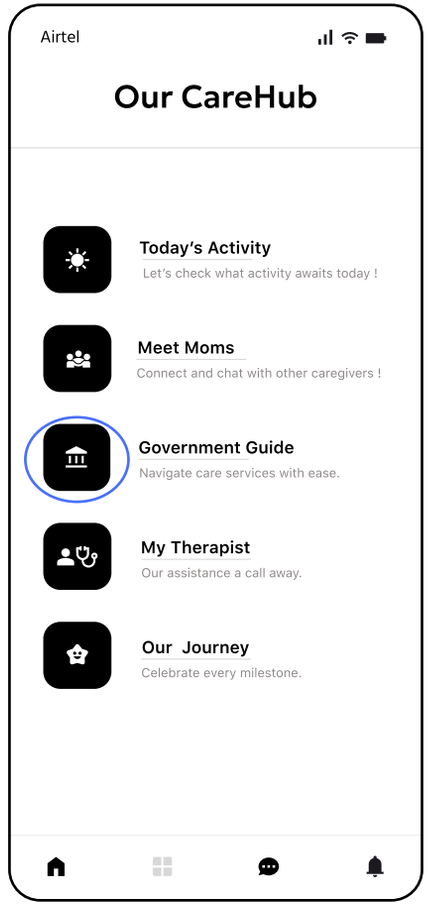
For habit-building tasks (like brushing teeth or buttoning clothes), the app tracks the time taken to complete them. This helps you monitor how your child is improving day by day, as they get faster and more independent.

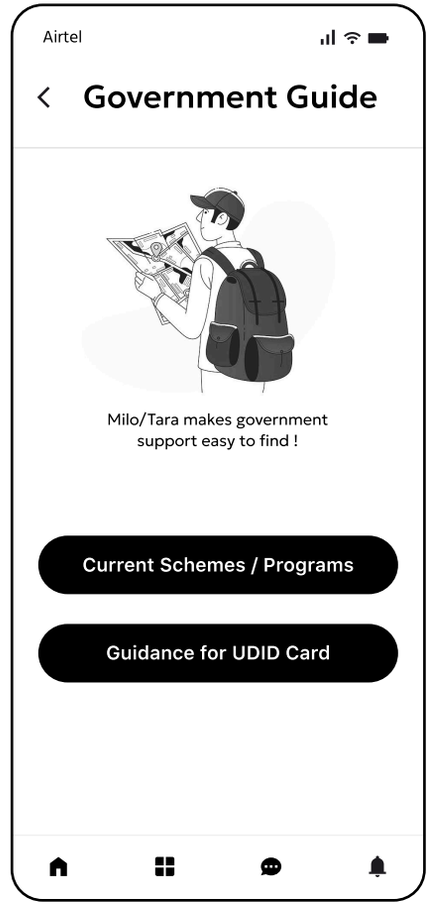


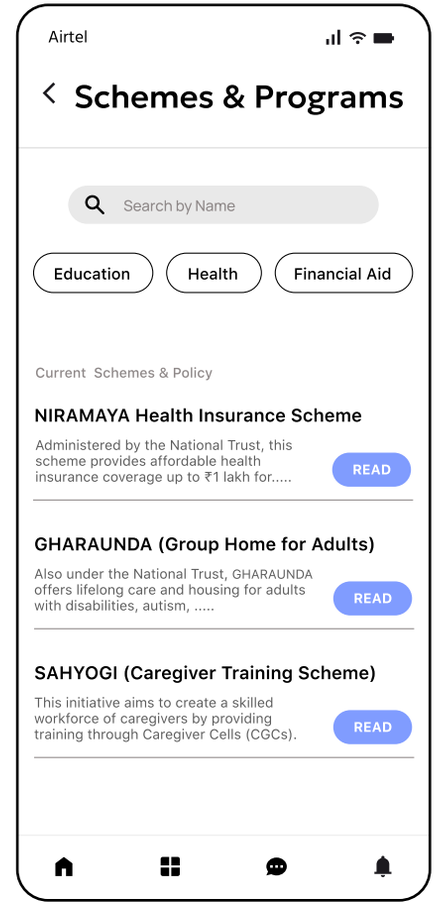
"TODAYS ACTIVITY" SCREEN

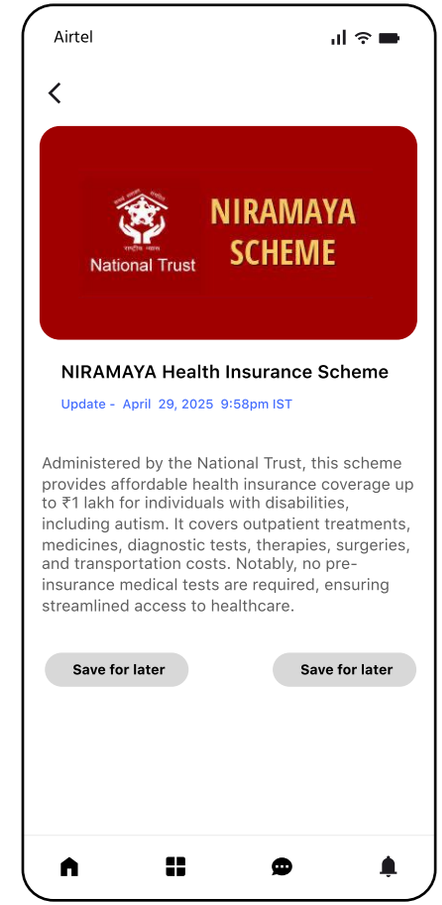





Airtel
Our CareHub
Today's Activity
Let's check what activity awaits today !
Meet Moms
Connect and chat with other caregivers !
Government Guide
Navigate care services with ease.
My Therapist
Our assistance a call away.
Our Journey
Celebrate every milestone.

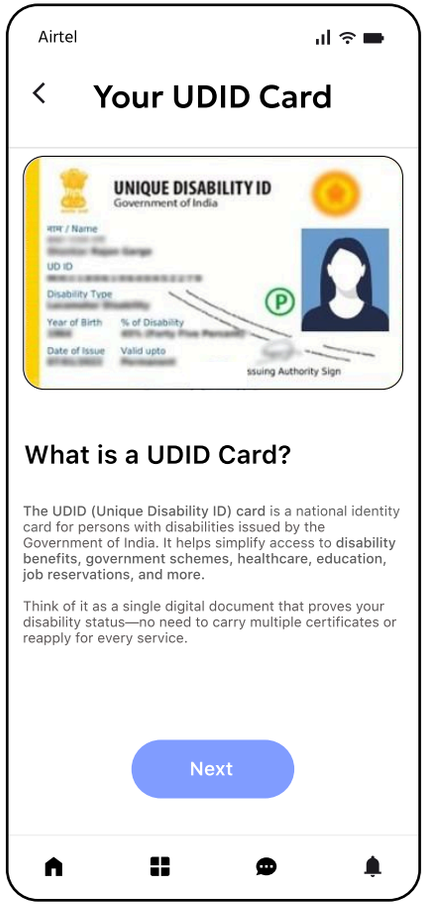

Airtel
Government Guide
Milo/Tara makes government support easy to find !
Current Schemes / Programs
Guidance for UDID Card

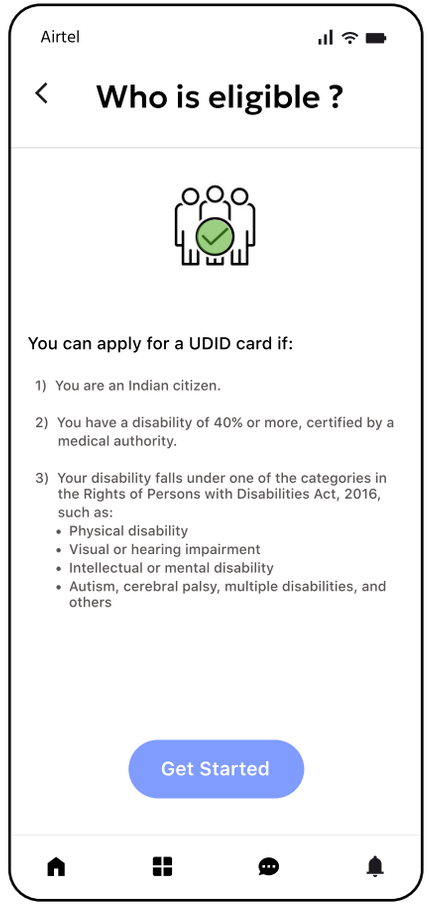

Airtel
Schemes & Programs
Search by Name
Education
Health
Financial Aid
Current Schemes & Policy
NIRAMAYA Health Insurance Scheme
Administered by the National Trust, this scheme provides affordable health insurance coverage up to ₹1 lakh for.....
READ
GHARAUNDA (Group Home for Adults)
Also under the National Trust, GHARAUNDA offers lifelong care and housing for adults with disabilities, autism, ...
READ
SAHYOGI (Caregiver Training Scheme)
This initiative aims to create a skilled workforce of caregivers by providing training through Caregiver Cells (CGCs).
READ

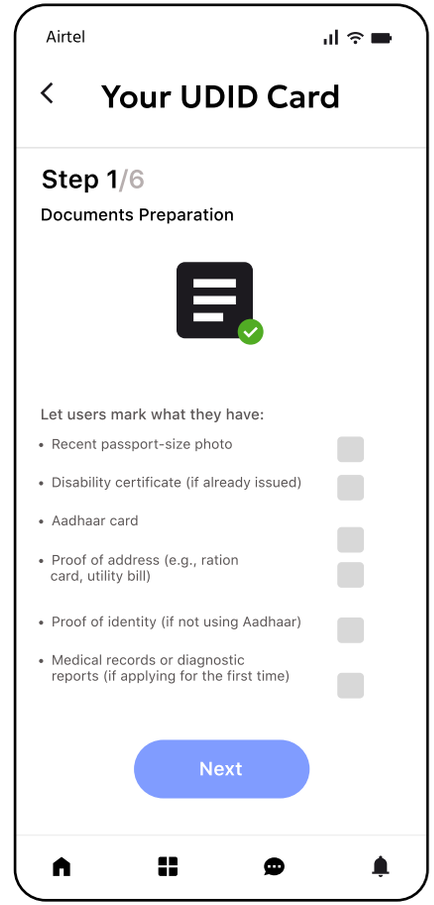

Airtel
National Trust
NIRAMAYA SCHEME
NIRAMAYA Health Insurance Scheme
Update - April 29, 2025 9:58pm IST
Administered by the National Trust, this scheme provides affordable health insurance coverage up to ₹1 lakh for individuals with disabilities, including autism. It covers outpatient treatments, medicines, diagnostic tests, therapies, surgeries, and transportation costs. Notably, no pre-insurance medical tests are required, ensuring streamlined access to healthcare.
Save for later
Save for later

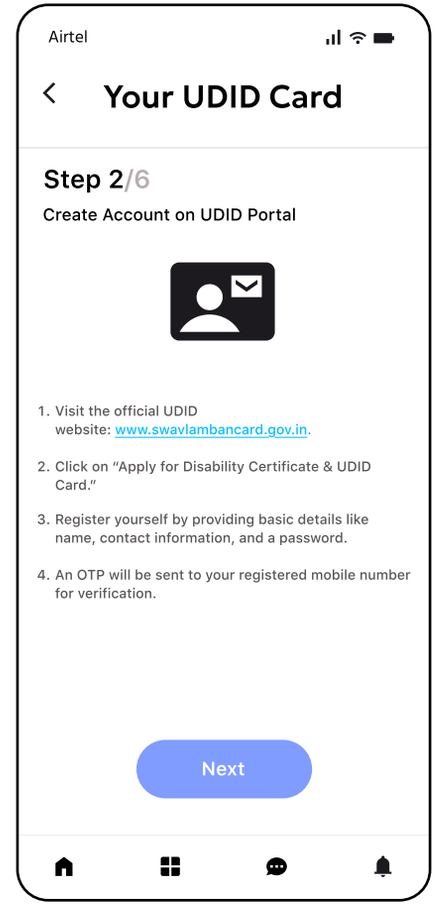
"GOVERNMENT GUIDE" - YOUR UDID CARD GUIDANCE SCREENS ,FLOW

Easy guidance for making UDID Card in 6 steps.









Airtel

Your UDID Card

Step 3/6

Fill the Application



1. Log in to your account on the UDID portal.
2. Fill out the application form, providing accurate details of the applicant:
   a. **Personal Information** (Name, Date of Birth, Gender, Address).
   b. **Disability Information** (Type, Percentage, Duration).
   c. **Upload scanned copies** of the required documents.
3. Review all details for accuracy before submission.

Next

Airtel

Your UDID Card

Step 4/6

Medical Board Appointment



1. Choose your nearest government-designated hospital for medical verification.
2. Schedule an appointment date for physical verification of the disability by the Medical Board.
3. Attend the appointment with original documents and the application acknowledgment.

Next

Airtel

Your UDID Card

Step 5/6

Application Tracking



1. After submission, use your acknowledgment number to track the status of your application on the UDID portal.
2. The status will display the current stage of your application (under review, approved, or rejected).

Next

Airtel

Your UDID Card

Step 6/6

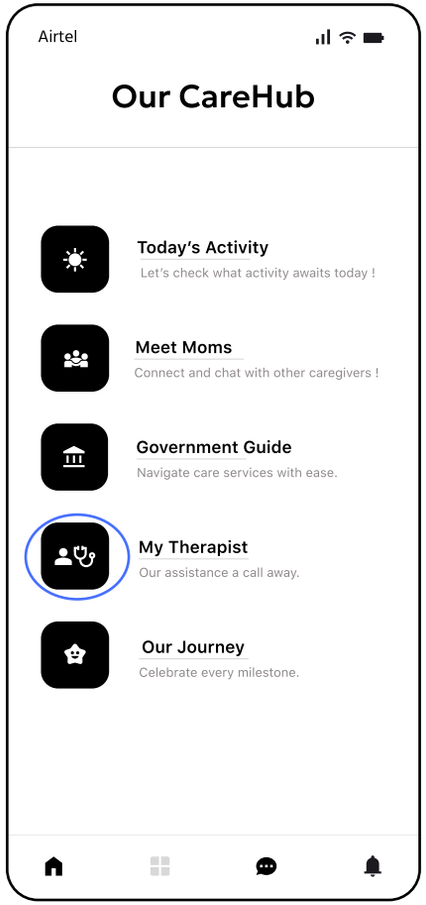
Download / Receive UDID Card

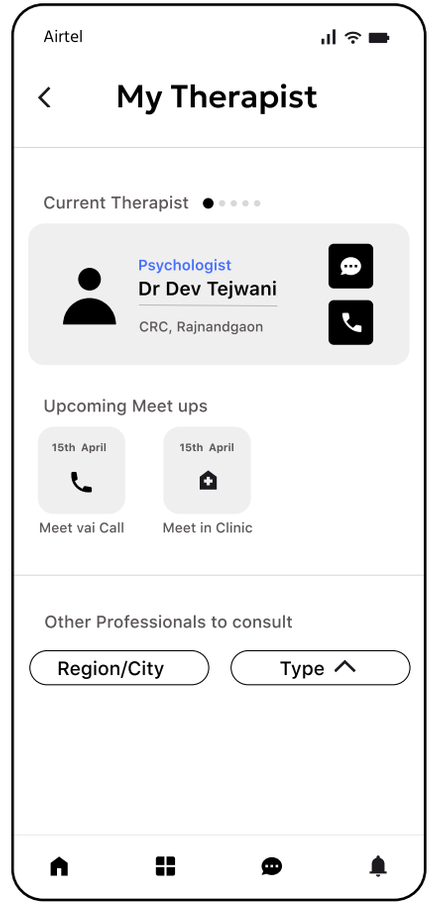


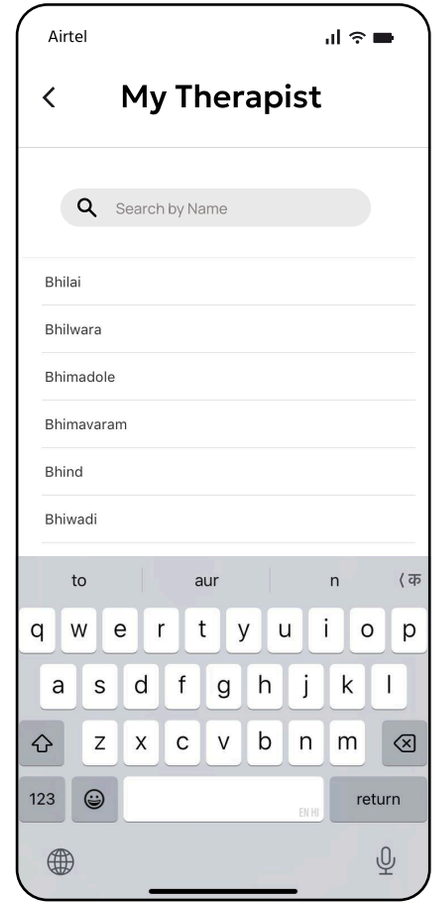
1. Once your application is approved, you will receive an SMS notification.
2. Log in to the UDID portal and download the digital version of your UDID Card.
3. If you have opted for a physical UDID Card, it will be sent to your registered address.

Done

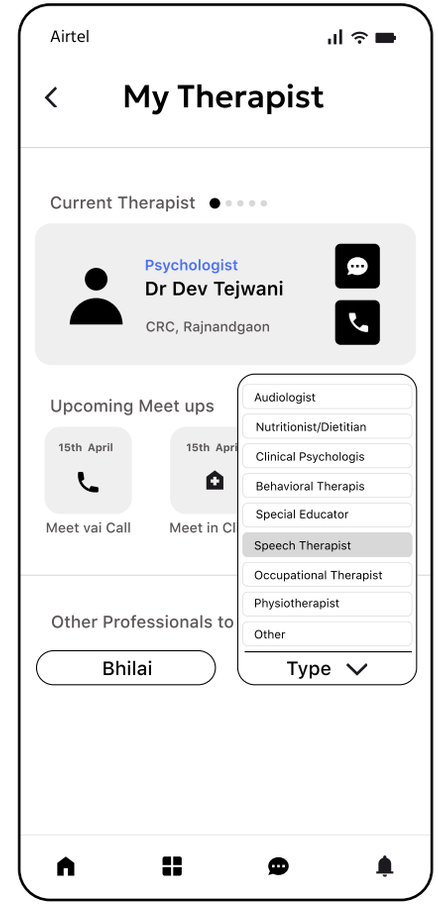
"MY THERAPIST SCREENS " FLOW

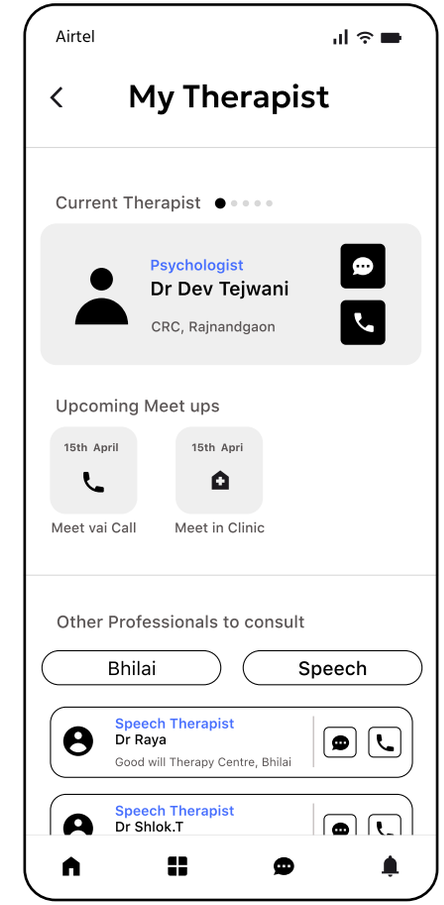




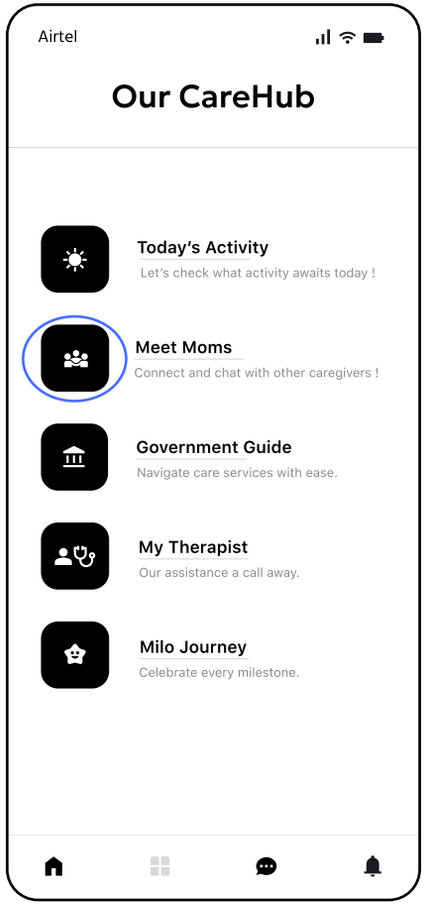


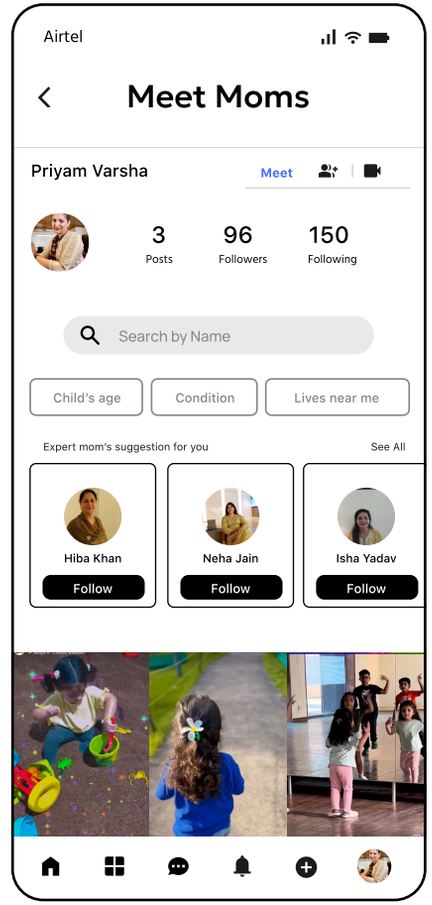
My Therapist shows you the professional you're working with, gives reminders for upcoming meets, and lets you search by location and type to find the right therapist nearby.





"MEET MOMS " SCREENS FLOW





Meet Moms lets you connect with mothers from your local center, with suggestions for experienced moms to chat with, set up virtual meets, and share pictures of your kids — and later, it will grow into a larger community across centers.

TARA
Your gentle Guide

Dr Dev Tejwani
Speech therapist

CRC Rajnandgaon

Asfiya Khan	Resham Bhatt	Rahul Sharma	Ram Gandhi
	Empty		
No upcoming meet	Meet on 28th June	No upcoming meet	Meet on 29th June

Shiba Qureshi	Anas Alvi	Kiran shah	Jash Shukla
Empty			
Meet on 1th July	Meet on 4th July	Meet on 7th July	No upcoming meet

Priyam Varsha	Mudit Pasari	Rabiya Amir	Shyam Kumar

8.2 User-testing

User Testing Process

To evaluate the usability and effectiveness of the autism caregiving app, I conducted a user testing session with 19 parents of autistic children. These parents were carefully selected based on their willingness to participate, their diversity in caregiving styles, and a mix of first-time app users and those familiar with therapy tracking tools.

Each parent was asked to use a basic version of the app and then fill out a structured feedback form comprising three sections: Basic Info, App Usage Experience, and Open Feedback.

The form aimed to gather both quantitative and qualitative data, including ease of onboarding, clarity of task structures, usefulness of specific features, and general impressions. Observations were also recorded during in-person or video call sessions where possible, to identify usability pain points.



A parent using our app for user-testing

Date : 4/5/25

User Testing

sample size : 19

Section 1: Basic Info

1. Name -
2. Age of your child -
3. Have you used any caregiving or therapy tracking apps before?
   - Yes 5
   - No 14

Section 2: App Usage Experience

1. How easy was it to start using the app (onboarding)?
   - Very easy 9
   - Somewhat easy 6
   - Neutral 3
   - Somewhat difficult 1
   - Very difficult
   -
2. How clearly did you understand the structure of 'activity 1' and 'activity 2' with 3-month goals and reward?
   - Very clear 7
   - Somewhat clear 8
   - Neutral 2
   - A bit confusing 2
   - Very confusing
3. Were you able to successfully navigate government services ?
   - Yes, easily 6
   - Yes, with some difficulty 7
   - No, I struggled 3
   - I didn't try this step 3
4. Was understanding 'meet moms' easy to do?
   - Very helpful 10
   - Moderately helpful 6
   - Not helpful 3
   - Didn't explore this
5. How helpful is the progress tracking feature for you?
   - Very helpful 12
   - Moderately helpful 5
   - Not helpful 1
   - Didn't explore this 1

Section 3: Open Feedback

1. What did you like most about the app?
   -
     - **Simple layout, emotionally resonant illustrations, the daily task breakdown, and the reward system (badges/trophies).**
     - **Many appreciated the "Meet Moms" section for its potential to build community and reduce isolation.**
2. What was confusing or difficult to understand?
   - **Some parents found the explanation of 3-month goals under Activity 2 a bit text-heavy.**
3. What features would make the app more useful for your caregiving routine?
   -
     - **Add audio instructions for non-readers**
     - **Option to upload videos of completed tasks**
     - **Calendar view for task planning**
     - **Easier navigation for first-time users**
4. Would you be willing to test future versions of the app?
   - Yes 15
   - No
   - Maybe 4

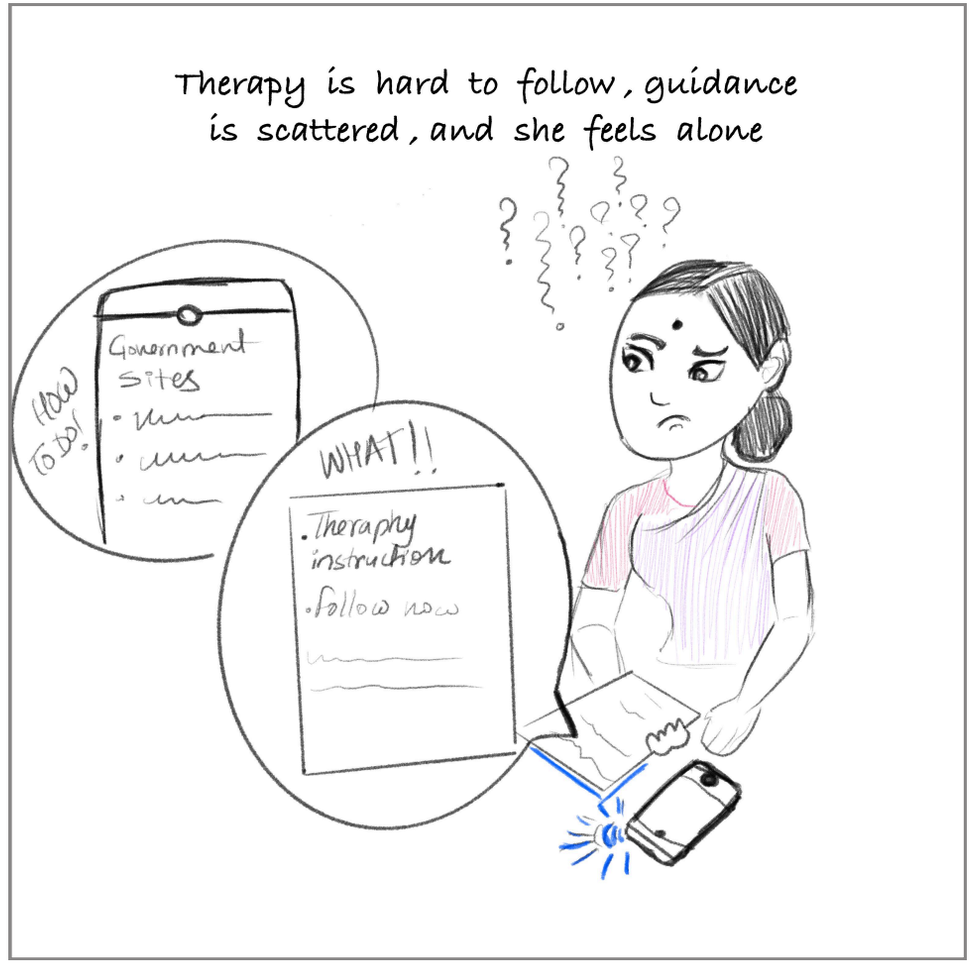
Observations

Many parents appreciated the overall flow of the app and found it easy to follow. They did not show confusion regarding navigation. For future updates, introducing video instructions could bring more clarity .

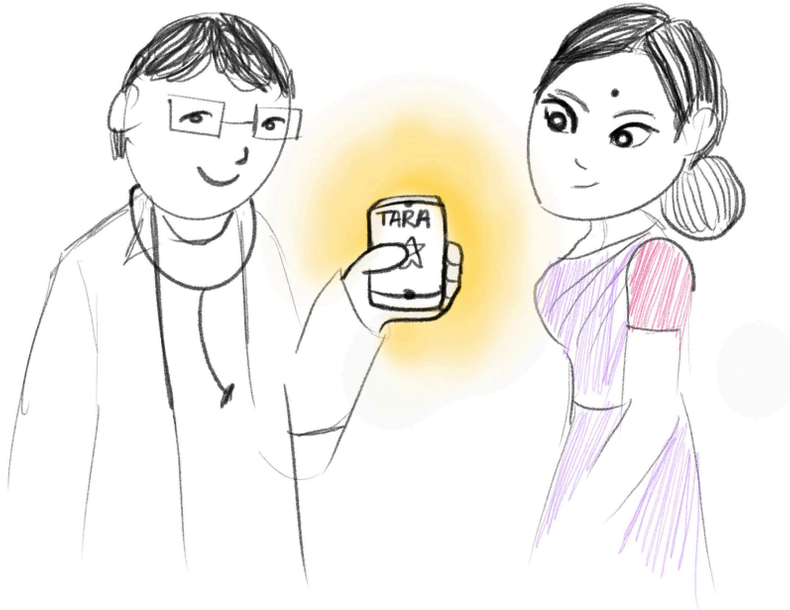
User testing showed the app is intuitive and well-received, especially by parents new to digital caregiving. Features like daily tasks, progress tracking, and "Meet Moms" were praised, with minor improvements needed in onboarding and support navigation.

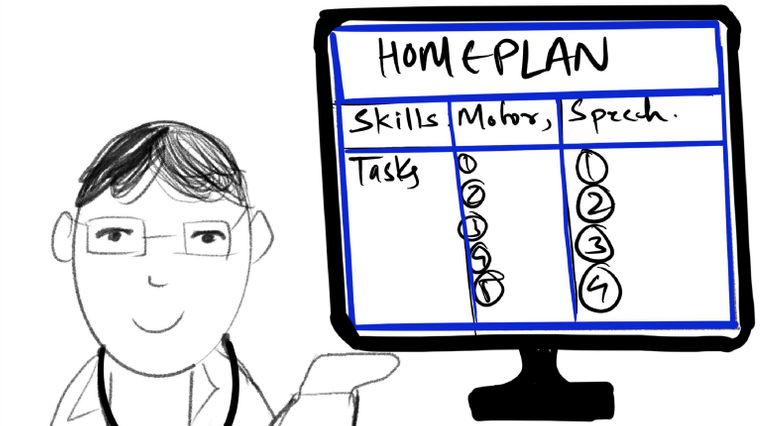
8.3 Story Boarding



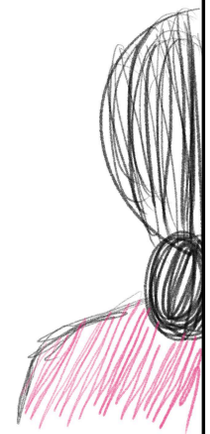


"She learns about the new app designed to support caregivers like her"

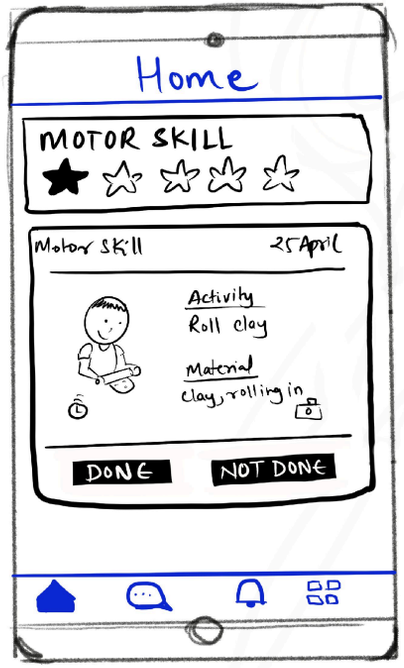




"Together they create a 3 month home plan — setting achievable goals based on her child's diagnosis needs"

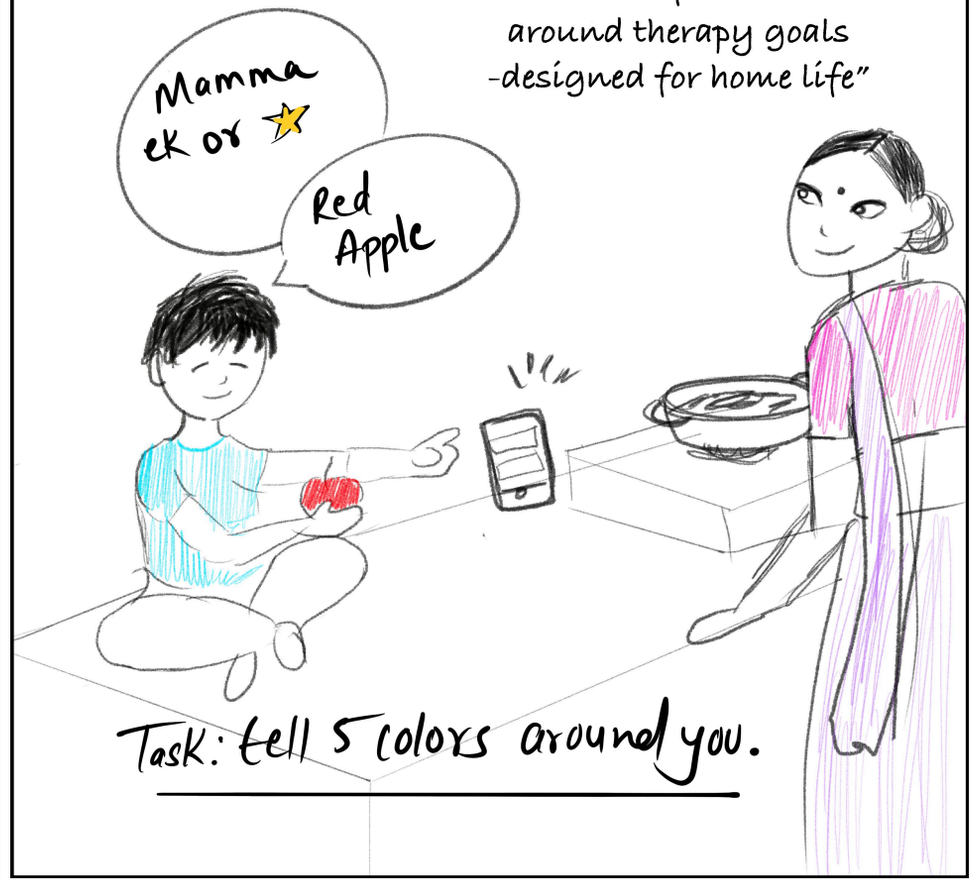


"Her daily view shows clear , manageable tasks personalised for her child.





"She builds a flexible routine around therapy goals -designed for home life"



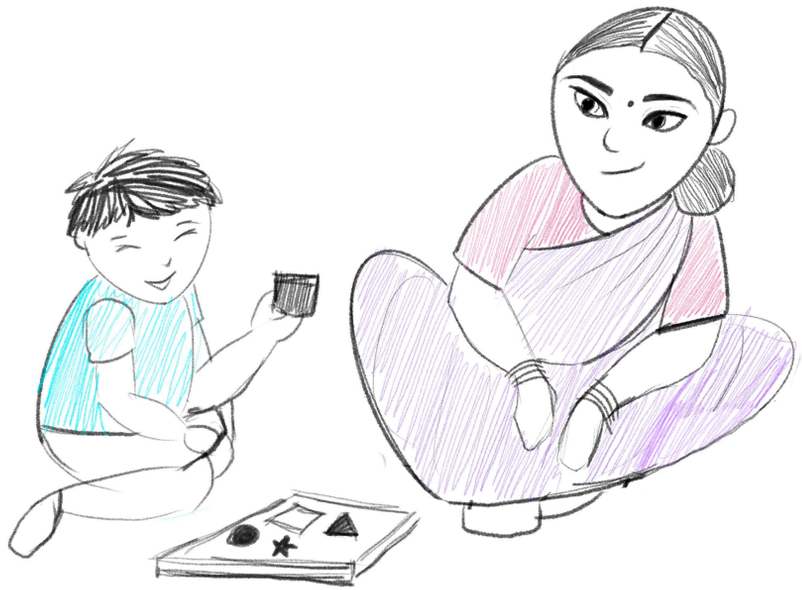
"She finds a supportive community of mothers who understand her journey"



"She navigates complex systems with confidence- getting the support her child is entitled to"



"From overwhelmed to empowered - she now feels equipped to support her child's development"



8.4 Constraints

Project Exclusions (What It Will Not Cover):

- Does not replace in-person therapy or direct medical advice.
- Not designed for children below 7 or above 11.
- Does not include emergency support or medical monitoring.
- Limited to tracking and guiding skill development, not behavioral management.

Project Constraints (Limitations):

- Requires caregiver involvement for data input.
- Depends on therapist-provided skill recommendations.
- The app is not a diagnostic tool.

09 Epilogue

9.1 Conclusion
9.2 Appendix
9.3 Reference

9.1 Conclusion

Designing an app for parents of neurodivergent kids was both challenging and heart-wrenching at times. Talking to parents who struggled to describe a day in their lives revealed how helpless and lost they often felt. Many would mistake me for a parent counselor and ask if there was any way they could help their child show progress faster. They would wonder if they were already too late, how to navigate the system, or if they were doing enough.

I saw parents who wanted to try everything within their reach some were taking classes to better understand their child, while others struggled to maintain consistent therapy sessions, leaving their hometowns, staying in PGs, or living with relatives just to access timely sessions. Some were juggling their daily lives, trying to establish a systematic structure. ***Yet none of them were on the verge of giving up.*** And that shaken yet firm form of hope in them kept me going throughout this project.

The Autism Caregiving App - Tara , was designed to support caregivers in guiding autistic children through daily tasks. With both long-term goals and short-term tasks, it offers a clear, balanced system for progress tracking.

The app's minimal interface and clear visuals make it user-friendly, while user feedback ensured practical features.

Looking ahead, the app can expand with personalized tasks, multilingual support, and data-driven insights, making autism care more accessible and adaptable.

In a world of uncertainty, this app serves to be a steady guide, empowering caregivers and nurturing the potential of every child.

9.2 Appendix : Interview Questions

Start with warming up questions

- Thank you for taking the time to talk to me today. How has your day been so far?"
- "Could you tell me a little bit about your child? What are some things they love doing?"
- "How do you usually spend time together as a family?"
- What does a typical day look like for you and the individual you care for? (get the detailed routine)
- What are the most challenging aspects of your daily routine?
- How do you balance caregiving responsibilities with other areas of your life?

Parents - Initial questions

- Post pregnancy - how did it feel when you held them for the first time ?
- When did you first got tyo know that your kid has a condition ? how did you take it ?
- Do you think your spouse equally supports you looking after your kid ?
- Can you describe a day that felt especially successful or joyful? What made it special?

Challenges and Coping

- What has been the most difficult part of your caregiving journey?
- How do you handle situations when the individual becomes overwhelmed or upset?
- What kind of emotional or mental health support do you personally need?

Communication and interaction

- How does the individual express their needs, wants, or emotions?
- What strategies or tools do you use to communicate with them?
- How do you ensure they feel understood and supported?

Education and Social Inclusion

- What has been your experience with schools or educational institutions?
- How well does your community (neighbors, friends) support or understand your situation?

- Have you used any assistive tools or devices? If yes, which ones and what has

Assistive Tools and Interventions

- Have you used any assistive tools or devices? If yes, which ones and what has been your experience?
- What barriers have you faced when trying to implement therapy or intervention programs?
- What kind of technology or innovations would make your caregiving easier?

Professionals- Role & Expertise

- What is your role in supporting neurodivergent individuals and their families?
- How long have you been working with neurodivergent individuals?
- What kinds of neurodivergent conditions do you most frequently encounter in your practice?
- What is the most common one ?

Approaches and Interventions

- What therapies or interventions do you typically recommend ?
- How do you tailor your approach to meet the unique needs of each individual?
- Every case is different how do you acknowledge their issue and provides a treatment ?
- How do you collaborate with other professionals (e.g., therapists, educators)?

Resources and Accessibility

- What resources or tools do you recommend to families of neurodivergent individuals?
- How accessible are these resources to families, especially in underserved areas?
- Are there any gaps in the availability of assistive tools or therapies?

Memorable cases

- Have you ever encountered a case where standard interventions didn't work?
- Can you share a story of a neurodivergent individual who made significant progress under your care? What made the difference?

Training and Development

- How are healthcare providers trained to understand and work with neurodivergent individuals?
- Ho you feel the current training programs adequately prepare professionals for this work? Why or why not?
- What improvements would you suggest in healthcare training and services for neurodiversity?

Effectiveness of Tools and Interventions

- What assistive tools or therapies have you found to be most effective? Why?
- Have you observed limitations in the existing tools or interventions?
- How do you measure the success or impact of an intervention?

Challenges in Practice

- What are the most significant challenges you face when working with neurodivergent individuals?
- What barriers do families commonly encounter when seeking healthcare support?
- How do you address resistance or stigma from families or communities?

Policies and Frameworks

- How do current policies or laws (eg disability rights) impact the healthcare you provide?
- Are there systemic barriers that hinder the effectiveness of healthcare services for neurodivergent individuals?
- What policy changes would most improve the quality of care for neurodivergent individuals?
- How do they get jobs and future security ?

Future Perspectives

- What do you hope to see change in the way neurodiversity is addressed in healthcare?
- If you could design an ideal healthcare system for neurodivergent individuals, what would it include?
- What innovations or research developments excite you most in this field?
- if you get a chance to remove all the issues that have been hindering the system what would be the first thing

Emotional grounds

- Do you find your self being weak or overwhelmed with everything going around you ?
- What do you do for resting , or when you are away from work ?

9.3 References

International Sources

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Explores the emotional bonds between individuals and how these bonds influence behavior and development.
Source: Verywell Mind

b. Piaget's Cognitive Stages of Development
Details Jean Piaget's theory on the stages of cognitive development in children.
Source: Simply Psychology

c. Vygotsky's Sociocultural Theory of Cognitive Development
Discusses Lev Vygotsky's theory emphasizing the fundamental role of social interaction in cognitive development.
Source: Verywell Mind

d. Early Start Denver Model (ESDM)
An evidence-based behavioral therapy for young children with autism.
Source: Autism Speaks

e. Accessibility for Visitors
The Smithsonian Institution's commitment to making all visitors feel welcome through accessible facilities and programs.
Source: Smithsonian Institution

Indian Government Sources

a. Rights of Persons with Disabilities Act, 2016 (RPwD Act)
A comprehensive law ensuring rights and entitlements for persons with disabilities, including those with autism.
Source: Department of Empowerment of Persons with Disabilities

b. National Trust for Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation, and Multiple Disabilities Act, 1999
Establishes a statutory body for the welfare of persons with specified disabilities.
Source: National Trust

c. Government Guidelines for Autism Certification
Outlines the constitution of Autism Certification Medical Boards and the process for certification.
Source: INCLEN Trust

d. Indian Scale for Assessment of Autism (ISAA)
A tool developed for the assessment and quantification of autism in India.
Source: The National Trust

e. Government Schemes & Programmes for Autism
Details various schemes like GHARAUNDA and SAMARTH aimed at supporting individuals with autism.
Source: Autism India

f. Information on Autism Spectrum Disorder, Disability Education & Engagement Portal (DEEPAK) A portal providing information on autism spectrum disorder and related educational resources.
Source: National Portal of India

Indian NGO and Research Sources

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   A non-profit organization in India focusing on the care and education of individuals with intellectual and developmental disabilities.
   Source: Tamana
b. Spastic Society of Gurgaon (SSOG)
   Provides services like occupational therapy, counseling, and vocational training for individuals with disabilities.
   Source: SSOG
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   An autonomous organization under the Ministry of Social Justice and Empowerment focusing on empowerment of persons with intellectual disabilities.
   Source: NIEPID
d. Clinical Practice Guidelines for Autism Spectrum Disorders
   Guidelines developed by the Indian Psychiatric Society for the assessment and management of autism spectrum disorders.
   Source: Indian Journal of Psychiatry

Thank You