



South Carolina Autism Society

Together We Can Solve The Puzzle

Asperger's Syndrome

A Guide for Parents and Teachers

Jim Garvey M.A., LPC, LPC/S, NCCBT

National Certified Cognitive-Behavioral Therapist
Cognitive Behavioral Clinic
Mt. Gilead Executive Offices Building C-Suite 3
920 Mt. Gilead Rd.
Murrells Inlet, S.C. 29576
(843) 450-2918

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Asperger's Syndrome

A Guide for Parents and Teachers

Asperger's Syndrome (AS) is a developmental neurobiological disorder characterized by major difficulties in social interaction, and restricted and unusual patterns of interests and behaviors.

Children diagnosed with AS present a special challenge in the educational milieu. Typically viewed as eccentric and peculiar by classmates, their inept social skills often causes them to become victims or scapegoats. Their clumsiness and an obsessive interest in obscure subjects add to their presentation. Children with AS lack understanding of human relationships and the rules of social conversation, they are naïve and conspicuously lacking in common sense. Their inflexibility and inability to cope with change causes these individuals to be stressed and emotionally vulnerable. At the same time, children with AS are often average to above average intelligence and have superior rote memories. Their single-minded pursuit of their interests can lead to great achievements later in life.

High Functioning Autism Spectrum Disorder is considered a disorder at the higher end of the autistic continuum. Comparing individuals within the continuum, Van Krevelen (cited in Wing, 1991) noted that the lower-functioning individual with autism "lives in a world of his/her own," whereas the higher functioning individual with AS, "lives in our world but in his own way."

Naturally, not all children with AS are alike. Just as each child with AS has his/her own unique personality, "typical" AS symptoms are manifested in ways specific to each individual. As a result there is no exact recipe for classroom and parents for every youngster with AS. Ultimately the diagnostic label any label, does not summarize a persons individualized interventions that will meet those (adequately assessed and monitored) needs. These suggestions are offered in the broadest sense and should be tailored to the unique needs of the individual/student with AS.

Insistence of Sameness:

Children with AS tend to worry obsessively when they do not know what to expect; fatigue, and sensory overload easily throw them off balance. They are easily overwhelmed by minimal change and sometimes engage in ritualistic behavior.

Suggestions:

Minimize transitions.

- Offer consistent daily routine: this will help them concentrate on the task at hand.
- Provide a predictable and safe environment.
- Avoid surprises: Prepare the child in advance for any changes in the daily routine, regardless of how minimal.
- Fears of the unknown: expose the child to the new activity, **Example: school, camp, teacher, and so forth beforehand, a transition plan should be put in place for the major changes such as going to a new school.**

Impairment in Social Interaction:

Children with AS are extremely egocentric, they may not like physical contact they talk at people instead of to them. They show an inability to understand complex rules of social interactions. A child with AS does not understand jokes, irony, metaphors, idioms, and words with double meanings. Example the word (park) if they only know it as park the car and mom says we are going to the park they may not know that's a place to play and/or have a picnic. The person with AS usually speaks in a monotone or stilted unnatural tone of voice. They are often referred to as the little professor because they speak so adult like. They display a poor ability to initiate and sustain conversation unless the conversation centers on their interest.

It is important to stress that although some individuals with AS often with maladaptive and disruptive behaviors in social settings, that these behaviors are often a result of their narrow and overly concrete understanding of social phenomena, and is the result of the overwhelming puzzlement they experience when required to meet the demands of interpersonal life.

Suggestions:

- Protect the child from bullying and teasing.
- In higher age groups, educate the peers, describing his/her social deficits as a true disability. Encourage classmates to treat the person with HFA/AS with compassion.
- Allow the child with AS to demonstrate their proficient academic skills; this will help gain acceptance and admiration from their fellow classmates.
- Provide opportunities for social interaction and facilitation of social relationships in fairly structured and supervised activities.
- Most children with AS want friends but simply do not know how to interact. Children with AS have to be taught social cues the same way other children learn how to play the piano. Teach the children what to say and how to say it. Model two way interactions and let them role-play. Social stories can be very helpful.
- Video taping can be very helpful, (Dr. Bellini) suggest that you edit the tape, so the individual is only seeing a natural flow in conversation. Example you may have 45 minutes of taping with prompting and support, and only have 5 minutes to show the individual of a natural conversation. Dr. Bellini has seen a great deal of success with this. He has said it's like seeing is believing if they see themselves talking naturally with another person they believe it can happen. I have also used video taping to have the individual critique themselves and practice how to say things more naturally. Some students have been amazed looking at themselves on how they sound to others.
- The availability of a communication specialist with a special interest in pragmatics and social skills training, who can be available for individual and small group work, and who can make a communication and social skills training intervention an integral part of all activities, implemented at all times, consistently, across staff members, settings, and situations.
- Although they lack understanding in the emotions of others, children with AS can learn the appropriate way to respond. Individuals with AS must learn social skills intellectually: They lack social instinct and intuition.

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- Students with AS may benefit from a peer mentor program. The teacher should pick a sensitive classmate to assist the student with AS. The peer should sit next to them and help the individual stay on task, have lunch with them, look out for them at recess; and stimulate appropriate social conversation. Typical peers should be trained first in the skills that are needed to help facilitate appropriate interactions.
- Children with AS tend to be reclusive; the teacher and peer mentor must foster involvement with others. Encourage socialization and try to limit isolated time. Both the teacher and the peer mentor can assist the student with AS.
- Participate in appropriate conversation, appropriate conversation is the key or they will only talk about what interest them. Always keep in mind that social contact is very stressful so the individual may need some down time.
- Children with AS usually have limited interests; this interest can be used to bridge the social conversation deficit. The teacher can also use the students interest to help him/her gain respect from their fellow classmates. **Example: If the student is an expert on dinosaurs let the student teach a segment on dinosaurs with a question and answer time build into the segment.**
- Specific problem-solving strategies should be taught for handling the requirements of frequently occurring troublesome situations. Training is also necessary for recognizing situations that may be troublesome and applying learned strategies in discrepant situations.
- Social awareness should be cultivated, focusing on the relevant aspects of given situations, and pointing out the irrelevances contain therein. Discrepancies between the individual's perceptions regarding the situation in question and another should be made explicit.

Limited Range of Interest:

Children with AS have limited preoccupations of intense fixations (sometimes obsessively collecting unusual things). They tend to "lecture" on their areas of interest and sometimes refuse to learn about anything outside their limited area of interest, simply because they don't see the value in it.

Suggestions:

- Do not allow the child with AS to only discuss or ask questions about isolated interests. Limit the number of questions that can be asked and the times of day when these discussions can take place.
- Use positive reinforcement to help shape a desired behavior. Praise the child for allowing others to speak. Always congratulate him/her for appropriate social behavior that is taken for granted in other children.
- Some children with AS will refuse to do assignments that are outside of their area of interest. Firm expectations must be set for completion of class work. It must be made very clear that you are in control and that they must follow specific rules, this clear understanding will help them later in life when they are in the work force. However, if they are compliant and are getting their work done, reinforce by giving them opportunities to pursue their interests.
- For some children with AS especially younger children it may be necessary to design their assignments around their interest. **Example: if the interest is dinosaurs or trains let them write their essays about dinosaurs or trains. Do math word problems using dinosaurs or trains, etc.**
- Students can be given specific assignments to bridge their interest to the subject being studied. Example: if the student has an interest in trains, ask the student to research the mode of transportation for the period of time that you are studying.

Use the child's limited interest to bridge gaps. **Example: if the child likes jungle animals have the child research the habitat of these animals, and how they have survived in the ever-changing world.**

Poor Concentration:

For you the teacher this may be the most important topic to understand. Children with AS are often off task, they are distracted by internal stimuli; this can be very frustrating and difficult to deal with, it is much easier to remove external stimuli than internal stimuli. Students with AS are very disorganized, they have difficulty staying focused in the classroom. It is not that attention is poor, but rather that they have trouble figuring out what is relevant, because of this they will resort back to internal stimuli, their complex inner world is much more intense than just daydreaming.

Suggestions:

- For the student with AS to be productive in the classroom the teacher must provide a tremendous amount of external structure. The teacher must ask frequent questions to make sure the student is on task and understanding, constant feedback and redirection should be provided.
- Children with severe concentration problems may benefit from timed work sessions. However if the work is not completed then there down time should be removed, Example: during recess or during the time used for pursuit of special interest. Use positive reinforcement when tasks are being completed, setting the child up for success is very important it helps build their self-esteem and lowers stress-levels thus allowing the child to see themselves as being competent.
- For the student that is mainstreamed it may be necessary to lessen the homework, have the student work to mastery. **Example: If the student knows the math and there are 50 questions have them do the odd numbers one night and the even numbers the next night. Resource is also very beneficial, having the materials broken down into smaller chunks.**
- Seat the student with AS in the front of the classroom and direct frequent questions to him/her to ensure that they are attending to the lesson. You may need to add gesture prompts try to avoid verbal prompting it draws too much attention to the student and is very difficult to fade. **Example: The teacher can walk around and tap the desk, maybe put her/his hand on the students shoulder any method to pull the student back to attending.**

The teacher must encourage the child with AS to leave his/her inner thoughts behind and to focus on the real world. This will be a constant battle, because their inner world is much more attractive to them. There are however different behavior plans that can be put into place to help the child succeed. Keep in mind that these plans may have to be tweaked often. **Example: Some students may do well with a token plan, some may do well with a device that vibrates every few minutes in their pocket what ever it takes.**

Academic Difficulties:

Children with AS usually have average to above average intelligence (especially in verbal skills) but lack higher level thinking and comprehension skills. Their images are concrete, and abstract thinking is poor, because you can't picture abstract words. The child with AS usually has excellent rote memory, but is very mechanical in nature. When I spoke to a college professor once with AS you could see the processing that took place in order to answer the question. They also have very poor problem-solving skills.

Suggestions:

Offer an individualized academic program designed to offer consistent successes. Learning must be rewarding and not anxiety provoking.

- Do not assume that the child with AS understands something because they can repeat it back, ask questions to make sure the understanding is there.
- Capitalize on their exceptional memories; retaining facts are their strengths.
- Emotional complexity, multiple meanings and relationship issues in novels will not be understood.
- The student with AS is often repetitious in their writing assignments. They have trouble with the difference between general knowledge and personal ideas.
- Children with AS have excellent reading skills, but language comprehension may be weak. Do not assume they understand what they seemed to read so easily. Advance WH questions may become very difficult if the student hasn't worked with someone on specific meanings. **Example: What is the mood of the story, if the student doesn't know what mood means they will not understand the question.** These abstract concepts have to be broken down.
- Children with AS also have trouble with discrimination, they may not be able to discriminate what is important information in a story. **Example: The student reads a story about George Washington and somewhere in the story it says that he liked apples, the teacher asks for something that you found out about George Washington that was important and the student with AS responds-he liked apples.**

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- Academic work may have very little effort placed into it because it is not in their area of interest. The student with AS should be expected to correct poor class work, making sure the understanding is there.
- For the teachers the critical thinking areas will be difficult, however they can be learned, as long as the meanings are broken down first. Give examples of what you are looking for. Use what is called errorless teaching. Give the student the information so that they have a clear understanding of what you are trying to teach them.

Emotional Regulation:

Children with AS have the intelligence to compete in regular education, but they lack the emotional resources to cope with the daily demands. Their self-esteem is generally low and they are often very self-critical and are unable to tolerate making mistakes. Children and adults with AS may be prone to a high level of depression. The suicide rate is very high with individuals diagnosed with AS. It is very important to educate this population on their differences and through cognitive therapy try to fill in the gaps. Rage reactions/temper outbursts are common in response to stress/frustration. Children with AS rarely relax and are often overwhelmed when things don't fit their rigid view. Interacting with people and coping with the ordinary demands of everyday life takes continual Herculean efforts.

Suggestions:

Prevent outburst by offering a high level of consistency. Prepare these children for change in daily routine, to lower stress. Children with AS frequently become fearful, angry, and upset in the face of forced or unexpected changes.

- Teach the child how to cope when stress, to prevent outbursts. Help the child write a list of very concrete steps that can be followed when he or she becomes upset. **Example: Breath deeply three times, count the fingers on your right hand slowly, ask to take a walk, ask to talk to a counselor, etc.** Include ritualistic behavior that the child finds comforting on the list, like special interests or solitude. Write these steps on a card and keep it readily available.
- Affect as reflected in the teacher voice should be kept to a minimum. Be calm, predictable, and matter of fact in interactions with the child with AS, while clearly indicating compassion and patience. Hans Asperger the psychiatrist for whom this syndrome is named, remarked that "the teacher who

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does not understand that it is necessary to teach children with AS seemingly obvious things will feel impatient and irritated”.

- Do not expect the child with AS to acknowledge that he or she is sad or depressed. In the same way that they cannot perceive the feelings of others, these children can also be unaware of their own feelings. They often cover up their depression and deny its symptoms. Because of the abstracts in the language associated with emotions it may be very difficult to express what they are feeling.
- Teachers must be alert to changes in behavior that may indicate depression, such as even greater levels of disorganization, inattentiveness, isolation, decreased stress threshold, chronic fatigue, crying, suicidal remarks, and so on. These may be red flags that the student is feeling so overwhelmed. Do not assume that he/she is OK.
- Report symptoms to the child's therapist or make a mental health referral so that the child can be evaluated for depression and receive treatment if needed. Because these children are often unable to assess their own emotions and cannot seek comfort from others, it is critical that depression be diagnosed quickly.
- Be aware that adolescents with AS are especially prone to depression. Social skills are highly valued in adolescence, and the student with AS realizes he/she is different and has difficulty forming normal relationships. Academic work often becomes more abstract, and adolescents with AS find assignments more difficult and complex. In one case, the teacher noted that an adolescent with AS was no longer crying over math assignments and therefore believed he was coping much better, in reality his subsequent decreased organization and productivity in math was believed to be a function of his escaping into his inner world to avoid the math, and thus he was not coping at all.
- It is critical that adolescents with AS who are mainstreamed have an identified support staff member with whom they can check in at least once daily. This person can assess how well the student is coping by meeting with them daily and gathering observations from the teachers.
- Children with AS who are very fragile emotionally may need placement in a highly structured special education classroom that offers an individualized academic program. These children require a learning environment in which they see themselves as competent and productive. Accordingly keeping

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them in the mainstream, where they cannot grasp concepts or complete assignments, only serves to lower self-concept, increase their withdrawal, and set the stage for a depressive disorder. In many situations, a personal aide that is trained on Asperger Syndrome is all it takes to keep the student in with typical peers. The aide offers effective support, structure and consistent feedback.

Children with Asperger's Syndrome Disorder...are so easily overwhelmed by environmental stressors, and have such profound impairment in the ability to form interpersonal relationships, that it is no wonder they give the impression of "fragile, vulnerable, and are often the targets of severe criticism. (Wing, 1981, Everard 1976) wrote that when these youngsters are compared with their nondisabled peers "one is instantly aware of how different they are".