

Appendix

Contents

Autism Basics

Asperger's Syndrome Basics

About Me

Insights and Strategies—articles and guides

- *Ten Things Every Child with Autism Wishes You Knew*, by Ellen Notbohm
- *Ten Things Your Student with Autism Wishes You Knew*, by Ellen Notbohm
- *Presuming Intellect*, by William Stillman
- *Supporting Students With Autism: 10 Ideas for Inclusive Classrooms*, by Paula Kluth
- Organization for Autism Research's *6 Steps to Success for Autism*
- Organization for Autism Research's *Steps to Success for Asperger Syndrome*
- What are Visual Strategies? by Linda Hodgdon

Peer Supports

- How to be a Friend to Someone With Autism
- Ideas from The FRIEND Program about being a friend to a person with autism
- Strategies for Bullying

Organization, Sensory and Behavioral Strategies and Examples

- Classroom Checklist
- Positive Behavior Support
- Reinforcement Strategies by Lori Ernsperger
- Easy to Use Data Collection for School Personnel by Lori Ernsperger
- Examples of Sensory/Emotions Visual Supports
- Invisible Aide Game

Assessments (also see [Autism Internet Modules](#) (AIM))

- Baseline Autism Quiz
- Sensory Processing Quiz
- Group Case Study Activities
- Autism/Aspergers Simulation Activity

Autism Basics

What does autism look like?

Autism is a term commonly used for a group of neuro-developmental disorders also known as Pervasive Developmental Disorders (PDD) or Autism Spectrum Disorders (ASD). The core symptoms of autism are challenges related to:

- **communication**
- **social interaction**
- **restrictive or repetitive behaviors and interests**

Individuals with autism can also experience other difficulties, including medical issues, differences in coordination and muscle tone, sleep disturbances, altered eating habits, anxiety or disordered sensory perceptions. The features, abilities and severity of symptoms vary considerably among individuals with autism.

These differences may also present as exceptional abilities, and autism can occur with or without other learning challenges. It is important to think of each individual with autism as intelligent, even if language or behavioral difficulties might not reveal abilities in the way one might expect. A student with autism may display some or all of the following characteristics, which may represent challenges from a certain perspective, or strengths from another (e.g. a student who appears inflexible or rigid may also be the most compliant with the rules of a classroom):

- Difficulty understanding language, gestures and/or social cues
- Limited or no speech, or verbalizations that repeat or maintain a particular topic
- Limited or no eye contact
- Difficulty relating or participating in a back-and-forth conversation or interaction
- Social awkwardness
- Intense or odd interests in unusual topics or objects, unusual play
- Repetitive behaviors, such as pacing or lining things up, spinning, hand flapping, or rocking
- More or less sensitivity to light, sound, smell, taste or touch than usual
- Abnormal fears and/or lack of appropriate fear of real dangers
- Difficulty managing transitions, changes in routine, stress, frustration
- Strong visual skills
- Good rote and long term memory (math facts, sports statistics, etc.)
- Adherence to rules, Honesty
- Intense concentration or focus, especially on a preferred activity
- Understanding and retention of concrete concepts, patterns, rules
- Musical, mathematical, technological or artistic ability or interest

Where does it come from?

There is no known cause of most cases of autism, though the best scientific evidence points toward a combination of genetic and environmental influences. Autism is a neurological/biological disorder, not a psychological/emotional condition.

Autism is found in all social, racial and ethnic groups, and is 3-4 times more prevalent in boys than in girls. Autism occurs in 1 out of 150 children, up from 1 in 10,000 in 1980.

What do I need to keep in mind?

- Individuals with autism can learn and many make dramatic improvements, especially with early and intensive intervention
- Communication challenges can encompass a broad range, both in terms of understanding and speaking (understanding gestures or spoken language, delays in processing, inability to form sounds or full sentences, word retrieval difficulties, misunderstanding idioms or sarcasm, timing of body movements or conversational exchanges, remaining on topic, etc.)
- Many people with autism are visual learners, or have attention difficulties that make visual supports essential
- Most are concrete thinkers and literally interpret jokes, idioms or sarcasm
- Social skills are underdeveloped, but interest in friendships and social interaction is often present
- Anxiety and frustration are common
- *Each student* is an individual - with a distinct set of likes and dislikes, strengths and challenges, and a unique personality

How can I make a difference?

- Be welcoming and supportive. Meet the student where he is and learn from him. Respect the individual. *Please* do not talk about him in his presence.
- Set clear expectations and boundaries. Be consistent. Develop structure. Practice and provide repetition to build understanding and skills.
- Recognize that behavior IS communication.
- Develop strategies to compensate for or overcome challenges—offer preferred seating, additional response time, organizational supports (written schedules, lists, labels, etc.), visual information paired with verbal directions, etc.
- Be aware of the student's sensory needs, and adjust supports and expectations as appropriate. Avoid or prepare for known triggers, such as fire alarms. Give breaks for self-regulation.
- Expect growth and keep standards high, with small steps and supports to allow the student to exhibit success. Promote age appropriate interests, behavior, independence and life skills.
- Reward what you want to see utilizing positive reinforcement strategies. Use the student's interests to engage and motivate him.
- Educate peers and promote acceptance and understanding. Support social development with role playing, modeling, rewards. Include with typical peers.
- Communicate among team members, including parents. Ask questions, share what works and problem-solve what does not. Keep learning. Be creative.
- Assume intelligence, teach competence, promote independence and be respectful.
- Relax, have fun, celebrate successes and treasure the individual!

Asperger's Syndrome Basics

What does Asperger's Syndrome look like?

Asperger's Syndrome, sometimes viewed as a high functioning form of autism, is a neuro-developmental condition that is one of the Pervasive Developmental Disorders (PDD) or Autism Spectrum Disorders (ASD). The core symptoms of Asperger's Syndrome are challenges related to:

- **social interaction**
- **restrictive or repetitive behaviors and interests**
- **but not delays in language development or intellectual ability**

Individuals with Asperger's have average or higher intelligence, with many exhibiting exceptional skills, knowledge or abilities. Individuals with Asperger's Syndrome can experience other difficulties, including medical issues, differences in coordination and muscle tone, sleep disturbances, altered eating habits, anxiety or disordered sensory perceptions.

These differences may also present as gifts. A student with Asperger's may display some or all of the following characteristics, which may represent challenges from a certain perspective, or strengths from another (e.g. a student who appears inflexible or rigid may also be the most compliant with the rules of a classroom):

- Difficulty understanding figurative language, idioms, gestures and/or social cues
- Literal or excessive speech, often with concentration on a particular topic
- Limited or no eye contact
- Difficulty relating or participating in a back-and-forth conversation or interaction, such as a game
- Inflexibility, Social awkwardness
- Intense or odd interests in unusual topics or objects, unusual play
- Repetitive behaviors, such as pacing or lining things up, or self-stimulatory actions like spinning, hand flapping, or rocking
- More or less sensitivity to light, sound, smell, taste or touch than usual
- Anxiety, Abnormal fears and/or lack of appropriate fear of real dangers
- Difficulty managing transitions, changes in routine, stress, frustration
- Ability to decode written language (read) at an early age (but not necessarily comprehend)
- Strong visual skills
- Good rote and long term memory (math facts, sports statistics, etc.)
- Adherence to rules, Honesty
- Intense concentration or focus, especially on a preferred activity
- Understanding and retention of concrete concepts, patterns, rules
- Musical, mathematical, technological or artistic ability or interest

Where does it come from?

There is no known cause of most cases of Asperger's Syndrome, though the best scientific evidence points toward a combination of genetic and environmental

influences. Asperger's Syndrome is a neurological/biological disorder, not a psychological/emotional condition.

Asperger's is found in all social, racial and ethnic groups and is diagnosed up to ten times more frequently in boys than in girls. The autism spectrum disorders, including Asperger's Syndrome, occur in 1 out of 150 children, up from 1 in 10,000 in 1980.

What do I need to keep in mind?

- Individuals with Asperger's can learn and many make dramatic improvements. Academics are often an area of strength.
- Communication challenges can encompass a broad range of subtle differences, both in terms of understanding (gestures, others' perspectives, idioms or sarcasm,) and speaking (word retrieval, timing conversational exchanges, remaining on topic, inappropriate comments, etc.)
- Many people with Asperger's benefit from visual supports and other accommodations helpful to visual learners and those with auditory processing challenges or difficulty focusing attention. Most are concrete thinkers and make literal (and often incorrect) interpretations of jokes, idioms or sarcasm.
- Social skills are underdeveloped, but interest in friendships and social interaction is often present—and students are often painfully aware of social status.
- Individuals with Asperger's are often the victims of bullying behavior.
- Anxiety, depression and frustration are common.
- *Each student* is an individual - with a distinct set of likes and dislikes, strengths and challenges, and a unique personality.

How can I make a difference?

- Be welcoming and supportive. Meet the student where he is and learn from him. Respect the individual. *Please* do not talk about him in his presence.
- Set clear expectations and boundaries. Be consistent. Develop structure. Practice and provide repetition to build understanding and skills.
- Recognize that behavior IS communication.
- Develop strategies to compensate for or overcome challenges—offer preferred seating, additional response time, organizational supports (written schedules, lists, labels, etc.), visual information paired with verbal directions, social curriculum, etc.
- Be aware of the student's sensory needs, and adjust supports and expectations as appropriate. Avoid or prepare for known triggers. Give breaks for self-regulation.
- Expect growth and keep standards high, with small steps and supports to allow the student to exhibit success. Promote age appropriate interests, behavior, independence and life skills. Specifically teach social skills and understanding.
- Reward what you want to see utilizing positive reinforcement strategies. Use the student's interests to engage and motivate him.
- Educate peers and promote acceptance and understanding. Support social development with role playing, modeling, rewards. Teach self reliance. Include.
- Communicate among team members, including parents. Ask questions, share what works and problem-solve what does not. Keep learning. Be creative.
- Assume intelligence, teach competence, promote independence, be respectful.
- Relax, have fun, celebrate successes and treasure the individual!

About Me: Personal Information Form

It also helps to send along photos of family or favorite activities or people!

Student's Name:

Person completing this form:

Phone:

Email:

What are some of the things that you are most interested in?

What upsets you?

What are you afraid of?

What makes you laugh?

What is ONE thing you would like to improve upon this year?

What calms you down when you are overwhelmed or upset?

What rewards work well for you?

What do you do after school or on weekends?

What days or times are convenient for Parent Meetings (during the school day)?

What is the best way to contact your family?

What issues would your family like to discuss or hear more information about?

Ten Things

Every Child with Autism Wishes You Knew

by Ellen Notbohm

from the book *Ten Things Every Child with Autism Wishes You Knew* (2005, Future Horizons, Inc.)

Some days it seems the only predictable thing about it is the unpredictability. The only consistent attribute -- the inconsistency. There is little argument on any level but that autism is baffling, even to those who spend their lives around it. The child who lives with autism may look "normal" but his behavior can be perplexing and downright difficult.

Autism was once thought an "incurable" disorder, but that notion is crumbling in the face knowledge and understanding that is increasing even as you read this. Every day, individuals with autism are showing us that they can overcome, compensate for and otherwise manage many of autism's most challenging characteristics. Equipping those around our children with simple understanding of autism's most basic elements has a tremendous impact on their ability to journey towards productive, independent adulthood.

Autism is an extremely complex disorder but for purposes of this one article, we can distill its myriad characteristics into four fundamental areas: sensory processing challenges, speech/language delays and impairments, the elusive social interaction skills and whole child/self-esteem issues. And though these four elements may be common to many children, keep front-of-mind the fact that autism is a spectrum disorder: no two (or ten or twenty) children with autism will be completely alike. Every child will be at a different point on the spectrum. And, just as importantly -- every parent, teacher and caregiver will be at a different point on the spectrum. Child or adult, each will have a unique set of needs.

Here are ten things every child with autism wishes you knew:

1. I am first and foremost a child. I have autism. I am not primarily "autistic." My autism is only one aspect of my total character. It does not define me as a person. Are you a person with thoughts, feelings and many talents, or are you just fat (overweight), myopic (wear glasses) or klutzy (uncoordinated, not good at sports)? Those may be things that I see first when I meet you, but they are not necessarily what you are all about.

As an adult, you have some control over how you define yourself. If you want to single out a single characteristic, you can make that known. As a child, I am still unfolding. Neither you nor I yet know what I may be capable of. Defining me by one characteristic runs the danger of setting up an expectation that may be too low. And if I get a sense that you don't think I "can do it," my natural response will be: Why try?

2. My sensory perceptions are disordered. *Sensory integration may be the most difficult aspect of autism to understand, but it is arguably the most critical. It his means that the ordinary sights, sounds, smells, tastes and touches of everyday that you may not even notice can be downright painful for me. The very environment in which I have to live often seems hostile. I may appear withdrawn or belligerent to you but I am really just trying to defend myself. Here is why a "simple" trip to the grocery store may be hell for me:*

My hearing may be hyper-acute. Dozens of people are talking at once. The loudspeaker booms today's special. Musak whines from the sound system. Cash registers beep and cough, a coffee grinder is chugging. The meat cutter screeches, babies wail, carts creak, the fluorescent lighting hums. My brain can't filter all the input and I'm in overload!

My sense of smell may be highly sensitive. The fish at the meat counter isn't quite fresh, the guy standing next to us hasn't showered today, the deli is handing out sausage samples, the baby in line ahead of us has a poop diaper, they're mopping up pickles on aisle 3 with ammonia....I can't sort it all out. I am dangerously nauseated.

Because I am visually oriented (see more on this below), this may be my first sense to become overstimulated. The fluorescent light is not only too bright, it buzzes and hums. The room seems to pulsate and it hurts my eyes. The pulsating light bounces off everything and distorts what I am seeing -- the space seems to be constantly changing. There's glare from windows, too many items for me to be able to focus (I may compensate with "tunnel vision"), moving fans on the ceiling, so many bodies in constant motion. All this affects my vestibular and proprioceptive senses, and now I can't even tell where my body is in space.

3. Please remember to distinguish between *won't* (I choose not to) and *can't* (I am not able to).

Receptive and expressive language and vocabulary can be major challenges for me. It isn't that I don't listen to instructions. It's that I can't understand you. When you call to me from across the room, this is what I hear: "*&^%\$#@. Billy. #\$%^*&^%\$&*....." Instead, come speak directly to me in plain words: "Please put your book in your desk, Billy. It's time to go to lunch." This tells me what you want me to do and what is going to happen next. Now it is much easier for me to comply.

4. I am a concrete thinker. This means I interpret language very literally. It's very

confusing for me when you say, "Hold your horses, cowboy!" when what you really mean is "Please stop running." Don't tell me something is a "piece of cake" when there is no dessert in sight and what you really mean is "this will be easy for you to do." When you say "Jamie really burned up the track," I see a kid playing with matches. Please just tell me "Jamie ran very fast."

Idioms, puns, nuances, double entendres, inference, metaphors, allusions and sarcasm are lost on me.

5. Please be patient with my limited vocabulary. It's hard for me to tell you what I need when I don't know the words to describe my feelings. I may be hungry, frustrated, frightened or confused but right now those words are beyond my ability to express. Be alert for body language, withdrawal, agitation or other signs that something is wrong.

Or, there's a flip side to this: I may sound like a "little professor" or movie star, rattling off words or whole scripts well beyond my developmental age. These are messages I have memorized from the world around me to compensate for my language deficits because I know I am expected to respond when spoken to. They may come from books, TV, the speech of other people. It is called "echolalia." I don't necessarily understand the context or the terminology I'm using. I just know that it gets me off the hook for coming up with a reply.

6. Because language is so difficult for me, I am very visually oriented. Please show me how to do something rather than just telling me. And please be prepared to show me many times. Lots of consistent repetition helps me learn.

A visual schedule is extremely helpful as I move through my day. Like your day-timer, it relieves me of the stress of having to remember what comes next, makes for smooth transition between activities, helps me manage my time and meet your expectations.

I won't lose the need for a visual schedule as I get older, but my "level of representation" may change. Before I can read, I need a visual schedule with photographs or simple drawings. As I get older, a combination of words and pictures may work, and later still, just words.

7. Please focus and build on what I can do rather than what I can't do. Like any other human, I can't learn in an environment where I'm constantly made to feel that I'm not good enough and that I need "fixing." Trying anything new when I am almost sure to be met with criticism, however "constructive," becomes something to be avoided. Look for my strengths and you will find them. There is more than one "right" way to do most things.

8. Please help me with social interactions. It may look like I don't want to play with the other kids on the playground, but sometimes it's just that I simply do not know how to start a conversation or enter a play situation. If you can encourage other children to invite me to join them at kickball or shooting baskets, it may be that I'm delighted to be included.

I do best in structured play activities that have a clear beginning and end. I don't know how to "read" facial expressions, body language or the emotions of others, so I appreciate ongoing coaching in proper social responses. For example, if I laugh when Emily falls off the slide, it's not that I think it's funny. It's that I don't know the proper response. Teach me to say "Are you OK?"

9. Try to identify what triggers my meltdowns. Meltdowns, blow-ups, tantrums or whatever you want to call them are even more horrid for me than they are for you. They occur because one or more of my senses has gone into overload. If you can figure out why my meltdowns occur, they can be prevented. Keep a log noting times, settings, people, activities. A pattern may emerge.

Try to remember that all behavior is a form of communication. It tells you, when my words

cannot, how I perceive something that is happening in my environment.

Parents, keep in mind as well: persistent behavior may have an underlying medical cause. Food allergies and sensitivities, sleep disorders and gastrointestinal problems can all have profound effects on behavior.

10. Love me unconditionally. Banish thoughts like, "If he would just....." and "Why can't she....." You did not fulfill every last expectation your parents had for you and you wouldn't like being constantly reminded of it. I did not choose to have autism. But remember that it is happening to me, not you. Without your support, my chances of successful, self-reliant adulthood are slim. With your support and guidance, the possibilities are broader than you might think. I promise you – I am worth it.

And finally, three words: Patience. Patience. Patience. Work to view my autism as a different ability rather than a disability. Look past what you may see as limitations and see the gifts autism has given me. It may be true that I'm not good at eye contact or conversation, but have you noticed that I don't lie, cheat at games, tattle on my classmates or pass judgment on other people? Also true that I probably won't be the next Michael Jordan. But with my attention to fine detail and capacity for extraordinary focus, I might be the next Einstein. Or Mozart. Or Van Gogh.

They may have had autism too.

The answer to Alzheimer's, the enigma of extraterrestrial life -- what future achievements from today's children with autism, children like me, lie ahead?

All that I might become won't happen without you as my foundation. Be my advocate, be my friend, and we'll see just how far I can go.

© 2005 Ellen Notbohm

Please contact the author for permission to reproduce in any way, including re-posting on the Internet.

Ellen Notbohm is author of **Ten Things Every Child with Autism Wishes You Knew**, **Ten Things Your Student with Autism Wishes You Knew**, and **The Autism Trail Guide: Postcards from the Road Less Traveled**, all ForeWord Book of the Year

finalists. She is also co-author of the award-winning **1001 Great Ideas for Teaching and Raising Children with Autism Spectrum Disorders**, a columnist for *Autism Asperger's Digest* and *Children's Voice*, and a contributor to numerous publications and websites around the world. To contact Ellen or explore her work, please visit www.ellennotbohm.com.

Ten Things

Your Student with Autism Wishes You Knew

These ideas make sense for other kids too

by Ellen Notbohm

Please contact the author for permission to reproduce in any way, including posting on the Internet

Author's note: When my article Ten Things Every Child with Autism Wishes You Knew was first published in November 2004, I could scarcely have imagined the response. Reader after reader wrote to tell me that the piece should be required reading for all social service workers, teachers and relatives of children with autism. "Just what my daughter would say if she could," said one mother. "How I wish I had read this five years ago. It took my husband and I such a long time to 'learn' these things," said another. As the responses mounted, I decided that the resonance was coming from the fact that the piece spoke with a child's voice, a voice not heard often enough. There is great need – and I hope, great willingness – to understand the world as special needs children experience it. Ten Things Every Child with Autism Wishes You Knew became a book in 2005, and the voice of our child returned in this article to tell us what children with autism wish their teachers knew.

1. Behavior is communication. All behavior occurs for a reason. It tells you, even when my words can't, how I perceive what is happening around me.

Negative behavior interferes with my learning process. But merely interrupting these behaviors is not enough; teach me to exchange these behaviors with proper alternatives so that real learning can flow.

Start by believing this: I truly do want to learn to interact appropriately. No child wants

the negative feedback we get from "bad" behavior. Negative behavior usually means I am

overwhelmed by disordered sensory systems, cannot communicate my wants or needs or don't understand what is expected of me. Look beyond the behavior to find the source of my resistance. Keep notes as to what happened immediately before the behavior: people involved, time of day, activities, settings. Over time, a pattern may emerge.

2. Never assume anything. Without factual backup, an assumption is only a guess. I may not know or understand the rules. I may have heard the instructions but not understood them.

Maybe I knew it yesterday but can't retrieve it today. Ask yourself:

- Are you sure I really know how to do what is being asked of me? If I suddenly need to run to the bathroom every time I'm asked to do a math sheet, maybe I don't know how or fear my effort will not be good enough. Stick with me through enough repetitions of the task to where I feel competent. I may need more practice to master tasks than other kids.
- Are you sure I actually know the rules? Do I understand the reason for the rule (safety, economy, health)? Am I breaking the rule because there is an underlying cause? Maybe I pinched a snack out of my lunch bag early because I was worried about finishing my science project, didn't eat breakfast and am now famished.

3. **Look for sensory issues first.** A lot of my resistant behaviors come from sensory discomfort. One example is fluorescent lighting, which has been shown over and over again to be a major problem for children like me. The hum it produces is very disturbing to my hypersensitive hearing, and the pulsing nature of the light can distort my visual perception, making objects in the room appear to be in constant movement. An incandescent lamp on my desk will reduce the flickering, as will the new, natural light tubes. Or maybe I need to sit closer to you; I don't understand what you are saying because there are too many noises "in between" – that lawnmower outside the window, Jasmine whispering to Tanya, chairs scraping, pencil sharpener grinding.

Ask the school occupational therapist for sensory-friendly ideas for the classroom. It's actually good for all kids, not just me.

4. **Provide me a break to allow for self-regulation *before* I need it.** A quiet, carpeted corner of the room with some pillows, books and headphones allows me a place to go to re-group when I feel overwhelmed, but isn't so far physically removed that I won't be able to rejoin the activity flow of the classroom smoothly.
5. **Tell me what you want me to do in the positive rather than the imperative.** "You left a mess by the sink!" is merely a statement of fact to me. I'm not able to infer that what you really mean is "Please rinse out your paint cup and put the paper towels in the trash." Don't make me guess or have to figure out what I should do.
6. **Keep your expectations reasonable.** That all-school assembly with hundreds of kids packed into bleachers and some guy droning on about the candy sale is uncomfortable and meaningless to me. Maybe I'd be better off helping the school secretary put together the newsletter.
7. **Help me transition between activities.** It takes me a little longer to motor plan moving from one activity to the next. Give me a five-minute warning and a two-minute warning before an activity changes – and build a few extra minutes in on your end to compensate.

A simple clock face or timer on my desk gives me a visual cue as to the time of the next transition and helps me handle it more independently.

8. Don't make a bad situation worse. I know that even though you are a mature adult, you can sometimes make bad decisions in the heat of the moment. I truly don't mean to melt down, show anger or otherwise disrupt your classroom. You can help me get over it more quickly by not responding with inflammatory behavior of your own. Beware of these responses that prolong rather than resolve a crisis:

- Raising pitch or volume of your voice. I hear the yelling and shrieking, but not the words.
- Mocking or mimicking me. Sarcasm, insults or name-calling will not embarrass me out of the behavior.
- Making unsubstantiated accusations
- Invoking a double standard
- Comparing me to a sibling or other student
- Bringing up previous or unrelated events
- Lumping me into a general category ("kids like you are all the same")

9. Criticize gently. Be honest – how good are you at accepting “constructive” criticism? The maturity and self-confidence to be able to do that may be light years beyond my abilities right

- Please! Never, *ever* try to impose discipline or correction when I am angry, distraught, overstimulated, shut down, anxious or otherwise emotionally unable to interact with you.
- Again, remember that I will react as much, if not more, to the qualities of your voice than to the actual words. I will hear the shouting and the annoyance, but I will not understand the words and therefore will not be able to figure out what I did wrong. Speak in low tones and lower your body as well, so that you are communicating on my level rather than towering over me.
- Help me understand the inappropriate behavior in a supportive, problem-solving way rather than punishing or scolding me. Help me pin down the feelings that triggered the behavior. I may say I was angry but maybe I was afraid, frustrated, sad or jealous. Probe beyond my first response.
- Practice or role-play – *show* me—a better way to handle the situation next time. A storyboard, photo essay or social story helps. Expect to role-play lots over time. There are no one-time fixes. And when I do get it right “next time,” tell me right away.
- It helps me if you yourself are modeling proper behavior for responding to criticism.

10. Offer real choices – and only real choices. Don't offer me a choice or ask a “Do you want...?” question unless are willing to accept no for an answer. “No” may be my honest answer to “Do you want to read out loud now?” or “Would you like to share paints with William?” It's hard for me to trust you when choices are not really choices at all.

You take for granted the amazing number of choices you have on a daily basis. You constantly choose one option over others knowing that both *having* choices and being *able* to choose provides you control over your life and future. For me, choices are much more limited, which is why it can be harder to feel confident about myself. Providing me with frequent choices helps me become more actively engaged in everyday life.

- Whenever possible, offer a choice within a 'have-to'. Rather than saying: "Write your name and the date on the top of the page," say: "Would you like to write your name first, or would you like to write the date first?" or "Which would you like to write first, letters or numbers?" Follow by showing me: "See how Jason is writing his name on his paper?"
- Giving me choices helps me learn appropriate behavior, but I also need to understand that there will be times when you can't. When this happens, I won't get as frustrated if I understand why:
 - "I can't give you a choice in this situation because it is dangerous. You might get hurt."
 - "I can't give you that choice because it would be bad for Danny" (have negative effect on another child).
 - "I give you lots of choices but this time it needs to be an adult choice."

The last word: *believe*. That car guy Henry Ford said, "Whether you think you can or whether you think you can't, you are usually right." Believe that you can make a difference for me. It requires accommodation and adaptation, but autism is an open-ended disability. There are no inherent upper limits on achievement. I can sense far more than I can communicate, and the number one thing I can sense is whether you think I "can do it." Expect more and you will get more. Encourage me to be everything I can be, so that I can stay the course long after I've left your classroom.

© 2005, 2008 Ellen Notbohm

Ellen Notbohm is author of **Ten Things Every Child with Autism Wishes You Knew**, **Ten Things Your Student with Autism Wishes You Knew**, and **The Autism Trail Guide: Postcards from the Road Less Traveled**, all ForeWord Book of the Year finalists. She is also co-author of the award-winning **1001 Great Ideas for Teaching and Raising Children with Autism Spectrum Disorders**, a columnist for *Autism Asperger's Digest* and *Children's Voice*, and a contributor to numerous publications and websites around the world. To contact Ellen or explore her work, please visit www.ellennotbohm.com.

Presuming Intellect: Ten Ways to Enrich Our Relationships Through a Belief in Competence

By William Stillman

1. *Don't define people by their diagnosis.* Remember playing tag? Nobody wanted to be *IT*. And if you were *IT*, you wanted to get rid of *IT* because being *IT* was stigmatizing, a detriment, and something undesirable—that was the game; being *IT* was to be avoided and feared. Remaining *IT* longer than we'd like becomes challenging to catch up to the others, to belong, and to feel accepted. When we define someone by their diagnosis, our perception of them may become something to be dreaded: someone defective, someone who has the *IT* with which we don't wish to risk an association of any sort. For that person, this attitude is the lubricant that greases the wheel for the vicious cycle of a selffulfilling prophecy. That is, when people define you as having *IT* and that's all you know of yourself, you will reflect back precisely what others project upon you. This is a natural and defensive reaction; and if you don't speak or can't articulate your feelings, your outpourings of "behaviors" will only further validate the diagnosis (hence the vicious cycle).

2. *Shatter myths and stereotypes.* Clinical diagnosis is but a framework for explaining "behaviors" or atypical attributes. This may include judgments about severe intellectual and physical limitations, and further speculation about other incapacities. It can also set a negative precedent of using "us and them" language in labeling someone as different, retarded, autistic or mentally unstable. However, it wasn't so long ago that persons who were epileptic, homosexual, or even those lefthanded, were labeled as mentally deviant. This led to unfair, inaccurate and unjust myths and stereotypes. All of psychology and psychiatry is educated *guesswork*; no single clinician can state with absolute authority what someone experiences in the way that medical science usually can. In considering three factors, insight, foresight and hindsight, we need to encourage others and ourselves to look beyond our history of deficitbased labeling in favor of perceiving a person's humanity—regardless of their diagnosis or way of being. The label which may perpetuate clinical myths and stereotypes is an incomplete truth; it should be but one point of reference in fully supporting the whole person.

3. *Don't talk about people in front of them.* Have you ever been in conversation with two or more people and someone talks out of turn, interrupting, belittling or disputing your contributions? Or have you temporarily lost the use of your voice as others tried to interpret your wants and needs? How did either instance make you feel? If we don't value what people have to offer, especially if they are unable to speak at all, we send a message of superiority versus inferiority. When we



define people by their diagnosis and perpetuate myths and stereotypes, we presume the authority to talk about them in front of them as an entitlement. After all, it shouldn't matter if we share information about someone's "behaviors" with their parents, doctors, and others in front of them because they are retarded, autistic, and unaware—right? Wrong! Presuming intellect requires us to believe an individual's intellectual competence is intact. This means we do not speak about them in front of them in ways that are hurtful, embarrassing or humiliating. We must also gently but firmly advocate by disallowing others from doing it as well. We need to include people in conversation by directing questions *to them* not about and around them. It also means we employ person-first language (boy *with* autism, not *autistic* boy) because it compels us to be conscious of the words we use when discussing someone. So, before you speak, ask yourself if you would welcome someone talking about you in precisely the same way without a voice to defend yourself. We cannot have a mutually respectful and trusting relationship if we talk about someone in front of them.

4. *Interpret "behavior" as communication.* Have you ever been so angered that words escaped you in the moment, and the only way you could express yourself was by screaming or throwing something? You probably felt justified in your actions because it was the only way you could vent your expression of extreme upset. But what would life be like if you could *never* retrieve the words you wanted when you needed them *and* you always seemed to be grappling with overwhelming or frustrating circumstances that caused you to react in extreme ways as the only option? In the same way you could rationalize your own behavior, let's remember that we *all* have good reasons for doing what we're doing, and we're doing the best we know how to do in the moment. You wouldn't want to be defined or stereotyped by the times you just *had* to yell and shout would you? We need to extend the same courtesy to others by not jumping to conclusions about their "behaviors" as willful misconduct, noncompliance, or "attention seeking." You may respectfully deconstruct "behavior" in terms of *communication* by appreciating the following three reasons why people may engage in what others call "acting out" or "aggressive behaviors." 1) The inability to communicate in ways that are effective, reliable and universally understandable. 2) The inability to communicate one's own physical pain and discomfort in ways that are effective, reliable and universally understandable. 3) And the inability to communicate one's own mental health experience in ways that are effective reliable and universally understandable.

5. *Offer communication enhancements and options.* We have become a culture that values instantaneous, rapid-fire response to our need for information. This includes the immediacy with which we communicate to one another through e-mail, instant messaging, text messaging, and round-the-clock accessibility via cellular telephones. When others do not communicate with us on par with the manner with which we've become accustomed, we may lose patience, become bored or distracted, or dismiss their communication attempts altogether. This may be especially true of those challenged in articulating language such as small children, the elderly, and those with a neurological difference resulting from



stroke, Tourette's, Alzheimer's, Cerebral Palsy or autism. We may wrongly interpret the inability of others to speak as quickly as we'd like as an incapacity when, in fact, most often just sensitively allowing for process time beyond what is standard is all that is required for those individuals to cognitively retrieve spoken language. In providing support to others, we must acknowledge that not everyone is neurologically "wired" for verbal communication; this is *not* the same as not having something to say. It is unacceptable to accept that because someone doesn't speak, there's nothing we can or should do. There are myriad communication options and opportunities to offer as speech alternatives. These may include pointing to "yes" and "no"; some basic sign language; photographs and symbols; computers and other keyboards; and technology of all kinds. The person will guide us to the device, or combination thereof, that makes sense for her. Engaging in conversation by discussing someone's most passionate of interests in the context of a mutually-pleasing relationship is a great incentive to entice someone into trying a communication alternative that is new and different. Honoring another's communication requires us to acknowledge that we might not like what we hear.

6. *Offer age-appropriate life opportunities.* When we are unpresuming of an individual's intellect, there is a belief that the individual likely possesses a juvenile aptitude, childish thought processes, and skills on par with someone who is chronologically much younger. This stereotype of the "perpetual child" leads some to interact with the stigmatized individual in ways that are pretentious, patronizing, and insulting. It also means that we limit the life opportunities that we offer someone in favor of preserving the "perpetual child" mindset. Instead, we provide adolescents, adults, and even persons who are elderly, with dolls and toys, and reading and viewing material suited and intended for very young children. You can only know what you know; and if someone is only ever afforded such opportunities, a childlike affect persists and permeates our interactions. *But*, if we presume intellect and acknowledge that an individual's "behaviors" might really be cries of boredom or offense with educational curriculum, vocational options, or recreational activities that are dehumanizing, we will know better how to partner with an individual in planning *age-appropriate* learning, work and freetime opportunities. The greatest obstacle to implementing this is our own attitude in how we perceive supporting someone with a different way of being.

7. *Make compassionate accommodations.* Have you ever been trying to read or listen attentively to something, and someone near you is constantly coughing? You can react one of two ways: either with annoyance, or with consideration. Reacting with annoyance will only foster bad feelings between both parties; you may feel as if the person should know to be more socially considerate, and the person, who may be struggling to care for themselves, may feel hurt or attacked. Reacting with consideration may include gently approaching the individual to offer them a cup of water, a mint or lozenge, or to simply commiserate about a human experience we've *all* endured at one time or another. Responding with the latter approach requires discounting initial impressions and making a compassionate accommodation, not only in our thoughts but in our deeds. In considering compassionate accommodations for the individual with a



different way of being, think in terms of *prevention* instead of *intervention*. *Prevention* means knowing fully what an individual requires *in advance* of a situation, environment, or activity in order to feel safe and comfortable and able to participate. This relates to the ability to think, communicate, motor-plan movement, and assimilate with the senses. It means foregoing the antiquated model of multiple, overwhelming community integrations (which often sets the overloaded individual up for an *intervention*) in favor of simple, subtle, and interest-based activities in a qualitative relationship context.

8. *Respect personal space and touch.* If we perceive someone in our care to be less than equal, be it a child, adult or someone elderly, we seem to take ownership of touching their physical being with a sense of entitlement in order to gratify our own needs. For example, instead of allowing someone the time required to bathe, eat or dress for themselves, we may grow impatient and begin handling them ourselves to “get the job done.” Or, in desiring to be affirmed, we initiate physical touch by embracing, back-rubbing or hair-tousling—all of which may be intrusive, unwelcomed and without permission. (In recent years, some colleges have even implemented “touch protocols” for dating co-eds to avoid misinterpretation of any sexual intent.) Conversely, many of us are extremely uncomfortable brushing against others in the cramped quarters of an airplane, bus, subway, or train. Personal space and touch are a matter of individualized perception for each of us based upon our culture, upbringing, and relationship experiences. A friendly slap on the back, which you’ve been conditioned to convey as communicating “hello,” may send shock waves through the nervous system of the recipient. Instead, respectfully await the invitation *in*. Await the acknowledgment that coming closer, touching, even eye gazing, is welcomed once it’s communicated by the person with whom you are developing a relationship. The invitation *in* may be as subtle as someone who rarely makes eye contact locking eyes with you and tracking your movement, or the individual who carefully, gently, extends a finger to initiate touching you. Be very mindful of the mixed messages we send to children whom we routinely embrace and then confuse once we define such as “inappropriate” come adolescence. It is also fair to state your own acceptable preferences for touch limitations.

9. *Seek viable employment for others.* The system that serves people with different ways of being endeavors to be altruistic and well-intentioned but it is an industry nonetheless; one that, in seeking viable employment opportunities for its clients, attempts to conjoin with mainstream industries that may be unpresuming of intellect. More often than not, this translates to menial tasks that are believed to require no thought: adult training facilities, repetitive factory work, janitorial cleanup, emptying trash receptacles, or replenishing the fast-food salad bar to name a few. For most others, such jobs are temporary steppingstones; but for persons who are perceived as largely incapable, these employments have become a norm that perpetuates stereotypes. In seeking to pursue viable employment, we need to think in terms of cultivating gifts, strengths, and talent areas as early on in one’s life as possible. Begin by identifying an individual’s most passionate of interests—those subjects or topics for which she wants most to talk about, watch, draw or write, reenact, engage with, and read about. When



we value passions instead of labeling them as obsessions (unless they seriously impair one's quality of life), we are better poised to creatively envision a blueprint of possibilities for one's future. This may include higher education, virtual employment via the Internet, or self-employment opportunities.


10. *Acknowledge that we are all more alike than different.* Remember the last time you drove somewhere and, upon arriving, had no recollection of the drive? How about when you hear a song you haven't heard since high school, and memories you associate exclusively with that era come flooding back? Or what about the times you've halted, blocked, stuttered or stammered over calling up someone's name? These are examples of common neurological blips, misfires and disconnects that make us all kindred in our humanity. While others may have traits that appear more exaggerated, like physically rocking or handflapping, you may catch yourself engaging in a similar action if you've been shaking your leg, tapping a pen, or twirling your hair or a piece of jewelry. When we embrace the philosophy of presuming intellect we are in a position to become agents of transformation. Doing so requires forgiveness of our own ignorance—which need not hold negative connotations—as well as seeking the forgiveness of others whom we have not held in the same regard as our typical peers. We have become a culture that elevates perfectionism to exalted heights, which is an unrealistic and potentially damaging aspiration. When we acknowledge the kinship we share with one another, we are most apt to value diversity in our lives within the context of mutual respect, co-collaboration for greater good, and the presumption of intellect.

*Content © 2007, William Stillman
www.williamstillman.com*



Supporting Students With Autism: 10 Ideas for Inclusive Classrooms

by Paula Kluth

 As I speak with colleagues in primary and secondary schools, I have noticed that many teaching veterans understand how to include students with learning disabilities, cognitive disabilities, emotional disabilities, and physical disabilities in general education classrooms; but they remain puzzled at how to support and teach students with autism in these same environments and learning experiences.

These tips are designed for the teacher who is just beginning to work with a student with autism. These simple ideas may work for a myriad of students but they are particularly helpful for educating students with autism, Asperger's syndrome, and other spectrum labels. They can help a teacher of any grade level or subject area plan lessons and engineer a safe and comfortable classroom for students with autism and other unique learning characteristics.

1) Learn About the Learner From the Learner

Oftentimes, educators needing information about a student will study the individual's educational records. While these documents are certainly one source of information, they are seldom the most helpful source of information. Teachers wanting to know more about a student with autism should ask that student to provide information. Some students will be quite willing and able to share information while others may need coaxing or support from family members. Teachers might ask for this information in a myriad of ways. For instance, they might ask the student to take a short survey or sit for an interview. One teacher asked his student with autism, to create a list of teaching tips that might help kids with learning differences. The teacher then published the guide and gave it out to all educators in the school.

If the student with autism is unable to communicate in a reliable way, teachers can go to families for help. Parents can share the teaching tips they have found most useful in the home or provide videotapes of the learner engaged in different family and community activities. These types of materials tend to give educators ideas that are more useful and concrete than do traditional educational reports and assessments.

Observing the student in another classroom setting can also be useful. In particular, these observations should focus on the student's successes: What can this student do well? Where is she strong? What has worked to create success for the student?



2) *Support Transitions*

Some students with autism struggle with transitions. Some are uncomfortable changing from environment to environment, while others have problems moving from activity to activity. Individuals with autism report that changes can be extremely difficult causing stress and feelings of disorientation. Teachers can minimize the discomfort students may feel when transitioning by:

- Giving five and one minute reminders to the whole class before any transition.
- Providing the student or entire class with a transitional activity such as writing in a homework notebook or for younger students, singing a short song about “cleaning up”.
- Ask peers to help in supporting transition time. In elementary classrooms, teachers can ask all students to move from place to place with a partner. In middle and high school classrooms, students with autism might choose a peer to walk with during passing time.
- Give the student a transition aid. Some students need to carry a toy, object, or picture, or other aid to facilitate their movement from one place to the next.

3) *Give Fidget Supports*

Oftentimes, learners with autism struggle to stay seated or to remain in the classroom for extended periods of time. While allowing learners to move frequently is one way to approach this need, some students can be equally comforted if they have an object to manipulate during lessons. One student I know likes to pick apart the threads on patches of denim. Another folds and unfolds a drinking straw during long lecture periods.

Students having such a need might be offered Slinky toys, Koosh balls, straws, stir sticks, strings of beads, rubberbands or even keychains that have small toys attached to them.

Allowing students to draw can be another effective “staying put” strategy. Many learners with and without identified needs appear better able to concentrate on a lecture or activity when they are given the opportunity to doodle on a notepad, write on their folders, or sketch in a notebook.

4) *Help with Organizing*

While some students with autism are ultra-organized, others need support to find materials, keep their locker and desk areas neat, and remember to bring their assignments home at the end of the day. Consider implementing support strategies that all students might find useful. For example, students can attach a



small “going home” checklist to the inside of their lockers or be reminded to keep a small set of school supplies in each classroom instead of having to carry these materials in their backpacks. Teachers can also:

- Have students copy down assignments, pack book bags, put materials away, and clean work spaces together. Specific skills can even be taught during this time (e.g., creating to-do lists, prioritizing tasks);
- Ask all students to do two-minute clean-up and organization sessions at the end of class; or
- Provide checklists around the classroom- especially in key activity areas. For instance, a checklist can be placed near a classroom assignment “in box” (e.g., Did you complete the assignment? Is your name on the paper?) or on the front of the classroom door (e.g., Do you have a pencil? Notebook? Homework?).

5) *Assign Class Jobs*

Many students with autism are comforted by routines and predictability. Class routines and jobs can provide this type of structure while also serving as opportunities to provide instruction and skill practice. A student who likes to organize materials might be put in charge of collecting equipment in physical education. A student who is comforted by order might be asked to straighten the classroom library. In one elementary classroom, Maria, a student with autism, was sometimes given the chore of completing the lunch count. Counting the raised hands and having to record the right numbers in the right spaces helped to build Maria's literacy and numeracy skills.

6) *Provide Breaks*

Some students work best when they can pause between tasks and take a break of some kind (walk around, stretch, or simply stop working). Some learners will need walking breaks – these breaks can last anywhere from a few seconds to fifteen or twenty minutes. Some students will need to walk up and down a hallway once or twice, others will be fine if allowed to wander around in the classroom.

A teacher who realized the importance of these instructional pauses decided to offer them to all learners. He regularly gave students a prompt to discuss (e.g., What do you know about probability?) and then directed them to “talk and walk” with a partner. After ten minutes of movement, he brought the students back together and asked them to discuss their conversations.

7) *Focus on Interests*

Whenever possible, educators should use interests, strengths, skills, areas of expertise, and gifts as tools for teaching. For instance, student strength areas



can be used to facilitate relationships. Some students who find conversation and “typical” ways of socializing a challenge, are amazingly adept at connecting with others when the interaction occurs in relation to an activity or favorite interest.

One of my former students, Patrick, had few friendships and seldom spoke to other students until a new student came into the classroom wearing a Star Wars tee-shirt. Patrick's face lit up upon seeing the shirt and he began bombarding the newcomer with questions and trivia about his favorite film. The new student, eager to make a friend, began bringing pieces of his science fiction memorabilia to class. Eventually, the two students struck up a friendship related to their common interest and even formed a lunch club where students gathered to play trivia board games related to science fiction films.

Any of the interests students bring to the classroom might also be used as part of the curriculum. A student who loves weather might be asked to write a story about tidal waves, investigate websites related to cloud formation, or do an independent research project on natural disasters. A student fascinated by Africa might be encouraged to write to pen pals living on that continent or asked to compare and contrast the governments of certain African nations with the government of the United States.

8) *Rethink Writing*

Writing can be a major source of tension and struggle for students with autism. Some students cannot write at all and others who can write, may have a difficult time doing so. Handwriting may be sloppy or even illegible. Students who struggle with writing may become frustrated with the process and become turned off to paper/pencil tasks.

In order to support a student struggling with writing, a teacher may try to give the child gentle encouragement as he or she attempts to do some writing- a word, a sentence, or a few lines. Teachers might also allow the student to use a computer, word processor, or even an old typewriter for some lessons. In addition, peers, classroom volunteers, teachers, and paraprofessionals can also serve as scribes for a student who struggles with movement and motor problems, dictating as the student with autism speaks ideas and thoughts.

9) *Give Choices*

Choice may not only give students a feeling of control in their lives, but an opportunity to learn about themselves as workers and learners. Students, especially those who are given opportunities to make decisions, know best when during the day they are most creative, productive, and energetic; what materials and supports they need; and in what ways they can best express what they have learned.

Choice can be built into almost any part of the school day. Students can choose which assessments to complete, which role to take in a cooperative group, which



topics to study or which problems to solve, and how to receive personal assistance and supports. Examples of choices that can be offered in classrooms include:

- Solve five of the ten problems assigned
- Raise your hand or stand if you agree
- Work alone or with a small group
- Read quietly or with a friend
- Use a pencil, pen, or the computer
- Conduct your research in the library or in the resource room
- Take notes using words or pictures
- Choose any topic for your term paper

10) *Include*

If students are to learn appropriate behaviors, they will need to be in the inclusive environment to see and hear how their peers talk and act. If students are to learn social skills, they will need to be in a space where they can listen to and learn from others who are socializing. If students will need specialized supports to succeed academically, then teachers need to see the learner functioning in the inclusive classroom to know what types of supports will be needed.

If it is true that we learn by doing, then the best way to learn about supporting students with autism in inclusive schools is to include them.


Source:

© 2005 Paula Kluth. Adapted from: P. Kluth (2003). *"You're going to love this kid": Teaching students with autism in the inclusive classroom*. Baltimore: Brookes Publishing.



Organization for Autism Research's

6 Steps to Success for Autism

 Your classroom is already a diverse place. With the increasing inclusion of students with autism, the challenges associated with managing a classroom will grow. This section outlines a simple and highly flexible six-step plan you and your team can use to prepare for the inclusion of a child with autism in your classroom.

Step 1: Educate Yourself

You must have a working understanding of autism and what that means for your particular student(s). Different behaviors are very much a part of autism. Sometimes children with autism may behave in inappropriate or disruptive ways but their behaviors are more related to their autism than they are deliberate, negative acts. Learning about autism and about how it affects your student specifically is the first step to success.

Your education about autism will evolve as your relationship with the family and the student develops and your knowledge about the disorder and skills in dealing with its impact on the classroom grows. Maintaining an open attitude to learning and working closely with the parents and school team will help you succeed in the long term.

Step 2: Reach Out to the Parents

Parents are your first and best source of information about their child. Step 2 is establishing a working partnership with your student's parents. Ideally, it will begin with meetings before the school year. After that, establishing mutually agreed modes and patterns of communication with the family throughout the school year is critical.

Building trust with the parents is essential. Communication with families about the progress of the student should be ongoing. While the information you exchange may often focus on current classroom challenges, strategies employed, and ideas for alternative solutions, do not forget to include positive feedback on accomplishments and milestones reached.



Step 3. Prepare the Classroom

There are ways you can accommodate some of the needs of children with autism in your classroom that will enhance their opportunity to learn without sacrificing your plans for the class in general. Of course, there are practical limitations on how much you can modify the physical characteristics of your classroom, but even a few accommodations to support a child with autism may have remarkable results. The [Educator's Guide to Autism](#) provides a schematic that offers a visual representation of the "ideal" classroom for a child with autism.

Step 4: Educate Peers and Promote Social Goals

You must make every effort to promote acceptance of the child with autism as a full member and integral part of the class, even if that student only attends class for a few hours a week. As the teacher of a child with autism, you must create a social environment that encourages positive interactions between the child with autism and his or her typically developing peers throughout the day. Children with autism, by definition, have difficulties in socialization and in understanding language and social cues. But with appropriate assistance, children with autism can engage with peers and establish mutually enjoyable and lasting interpersonal relationships.

Research shows that typically developing peers have more positive attitudes, increased understanding, and greater acceptance of children with autism when provided with clear, accurate, and straightforward information about the disorder. Assuming there are no restrictions on disclosing that your student has autism, educating your class about autism and its effect on their fellow student can be an effective way to increase positive, social interactions between the child with autism and his classroom peers.

Remember that many social interactions occur in settings outside the classroom. Without prior planning and extra help, students with autism may end up isolated during these unstructured times. You may want to create a "circle of friends," a rotating group of responsible, peer buddies for the student with autism, who will not abandon him, serve as a model of appropriate social behavior, and protect against teasing or bullying. This tactic can also be encouraged outside of school.

Step 5. Collaborate on the Implementation of an Educational Plan

Since your student with autism has special needs beyond academics, his or her educational plan is defined by an Individualized Education Program (IEP). The IEP is a blueprint for everything that will happen to a child in the next school year. As the principal observer and teacher of the child, you play a key role in the development, implementation, and evaluation of the child's IEP. You will be responsible for reporting back to the IEP team on the student's progress toward meeting specific academic, social, and behavioral goals and objectives in the IEP. You will also be asked for input about developing new goals for the student



in subsequent IEP meetings.

IEPs are created by a multidisciplinary team of education professionals, along with the child's parents, and are tailored to the needs of the individual student. Special and general education teachers, speech and language therapists, occupational therapists, school psychologists, and families form the IEP team and meet regularly to discuss student progress on IEP goals.

Before the IEP team meets, an assessment team gathers information about the student to make an evaluation and recommendation. Then, one person on the evaluation team coordinates all the information, and the team meets to make recommendations. The IEP team then meets to write the IEP based on the evaluation and team member suggestions.

IEPs always include annual goals, short-term objectives, special education services required by the student, and a yearly evaluation to see if the goals were met. Annual goals must explain measurable behaviors so that it is clear what progress should have been made by the end of the year. The short-term objectives should contain incremental and sequential steps toward meeting each annual goal. For some tips on writing objectives and developing measurable IEP goals for learners with autism, please see the [Educator's Guide to Autism](#) from OAR.

Step 6. Manage Behavioral Challenges

For students with autism, problem behaviors may be triggered for a variety of reasons. Such behaviors may include temper tantrums, running about the room, loud vocalizations, self-injurious activities, or other disruptive or distracting behaviors. Because children with autism often have difficulties communicating in socially acceptable ways, they may act out when they are confused or fearful about something.

Your first challenge is to decipher the cause, or function, of the particular behavior. Look for patterns in these behaviors such as when they do, or do not, consistently occur. Communicating with families and other team members and observing the behavior in the context in which it occurs is essential to learning the function of the behavior.

It's important to use consistent, positive behavioral reinforcement techniques to promote positive and pro-social behaviors for children with autism. The student's IEP should contain concrete and explicit positive behavioral goals, as well as a wide range of methods for promoting these goals. The student's parents and IEP team may be able to suggest visual recognition techniques and incentive systems that you can use to reinforce positive behaviors.

Teachers may choose to ignore other negative behaviors or give predetermined consequences. The key is to be consistent with how you react to the behaviors over time and to use as many positive strategies to promote pro-social behaviors as possible.



As you follow these steps and learn more about children with differences, you will become a mentor to other educators when they face similar challenges for the first time. Your curiosity will fuel your education about autism; your communication skills will help you create a meaningful alliance with parents.


Most of all, your collaboration skills will help you work as a key part of the team that will support the child with autism throughout the course of the school year, and your patience, kindness, and professionalism will make a difference in the lives of all your students.

<http://www.researchautism.org/educators/autismsteps/index.asp>



Organization for Autism Research's

Steps to Success for Asperger Syndrome

 Having a child with Asperger Syndrome in your class will have a different impact on your classroom environment than having a child with autism. Each individual with Asperger Syndrome is different and will present his or her own unique challenges.

Children with Asperger Syndrome often display considerable academic strengths. The effects of the disorder require different teaching strategies to discover and capitalize those strengths for successful learning. Students within the school environment also face many obstacles to successful social interactions and relationship building.

The first challenge is to recognize Asperger Syndrome as a serious challenge for the student and you. It can be very deceptive, almost hidden to the untrained eye at first. Children with Asperger Syndrome can, at times, look and act like much like their typical peers. Further, these children tend to perform as well or better academically as their typical peers potentially masking the effects of the disorder.

Asperger Syndrome is a neurological disorder; individuals with the disorder often have difficulty controlling certain behaviors. Most often these behaviors are a function of Asperger Syndrome and not the result of the individual's willful disobedience or noncompliance.

To read more about Asperger Syndrome, please refer to the [Educator's Guide to Asperger Syndrome](#) and other Asperger Syndrome resources listed on www.researchautism.org.

SIX-STEP PLAN

Following the six-step plan, detailed below, will help prepare you for the entrance of a child with Asperger Syndrome in your classroom, as well as foster inclusion throughout the school. The six steps are simple and highly flexible—think of them as continuing and often concurrent actions.

Note: The steps are outlined first with links to more detailed discussion. To read the most complete version, please view the OAR [Educator's Guide to Asperger Syndrome](#)



Step 1: Educate Yourself

Different behaviors are a large part of Asperger Syndrome. Learning about Asperger Syndrome and the specific characteristics of your student will help you effectively manage the behaviors. Here are some helpful hints that can guide everyday school life for students with Asperger Syndrome.

- **Operate on “Asperger time.”** “Asperger time” means, “Twice as much time, half as much done.” Students with Asperger Syndrome often need additional time to complete assignments, gather materials, and orient themselves during transitions.
- **Manage the environment.** Any change can increase anxiety in a student with Asperger Syndrome. Strive to provide consistency in the schedule and avoid sudden changes.
- **Create a balanced agenda.** Make a visual schedule that includes daily activities for students with Asperger Syndrome. Some parts of the daily schedule or certain classes or activities should be monitored or restructured, as needed.
- **Share the agenda.** Students with Asperger Syndrome have difficulty distinguishing between essential and nonessential information. In addition, they often do not remember information that others acquire from past experiences or that come as common sense. Thus, it is important to state the obvious and “live out loud.” By stating what you are the child can better understand the meaning behind your actions.
- **Simplify language.** Keep your language simple and concise, and speak at a slow, deliberate pace. Students with Asperger Syndrome to have difficulty “reading between the lines,” understanding abstract concepts like sarcasm, or interpreting facial expressions. Be clear and specific when providing instructions.
- **Manage change of plans.** Make sure the student with Asperger Syndrome understands that sometimes planned activities can be changed, canceled, or rescheduled. Have backup plans and share them with the child with Asperger Syndrome. Prepare them for change whenever possible; tell them about assemblies, fire drills, guest speakers, and testing schedules. Recurring transitions, such as vacations and the beginning and end of the school year, may cause anxiety for a child with Asperger Syndrome.
- **Provide reassurance.** Because students with Asperger Syndrome cannot predict upcoming events, they are often unsure what to do. Provide feedback and reassurance frequently so that the student knows he is moving in the right direction or completing the correct task. Use frequent check-ins to monitor student progress and stress.
- **Be generous with praise.** Find opportunities throughout the day to tell the student with Asperger Syndrome what they did right. Compliment attempts as well as successes. Be specific to ensure that the student with Asperger Syndrome knows why you are providing praise.



Step 2: Reach Out to the Parents

The parents of your student with Asperger Syndrome are your first and best source of information about their child; they can provide you with information about their child's behavior and daily activities. Ideally, this partnership will begin with meetings before the school year. After that, it is critical to establish mutually agreed-upon modes and patterns of communication with the family throughout the school year.

Step 3: Prepare the Classroom

Having learned about the individual sensitivities and characteristics of your student with Asperger Syndrome, you now have the information you need to organize your classroom appropriately. You can manipulate the physical aspects of your classroom, making it more comfortable for children with Asperger Syndrome without sacrificing your general plans for the class. The [Educator's Guide to Asperger Syndrome](#) contains information about specific approaches for structuring the academic and physical environment to address the needs of your student with Asperger Syndrome.

Step 4: Educate Peers and Promote Social Goals

Children with Asperger Syndrome have social deficits that make it difficult for them to establish friendships. However, with appropriate assistance, they can engage with peers and establish mutually enjoyable and lasting relationships.

The characteristics of Asperger Syndrome can cause peers to perceive a child with the disorder as odd or different. This can lead to situations that involve teasing or bullying. Children with Asperger Syndrome often cannot discriminate between playful versus mean-spirited teasing. Teachers and school staff must be aware that students with Asperger Syndrome are potentially prime targets of bullying or excessive teasing and must watch for signs.

One strategy is to assign a "buddy" in the classroom. Research shows that typically developing peers have more positive attitudes, increased understanding, and greater acceptance of children with Asperger Syndrome when provided with clear, accurate, and straightforward information about the disorder. Thus, educating students about the common traits and behaviors of children with Asperger Syndrome can lead to more positive social interactions between your student with Asperger Syndrome and his or her peers.

Many social interactions occur during unstructured times in settings outside the classroom where students with Asperger Syndrome may end up isolated. You may want to create a "circle of friends," a group of responsible peers for the student with autism, who will not abandon him, serve as a model of appropriate social behavior, and protect against teasing or bullying. This tactic can also be encouraged outside of school.



Step 5: Collaborate on the Educational Program Development.

Read about Individualized Education Programs (IEPs) at www.researchautism.org.

Step 6: Manage Behavioral Challenges

School is a stressful environment. Commonplace academic and social situations may create extreme stress for students with Asperger Syndrome. The stressors may include: difficulty predicting events because of changing schedules; tuning into and understanding teacher's directions; interacting with peers; anticipating changes, such as classroom lighting, sounds/noises, odors, etc.

Tantrums or meltdowns (terms that are often used interchangeably) typically occur in three stages that can be of variable length. These stages and associated interventions are described more fully in the [Educator's Guide to Asperger Syndrome](#). Students with Asperger Syndrome rarely indicate that they are under stress. While they may not always know when they are near a stage of crisis, most meltdowns do not occur without warning. There is a pattern of behavior, which is sometimes subtle, that suggests an imminent, behavioral outburst. Prevention through the use of appropriate academic, environmental, social, and sensory supports and modification to environment and expectations is the most effective method.

<http://www.researchautism.org/educators/aspergersteps/index.asp6>



How To Be a Friend to Someone With Autism

- **Take the Initiative to Include Him or Her** - Your friend may desperately want to be included and may not know how to ask. Be specific about what you want him to do.
- **Find Common Interests** - It will be much easier to talk about or share something you both like to do (movies, sports, music, books, TV shows, etc.).
- **Be Persistent and Patient** - Remember that your friend with autism may take more time to respond than other people. It doesn't necessarily mean he or she isn't interested.
- **Communicate Clearly** - Speak at a reasonable speed and volume. It might be helpful to use short sentences. Use gestures, pictures, and facial expressions to help communicate. Speak literally – do not use confusing figures of speech (He may truthfully tell you, “the sky” if you ask “What’s up?”)
- **Stand Up For Him or Her** - If you see someone teasing or bullying a friend with autism, take a stand and tell the person that it's not cool.
- **Remember Sensory Sensitivity** - Your friend may be very uncomfortable in certain situations or places (crowds, noisy areas, etc.). Ask if he or she is OK. Sometimes your friend may need a break.
- **Give Feedback** - If your friend with autism is doing something inappropriate, it's OK to tell him nicely. Just be sure to also tell him what the right thing to do is because he may not know.
- **Don't Be Afraid** - Your friend is just a kid like you who needs a little help. Accept his or her differences and respect strengths just as you would for any friend.

Adapted, Peter Faustino



For more information about using visual strategies,
visit our web site...

Sign up for Linda Hodgdon's **FREE** E-Newsletter,
filled with information, teaching ideas,
resources and helpful tips.

www.UseVisualStrategies.com

NEW!

www.AutismFamilyOnline.com

Become a member of the FAMILY.
It's the perfect place to go for information,
Q&A, training, discussion forum, and other resources
for professionals & parents of students
with Autism, Asperger's Syndrome and
related learning challenges.

What are Visual Strategies?



Tools for
Overcoming Communication Challenges
Linda Hodgdon, M.Ed., CCC-SLP

What are Visual Strategies? is available printed as a "little book." These "little books" are available to purchase as single copies or in quantities at a discount. These "little books" are perfect for distributing to groups, passing out at meetings, sharing at conferences or other opportunities to share important information.

To obtain additional copies of this "little book," visit
www.UseVisualStrategies.com

© 2005
QuirkRoberts Publishing

P.O. Box 71
Troy, Michigan 48099-0071
Telephone: (248) 879-2598
Fax: (248) 879-2599
office@UseVisualStrategies.com
www.UseVisualStrategies.com

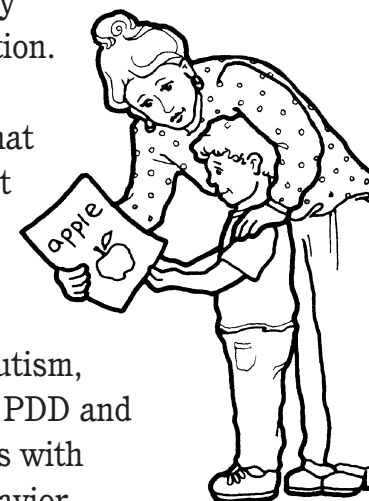
No portions of this book may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopying and recording, or by any informational storage and retrieval system, without written permission from the publisher, Printed in the United States of America.

What are VISUAL STRATEGIES?

Tools for Overcoming Communication Challenges

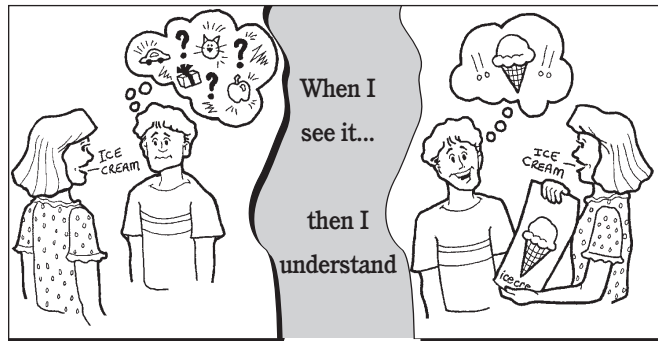
Visual strategies are things that we see that enhance communication. A primary purpose for using visual strategies is to support understanding. Visual strategies provide information in a form that many students can understand more easily than auditory information.

When we recognize that students have different learning styles, we discover that most students with autism spectrum disorders (autism, Asperger's Syndrome, PDD and more) and many others with communication or behavior challenges demonstrate a strength in understanding visual information compared to their ability to understand talking and conversation.



That means they generally understand what they **see** better than what they **hear**.

Yet we tend to communicate with them primarily by talking. Using visual tools to support communication



capitalizes on their ability to gain information from the sense of sight.

Dear Linda...
...I feel so alone sometimes when I try to get people to understand that **visuals** are not a luxury but a **vital need** for my son to understand the chaotic environment of a classroom. . .

I just received your book on behavior and can't wait to dive in. I never thought Michael had behavior issues. The issues he has, I believe, are really caused because **he doesn't understand** what he needs to do. No one understands that he needs to **SEE** it!

When communication breaks down for Michael he needs to work things out with **visual choices** so he can do something other than cry or scream and say no.

Thanks for listening . . . I think you do understand . . . because when I read your words from your books I feel them so powerfully because I have seen your methods work like a miracle with my son. . .
Monica, (Michael's Mom)

Are visual strategies only useful for students with autism?

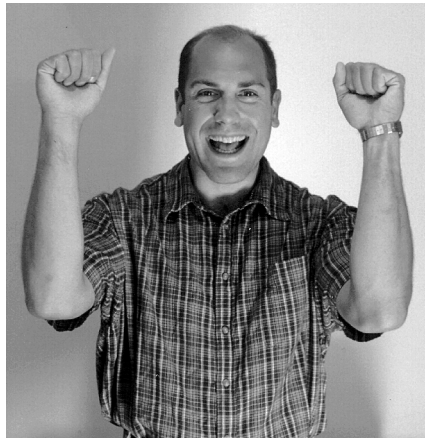
No, no, no. We have learned a lot about the value of visual strategies by using them with students with autism spectrum disorders. But we have also learned how important it is to use visual supports for students with other communication or behavior challenges. In fact, visual tools are used successfully in classrooms for all students.

Can you give some examples?

Photographs, line drawings, computer clip art, pictures from catalogs or magazines, food labels, signs, logos, real objects and written language can be used as visual tools to support communication.



Playground



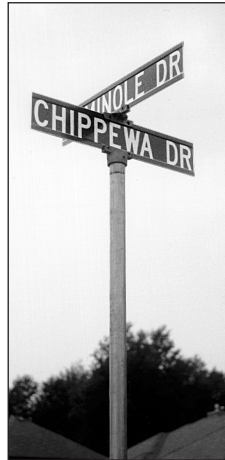
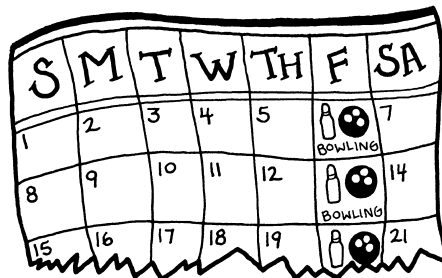
Visual supports can include:
Body Language:
 Facial expressions,
 body movement,
 pointing, eye contact

Cues in the Natural

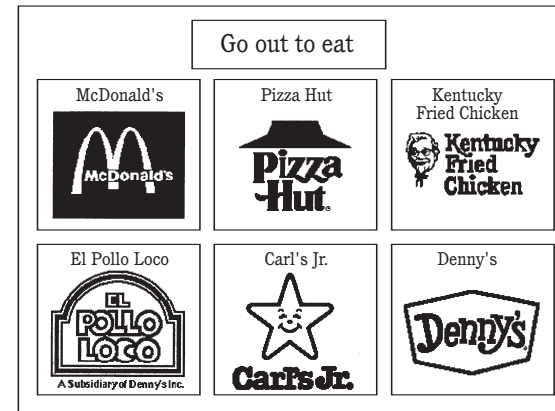
Environment: Furniture arrangement, signs in the environment (in/out, men/women), menus, directions on a vending machine

Traditional Tools for

Organization: Calendar, day planner, TV guide, shopping list, cooking instructions

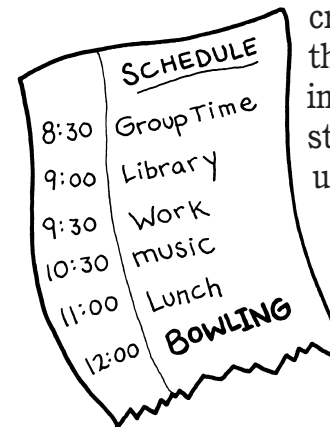


Specially Designed Tools: To develop a schedule, provide choices, give information, give directions, establish rules, teach skills, teach self-regulation and more

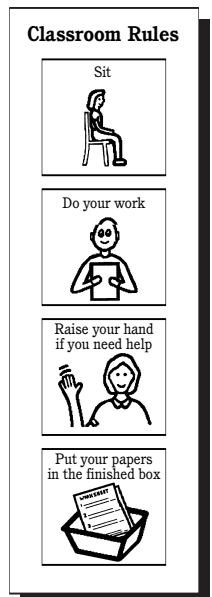


One goal is to teach students to identify, understand and respond appropriately to the visual cues and information that already exist in the environment.

Another goal is to identify a student's specific communication needs and challenges. Then visual tools can be

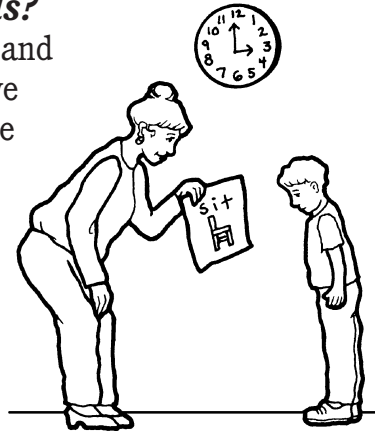


created to give the precise information the student needs to understand.



How do you use visual tools?

They are easy to use. Just talk and show. We become more effective communicators if we use simple language and support our communication by showing the student something visual to help him understand what we are saying.



What are reasons to use visual tools?

We use visual strategies to accomplish a purpose. Watching students gives us lots of information about what they need.

Pay attention to:

- *When & why they have behavior problems*
- *If they have difficulty following classroom routines*
- *How they handle change*
- *Problems during transitions*
- *How they follow directions*
- *Their ability to effectively let you know what they want*
- *When they seem to understand and when they seem to be confused*

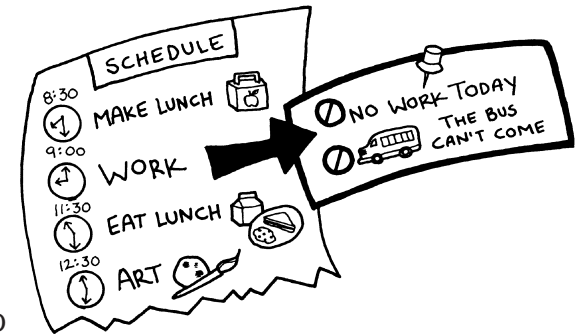
Our goal is to discover when students have difficulty or need support. Defining the student's needs will guide the decision about what kind of visual tools to use.

What are the possibilities?

Visual tools provide structure to help students by creating an environment that is more predictable and understandable. They can be used at home or school or transported to other environments.

For example:

Schedules are the most common visual tools used to give students information. They help students know what is happening during the day and anticipate transitions from one activity to another.



Visual

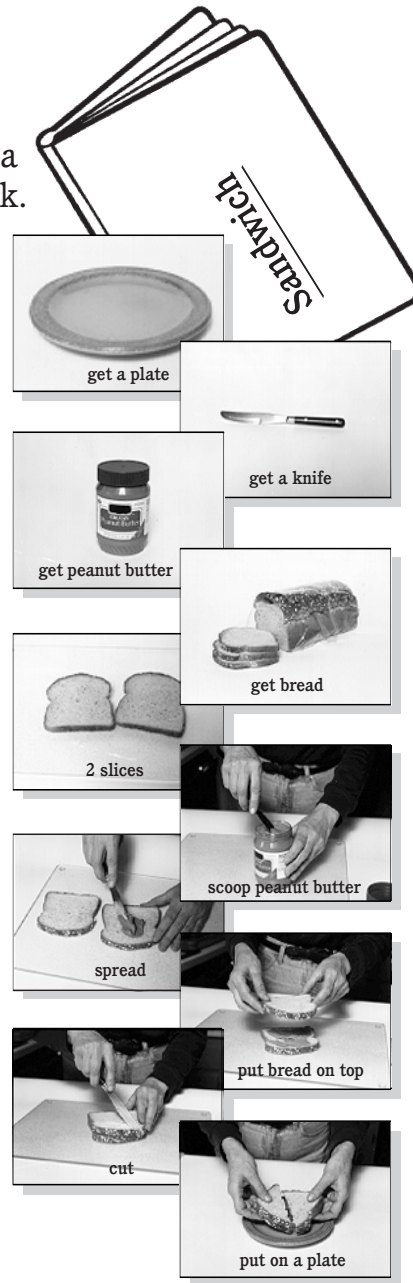
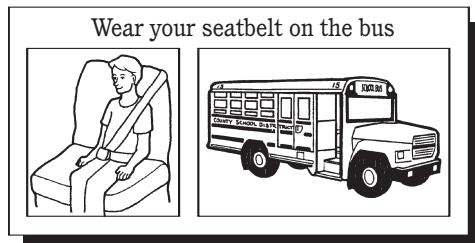
timers create a visual way for students to understand the passage of time. Timers help students handle transitions more easily.



Task organizers or step-by-step directions guide students through a series of steps to accomplish a task.

Choice boards display the options available to choose from.

Classroom or home rules help students remember what to do or state options to unacceptable behavior.



Do you have more examples?

Yes. A powerful purpose for visual strategies is to give information. It is common to give students information verbally and to assume they understand.

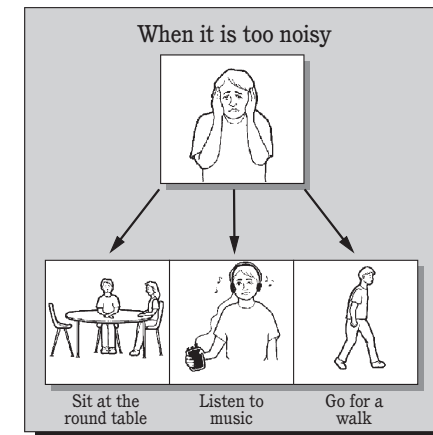
Anxiety or behavior problems can emerge when students really don't understand, or they don't remember what to do or how to handle a situation.

For example:

People locators help students understand where significant people are, when they will leave, or when they will return.

Transition and travel helpers can prepare students for predictable activities and routines or for excursions that are not part of the normal routine.

Behavior helpers guide students to prepare for activities and anticipate what will happen and what will be expected of them.



Where do you keep visual tools?

Sometimes visual tools are hung on the wall or refrigerator. (Make sure to hang them at the right height so students can see them easily.) They can be placed in communication books or mini photo albums so they can be easily accessed. Carrying visual prompts in a pocket or placing them on a desk can be useful. There are endless possibilities. What is important is that they can be found quickly and easily when they are needed.

Do you use visual strategies for students who talk?

Sometimes people question using visual strategies for students who already talk. Traditionally, communication boards and other augmentative communication supports have been used to help non-verbal students or those with limited verbal ability express themselves better. The current use of visual strategies for supporting *understanding* has shifted that focus. It is very helpful to use visual tools to aid understanding for both non-verbal and verbal students.

Remember:

*Just because students talk. . . .
it doesn't mean that they understand everything*



Aren't visual strategies just for young children?

No. They are appropriate for individuals of all ages. The visual tools we use for younger children will change and look more mature as they grow older. Think about the visual supports we use to help organize our own lives. Shopping lists, calendars, cooking recipes. . . the list is long. Our students with communication challenges can benefit from the same tools we use, however, they generally need more visual supports than we do.

Ideas from the FRIEND Program about being a friend to a person with autism

- Treat him like anyone else and talk to him like you would talk to another one of your friends. Don't be too formal and don't talk to him like he's a little kid.
- Don't tease. Sometimes he may not understand the teasing or sometimes he may think that you're being friendly when you're really not. If other kids tease him, pull them aside and tell them to stop.
- Be helpful, but don't be too helpful. If you're too helpful, it may make him feel more different. Let him try to do it first by himself, then help out if he needs it. Include him in group activities like games and team sports if he can. Ask him to do things with you, but don't just explain it to him; show him what to do so he can imitate you.
- Don't ignore him, even if you think he doesn't notice you.
- Find out about his disability. Read some stuff on the Internet or ask a teacher or a guidance counselor for books. You also can ask his mom or dad when you see them.
- Ask a teacher or guidance counselor if you're confused about something he is doing. There's a reason kids do things. If you figure it out, you might be able to help him.
- Be patient. Sometimes it takes kids with autism longer to do something or to answer a question. You also may need to slow down when you communicate with him.
- Take time to say "hi" whenever you see him. Even when you're in a hurry and pass him in the hall, just saying "hi" is nice.
- Don't be afraid to go up to him if he needs help. Take your time and ask what you can do to help. Sometimes he may not understand what happened (that he lost his turn in the game, he can't cut in line) and will be better once he understands the situation.
- Just work with him and try to help him learn. That will make you feel good and it will help him, too.



- Encourage him to try new things because sometimes he may be afraid to try new stuff.
- Find out what his special interests or abilities are and then try to find ways to let him use them.
- Say something to him when he does good things. You can cheer, give “high-fives” or just tell him “great work”. He likes to be complimented, too.
- It’s OK to get frustrated with him sometimes or to want to play alone or with somebody else. If he won’t leave you alone after you’ve asked him to, tell a teacher or other adult who can help you.
- Don’t be afraid to ask him to do something. He is a neat kid and can do a lot of things.
- Find something to like, a special skill to admire or a special interest he has. Some kids with autism are great with math, spelling, or computers or they have a great memory for the class schedule. Who knows? Maybe he will help you!

*Adapted from The FRIEND Program
at Southwest Autism Research and Resource Center (SARRC)*



Strategies for Bullying

According to ***Perfect Targets***, Rebekah Heinrichs' book that outlines various aspects of bullying and solutions to support students, bullying can take several forms:

- physical (hitting, pushing, tripping, grabbing, destroying another's property or school work)
- verbal (teasing, making fun, threats, name-calling, or non-verbal communication)
- social (intent to isolate others through rumors, shunning, humiliation, etc)
- educational (adults from the school team who use their position and power to cause distress to students—can include sarcasm, humiliation, favoring certain students, etc.)

Research has shown there are general characteristics of an individual inclined to bully others, as well as typical victim profiles. The characteristics of a child on the autism spectrum often fall within the victim profile—social, interpersonal and communication difficulties, anxiety and poor sense of self, feelings of not being in control, younger, smaller or weaker, and typically well-protected or overly directed by family members or well-intended adults. In particular, students with Asperger Syndrome or others who perform well academically and are less likely to have full time adult support (and therefore, protection) are often the targets of bullying. As with other areas of intervention for special needs students, finding ways to help the child to become more assertive, self-reliant and able to self-advocate is a critical piece of reducing a student's victim characteristics.

Several strategies are available to develop a community that minimizes bullying and helps to develop a welcoming environment for all. Options include staff and school community awareness and training, positive adult modeling, developing a school code of conduct and reporting, using formative and pro-social instruction as well as consequences, and involving parents when bullying occurs. Specific intervention strategies excerpted from *Perfect Targets* are outlined as follows:

Strategies for Dealing with Targets of Bullying (pg. 106-7)

- listen, be compassionate and use a calm voice
- provide as much privacy as possible
- take reports seriously and reassure students that they were right to come to you and that you will advocate for them
- decrease self-blame by identifying the bullying behaviors as wrong and unjustified
- be proactive in manipulating the classroom environment for success (e.g., helpful peers)
- look for cues that students may need help developing social competence



- discuss whether other bullying has occurred
- continue to monitor behaviors and have a follow-up conversation with the student
- take into consideration any exceptionalities and how they may impact bullying situations; individualize strategies accordingly

Strategies for Dealing with Students who Bully

- stay calm but use a firm, straightforward style
- provide as much privacy as possible
- give a brief, clear summary of the unacceptable behavior(s) and consequences, if appropriate
- note the behavior so a pattern can be established if behaviors continue
- do not get drawn into arguments or lengthy discussions
- correct the bully's thinking errors (e.g., blaming the target)
- identify the target's emotions to help promote empathy
- consider other ways to help build empathy for the target(e.g., role-play incident with the bully taking the target's role)
- re-channel the bully's need for power into more positive, socially appropriate endeavors
- model respect and look for opportunities to pay attention to positive behaviors
- provide formative /pro-social consequences whenever possible (e.g., making amends)
- take into consideration any exceptionalities and how they may impact bullying situations; individualize strategies and responses accordingly

Extracted from: Perfect Targets; Asperger Syndrome and Bullying; Practical Solutions for Surviving the Social World, By Rebekah Heinrichs



Classroom Checklist

By: Lori Ernsperger, PhD

This informal checklist is to assist school personnel in creating a positive classroom environment. Each guideline should be reviewed and determined appropriate in meeting the needs of the student. Not all guidelines will apply to each student, setting or classroom.

	YES	NO	Action Plan
Visual and physical boundaries defined			
Workstations are labeled with picture and word			
Classroom is free of clutter			
Space provided for small group and 1:1 instruction			
Space provided for whole group instruction			
Auditory/Visual cue is utilized for transitions			
Furniture is appropriate size			
Furniture placement defines boundaries			
Open spaces are minimized			
Materials are clean and in good working order			
Visual Timers are utilized			
Shelves are clearly labeled			
Students return materials to proper location			
Sensory strategies are written on schedule			
Materials are age appropriate			
Transition items are visible and utilized			
Life domains are addressed in the schedule			
Quiet space is provided for Break Area			
Comfortable seating is provided in Break Area			
Teacher resources are in a secured location			
Teacher's desk is out of the way			
Data collection center is clearly marked			
Data collection center is accessible			
Carpets are used to filter noise			
Outside distractions are minimized			
Safety standards are implemented			
Doorways are secured			
Safety plan is written and posted			
Classroom Schedule is posted and visible			



Token economy system is utilized			
Reinforcement tangibles are established and utilized			
Class schedule is reviewed daily			
Schedule reflects any upcoming changes			
Individual schedules are developed			
Schedule is well-rounded with a variety of activities			
Staff schedule is written and posted			
Staff schedule depicts all job responsibilities			
Related service personnel are included on schedule			
Schedule includes a weekly staff meeting			
All staff have a written job description			
Staff bulletin board is visible			



Positive Behavior Support

I. WHAT IS POSITIVE BEHAVIOR SUPPORT?

Positive Behavior Support (PBS) is an approach to helping people improve their difficult behavior that is based on four things:

1. An **Understanding** that people (even caregivers) do not control others, but seek to support others in their own behavior change process;
2. A **Belief** that there is a reason behind most difficult behavior, that people with difficult behavior should be treated with compassion and respect, and that they are entitled to lives of quality as well as effective services;
3. The **Application** of a large and growing body of knowledge about how to better understand people and make humane changes in their lives that can reduce the occurrence of difficult behavior; and
4. A **Conviction** to continually move away from coercion - the use of unpleasant events to manage behavior.

Coercion involves attempting to control the behavior of others through threat of, or escape from unpleasant events. Coercion minimizes the dignity of the other person, often provokes retaliation, and sometimes causes physical and emotional harm. One example of coercion involves overpowering someone and physically forcing him to do something he doesn't want to do. If he doesn't comply, he is forced and continues to be forced until he gives up fighting. A common and relatively minor example includes taking privileges away from a person when she misbehaves. However, even minor coercion can be harmful in that it can take away from the dignity, autonomy, and sense of self-control of the other person. Equally important is that when minor coercion that was once effective ceases to work, caregivers tend to increase the level of coercion rather than decrease it. They may increase the length of time required to spend in time-out, the amount of privileges taken away, or the tone of voice used.

PBS involves a commitment to continually search for new ways to minimize coercion. This does not mean parents or caregivers should be judged harshly if they occasionally resort to yelling. We all fall back on patterns of caregiving that have worked for us in the past, especially when we are challenged by difficult behavior. PBS simply means that we, as caregivers, recognize the times when we have resorted to coercion, and continually seek to find alternatives that we can use next time we're challenged with similar behavior.

II. WHY DO WE NEED POSITIVE BEHAVIOR SUPPORT?

Many people with difficult behavior have been misunderstood and mistreated throughout our history. People with developmental disabilities, in particular, have been subject to a wide array of disrespectful, humiliating and even painful,



conditions in the name of "effective treatment". In recent years, however, there has been a growing body of research that demonstrates that even the most challenging behaviors can improve with the help of one or more of the approaches outlined below. The combination of these is the field called Positive Behavior Support. This document is an attempt to summarize current knowledge in the field so that more families/caregivers and providers can know that there are alternatives to punishment, and what those alternatives are.

III. WHAT'S INCLUDED IN POSITIVE BEHAVIOR SUPPORT?

A. Functional Behavioral Assessment (Understanding Behavior)

Functional behavioral assessment (FBA) is the process of learning about people before intervening in their lives. It is a systematic process for describing difficult behavior, identifying environmental factors and setting events that predict the behavior, and guiding the development of effective and efficient behavior support plans. FBA is the foundation of positive behavioral support. Three important beliefs underlying FBA are:

1. All behavior that persists serves some purpose,
2. Every person is unique, and
3. The best way to help someone change their behavior is to first understand the reasons behind the behavior.

One of the misapplications of behavior analysis has been the wide-spread use of behavior management, or behavior modification, procedures that prescribe consequences for difficult behavior without first assessing the reasons for the behavior. The need for FBA can be seen when two different people display the same behavior for two different reasons. One person may run away from a caregiver when asked to perform a certain task because he has learned to avoid the work by running away. Yet another person may show the very same behavior because she has learned that she can get individual attention from the caregiver (e.g., being chased and brought back) when she runs away. The intervention methods chosen for these two individuals should be different based on their unique assessments, rather than the same based on the similar appearance of their behavior. Unfortunately, without a functional behavioral assessment people with similar behaviors tend to be treated with similar consequences. Many things go into a comprehensive FBA. These include:

Clear Description of the Behavior

What does the challenging behavior look like? What does it sound like? Does it occur in conjunction with other behaviors or in isolation? Is there any warning? How long does it last? How long has it been a problem? Similarly, what would an alternative desirable behavior look/sound like?

Typical Routines

When is the challenging behavior more likely to occur? When is it less likely? What are the activities or expectations, and with whom does it



occur? It is also helpful to ask these who, what, when and where questions of the alternative desirable behavior.

Rationale

A rationale is needed for why the behavior is deemed difficult and why it requires change. Sometimes minor infractions are viewed as major problems by one caregiver but insignificant by others. Is the behavior harmful to self or others, or is it merely distracting? Sometimes the questions must be asked, "Whose problem is it?"

Strengths/Needs

What skills does the person have that could become a source of success and esteem? These are often the very behaviors that are viewed as difficult. For example, a student with boundless energy may not be able to sit still in class, but could become a tremendous help to the crew that cleans the cafeteria tables. What limitations does the person have that prevent her from accomplishing the simple things, and achieving the recognition that other girls take for granted?

Likes/Dislikes

What kinds of events, books, movies, foods, music, etc., does the person enjoy? What does he hate? Some behavior challenges are nothing more than a statement of preference or refusal for people who cannot speak or be heard otherwise. Understanding what a person enjoys can help to break up the day and serve as a means to connect with others.

Values/Culture

Who are the heroes in this person's life? Does he value the qualities found in TV action characters, in his father or uncle, in her grandmother, or the popular girls at school, and what are those qualities? How do the values and routines of the immediate family, extended family, neighborhood or village, impact the individual's behavior? Does she find greater importance in caring for a baby or sick grandmother than in attending school or getting to work on time? Is he a part of a group where loyalty to a family or gang member is demonstrated by getting even? Does the school culture encourage using words to tell the teacher, or not tattling and using fists?

Biomedical/Physical Factors

Ear infections, stomach aches, headaches, over-sensitivity to certain sounds, hunger, fatigue, over-stimulation, boredom or the way things feel to the touch, can all vary among individuals. Yet these factors can be a significant reason for many behaviors like head banging, chronic whining, striking out at others, or running out of a room. The person's diet and medications are also important considerations, as are things like depression, attention deficits, seizure disorders, and many more. Understanding specific disabilities and their impact on behavior is a necessary requirement of any FBA.



Environmental Factors

Do the challenging behaviors occur more in some settings than in others? Do they occur less in some settings? Differences in noise level, the density of the crowd, the expectations of the setting (e.g., a classroom versus a playground), can all make a difference. Is the person's schedule too unpredictable? Is it too predictable? Does she do better in warm weather or cold, bright sunlight or indoors? Do shirts with collars or certain fabrics irritate the skin and increase challenging behavior? Both the physical and social environments should be considered here.

Motivation

What does the person gain through her behavior? Does she get attention, assistance, food or objects that she wants? What does he escape or avoid through his behavior? Does he get out of doing chores by complaining? Does he avoid a scolding or grounding by lying? Also, what is the motivation for behaving? Does working hard pay off? Does telling the truth? Does dressing himself result in any greater reinforcement than remaining dependant on others to dress him? Does "good" behavior go unnoticed while "bad" behavior gets an immediate reaction? This is one of the most significant factors to consider in any FBA and should include a description of the setting events, antecedents and consequences of the behavior.

Intervention History

A good assessment also seeks to learn from the past. What has worked and what hasn't worked are important questions to answer, as are who has helped and who has not. Also, many people with challenging behaviors have been treated harshly for years, or have experienced severe trauma at some point in their lives.

Learning History

What has the person been learning through her history of displaying difficult behavior? Has she learned, for example, that "good" behavior goes unnoticed while "bad" behavior gets an immediate reaction? Has he learned that the longer he persists at complaining, fighting or tantruming, the more likely he is to get his way?

Learning Style

How does the person learn best? Can she follow simple or complex instructions? Can he translate what he hears into action, or has he learned to tune out verbal instructions. Does she learn best by seeing, feeling, doing, or by teaching others?

Relationships

Many people with developmental disabilities and difficult behavior have few meaningful relationships that are lateral rather than hierarchical, that are equitable rather than inequitable, and that involve people in their lives who are not reimbursed in some way for their time. To what type of person



is the individual attracted? What type of people does she avoid?
Meaningful peer relationships are critical for social development and quality of life.

B. Preventing Challenging Behavior by Enhancing Quality of Life

Many behaviors we view as challenging are nothing more than a logical reaction to an illogical life. People with challenging behavior often have minimal control over where they live, with whom they live, what they do for a living, what they have for dinner, and so on. Simply helping people who depend on others for support to dream of and live the kind of lives that most people take for granted, can reduce challenging behavior tremendously. All prevention approaches listed below should occur in the context of the person's real-life settings. That is, these approaches include things that can be done by or for the individual in the classroom, in the home, in the car, on the street, in the park, supermarket, and other real-world settings, rather than in the clinic. If skills are to be taught in a clinic setting, then specific strategies should be included that will ensure generalization to the natural settings.

Person-Centered or Family-Centered Planning

Full participation in dreaming of a desired future and charting the course needed to get there, with the encouragement and support of people closest to us, is something many of us do on a continual basis. Similar options must exist for people who challenge the service system. Focusing on the strengths of people or their families, and on other people around them who might help, is a necessary step to improving behavior.

Exposure to Options

True choice does not exist unless it is informed choice. However, simply telling people of the variety of living arrangements, jobs, entertainment options, and other life choices available to them is usually not sufficient. Many people must repeatedly see, touch and feel a wide variety of experiences in order to truly have informed choice.

Exposure to Appropriate Role Models

We are all influenced by the people with whom we live, work, eat, play, etc. Fortunately, most of us are able to learn by watching and listening to others, rather than having to experience everything for ourselves. Helping people improve their behavior is as much about inspiring them as it is about instructing and rewarding them. If the peers and caregivers in a person's life are not good examples, then it only makes sense for the individual to set his sights low. If, on the other hand, the person is included with others at school, at work, and in the community who are good role models, she will set her sights higher.

Exercising Choices

Many people with challenging behavior do not have much experience making choices about minor daily events (much less about significant life goals), and having those choices respected. Challenging behavior often arises from a lack of choice about what to wear, what to eat, what to



watch, or where to go for fun. Repeated practice in exercising choices builds a sense of competence and prevents many challenging behaviors.

Assistive Technology and Supports

Challenging behavior often results from heavy dependence on others for such things as personal hygiene, transportation, information, communication, and entertainment. Assistive technology and other accommodations can result in far less dependence on others, fewer reminders, and fewer behavioral challenges. Assistive technology can include a communication device for those who cannot otherwise get their needs met, or listening to a book on tape for those who have trouble reading, or a watch with several alarms for those who have trouble remembering.

A Sense of Belonging

Are there certain people, or groups of people, with whom the individual feels most at home? What feedback from others best communicates a clear message that she is appreciated for who she is? Does he feel any sense of belonging to the classroom, the school, and the residential or neighborhood community? Or does he feel most accepted by a local gang? Who accepts him unconditionally, and who requires him to earn his place?

Altering the Environment

Some people benefit by organizing different settings in such a way that each environment is associated with different expectations and activities (e.g., eating, group activities, private space, free time, etc.). For others, simply minimizing distraction, playing calm music or eliminating background noises, can make a meaningful difference in challenging behavior. Environmental modifications help most when the antecedent events that provoke challenging behavior are avoided, as well as the consequences that reinforce the behavior.

Addressing Biomedical or Physical Factors

Sensory integration such as deep pressure, joint compression, brushing or swinging, can help many people become more receptive, ready to learn, and less distractible. Medications to reduce seizure activity, impulsiveness, infections, depression or hyperactivity, are also necessary for some people. Adequate sleep, proper nutrition, physical exercise, and pain management are other important factors to consider.

C. Teaching/Encouraging Desirable Behavior

Establishing Helpful Routines

We are all creatures of habit. Some people rely more heavily on routines than others. Some become extremely frustrated when their routines change. Helping people establish predictable routines around personal care, eating, dressing, working, and transitions are all important elements of PBS. Printed or picture schedules are some ways to let a person know what's coming next.

Building a New History of Success



Many people with challenging behavior have experienced failure throughout their lives. Helping people recognize and celebrate their successes, no matter how small, can help them become more open to trying and more positive about themselves. Attempting to build a history of success by filling a person's day with more rewards for the many accomplishments that often go unnoticed, rather than corrections for all the challenging behavior, is extremely important.

Setting Realistic Expectations

Many behavior problems arise from expectations that cannot be met. For example, it is unrealistic to expect someone with difficulty understanding and sequencing auditory information to follow verbal instructions involving multiple steps. It is also unrealistic to expect someone who cannot sit still for more than five minutes to behave during a one-hour assembly. Setting realistic expectations also includes not setting expectations too low that people are not challenged, and raising expectations when new skills are learned.

Clarifying Expectations

Often, it is not that the expectations are too difficult or too hard, but that they are not understood. Using pictures to represent the steps in a person's schedule can be extremely helpful for some people. Objects are needed for others when the pictures don't have any meaning. Still others may fully understand written and spoken language, but may need to be taught such things as making eye contact when spoken to. Some people do not know that others prefer it when you look at them. Many people get into trouble simply because they "don't know any better."

Teaching and Reinforcing Effective Alternative Behavior

Any behavior that persists over time serves some purpose. It is unrealistic to expect people to stop doing something that works for them without giving them something to do in exchange. If an individual hurts herself to escape from the noise and the crowd of the dinner table, then she should be taught another, equally effective way she can ask to be excused from the table. This could be signing, pointing to a symbol taped to the table, or pressing a button on a communication device. Furthermore, whenever she attempts the new behavior, her communication should be honored and she should be allowed to escape.

Teaching Behaviors that are Naturally Reinforced

Our goal is not to create dependence on caregivers, but to teach skills that are valued and rewarded by others. If a person misbehaves in order to get attention from the teacher, then teaching her to say, "Teacher, how am I doing?" may be naturally rewarded by the teacher's response. One of the most powerful, yet seldom-taught class of behaviors is the skill of rewarding others by smiling, hugging, saying thank-you, or complementing them. For many people, these behaviors need to be taught directly.

Fading the Supports Needed for Desirable Behavior

Too often we assume that once new behaviors are taught, people will automatically use those behaviors on their own. Unfortunately, this is seldom the case. Fading first the prompts and then the rewards is a necessary step to any lasting behavior change, and is a skill that



caregivers must develop. If the only time a person who is teased by others uses words instead of fists is when a caregiver is present to remind him, then our work is not finished.

D. *Intervening when Challenging Behavior Occurs*

All intervention approaches listed below should occur in the context of the person's real-life settings. That is, these approaches include things that can be done by or for the individual in the classroom, in the home, in the car, on the street, in the park, supermarket, and other real-world settings rather than in the clinic. If skills are to be taught in a clinic setting, then specific strategies should be included that will ensure generalization to the natural settings.

Preparing Oneself for Challenging Behavior

Knowing those behaviors and situations that challenge us the most is a necessary step for supporting people who hurt us, embarrass us, scare us, or offend us. We can avoid negative and emotional reactions best when we purposefully and consciously plan how we wish to handle a given situation. We can act more compassionately when we remember the message behind the behavior. It is when we are caught off guard that we make the most mistakes.

Minimizing the Power of Challenging Behavior

We often do not know why a given behavior persists. It may be reinforced by attention of caregivers or of peers. It may be reinforced by escape from demands, or by getting one's way in a power struggle. It may be a combination of all of those things. For this reason, it is best to minimize the power or the impact of the challenging behavior when it occurs. Not acknowledging the behavior, not allowing it to interrupt the group or change your focus, not providing a reaction, or giving in to the demands of the individual are all ways to minimize the power of the challenging behavior and diffuse a dangerous situation.

Interrupting Challenging Behavior (if necessary)

The purpose of interruption is to help the individual stop the challenging behavior or to minimize the harm caused by the challenging behavior. Examples include removing someone from the room to stop the disruption her behavior is causing others, or blocking blows to the head to minimize injury to self. Not all behaviors require interruption. Many can be ignored or redirected, or are brief isolated events that occur once and are done. When interruption is necessary, it should be done gently, safely, and calmly.

Redirecting to Effective Alternative Behavior

At the same time we strive to minimize the power of the challenging behavior, we must often remind people of what they could be doing instead to get their needs met. Redirection can take the form of verbal reminders, pointing to one's schedule, handing the person his coat, and much more. The purpose of redirection is NOT just to stop the challenging behavior, but to remind people that doing something else will get their needs met.



Reinforcing Effective Alternative Behavior

No ignoring, redirecting, or interrupting approach will be successful if it is not accompanied by the reinforcement of effective alternative behavior. The child who is redirected to raise his hand rather than shouting out in class had better be called on when he does raise his hand. If telling the truth is preferable to lying, caregivers must find a way to reinforce truth-telling, even if the behavior admitted to was horrible. If using words or pictures to communicate is preferable to screaming and tantruming, then the reinforcement for communicating with words or pictures should be more powerful than the reinforcement they get for screaming and tantruming.

Using Consequences (if necessary)

There are times when all of the above approaches are still not enough to prevent or teach the person that the challenging behavior is no longer necessary or effective. When that happens, we need to increase our understanding of the function of the behavior and keep trying new ways to prevent and/or redirect. At those times, we should get an another perspective from someone who is objective and skilled in PBS. As we continue to seek new and effective positive approaches, it may be necessary to impose some consequences for the challenging behavior. While consequences that a person finds undesirable are a form of coercion that many of us try to avoid, there are times when caregivers need to do something to manage the behavior while other positive solutions are being sought. In those situations, it is best to use consequences that are planned in advance, rather than imposed as a surprise or as retaliation. Preferably, the person would be involved in discussing and deciding on the consequences before hand. Consequences for challenging behavior should also be relevant to the behavior, such as cleaning up a mess after having made a mess. Consequences should be respectful in that they don't shame or humiliate the person, and they should be reasonable (e.g., giving someone else one's video privileges for the rest of the day rather than the rest of the month). Lastly, they should provide opportunities for the person to practice the desirable behavior more often, not less often. If someone bullies others, then a consequence might be supervised practice helping others (e.g., turn-taking, holding the door open, complementing, carrying books, etc). The advantage of this is that the person has more opportunities to experience the rewards that go along with kindness, rather than fewer opportunities.

E. Managing Crisis Situations (if necessary)

All crisis management approaches listed below should occur in the context of the person's real-life settings. That is, these approaches include things that can be done by or for the individual in the classroom, in the home, in the car, on the street, in the park, supermarket, and other real-world setting rather than in the clinic. If skills are to be taught in a clinic setting, then specific strategies should be included that will ensure generalization to the natural settings.



Stopping Harm to Self or Others

When challenging behavior becomes violent or self-injurious, what options does the caregiver have to help the individual, while also protecting the rights of others? Should the person be removed and if so, how? Where should she go and for how long? Should she be alone or supervised? Should we talk to her or not? What are the expectations of the person while she is removed? What are the expectations of the caregivers? Whatever the actions of the caregivers, they should be calm, unemotional, and not use excessive force.

Seeking Help from Others

When should we seek help from others? Should it be when the individual's behavior has become dangerous or when the caregiver's reactions have deteriorated and are no longer therapeutic? How do we communicate that need for assistance? What are the roles that others should play? Should the principal be the stern disciplinarian or the kindly big brother? How about the police, probation officer, judge, grandmother, etc.? What are the best methods to ensure that others involved understand the individual and the goals of the behavior support plan?

Dealing with Others' Expectations

Often, caregiver reactions to crisis situations are influenced more by the expectations of the people in the supermarket or the other students in the classroom than they are by what is the most effective way to deal with the behavior. Outside observers are quick to make judgments such as "spoiled child," or "that's not fair," and those judgments do affect how we respond to challenging situations. Caregivers need tools to deal with the expectations of others, whether real or perceived, if they are to be effective in helping the individual gain control of his behavior.

F. *Evaluating Behavior Support Efforts*

Any PBS plan should be a living document serving as a tool for families/caregivers and subject to changes when needed. As with the development of the original PBS plan, any changes to the plan should be based on information reflecting the success or lack of success of the plan, or changes in the individual's behavior or life circumstances. Monitoring, evaluating, and revising PBS plans should include the following:

Objective, Observable, Measurable Data

Has the number of times that the person runs away decreased or increased? Has the duration of the tantrums decreased or increased? Has the rate of using the communication device increased? Has the rate of hurting others to communicate decreased? Any decisions about whether the plan is working or not should include objective and measurable data.

Monitored Continually

Data on both challenging behavior and the desirable alternatives should be monitored on a regular basis (e.g., collected every day, graphed, or summarized each week). Baseline data (before the PBS plan began) should be collected over time and compared to Intervention data (after the



PBS plan began), also collected over time. Any decisions about whether the plan is working or not should be based on consistent data gathered over time, rather than on single and subjective observations or impressions

Revised when Data Indicate and when Team Decides

Frequent changes to PBS plans are not recommended. Often, it takes several days or weeks to determine if the elements of the plan are working. Decisions to change any components of a PBS plan should be based on what the data indicate, and should be made in collaboration with the other team members rather than by individual caregivers. If it is not clear whether the behavior is improving, it may be best to continue the plan without change until the effects of the plan become clear. If it is obvious that the behavior has become worse, changes should be considered sooner. One important piece of any decision to change or revise a PBS plan is whether or not the plan has been implemented as intended. Are rewards sincere, are caregivers truly calm and unemotional when challenged? Has the plan been implemented in the spirit in which it was developed?

G. Supporting Caregivers

All caregivers, whether parents, teachers or direct support personnel, play some role in encouraging or discouraging difficult behavior among the people in their care. Caregivers expected to implement behavior support plans should be involved in the assessment process, in developing and in evaluating those plans, although they are frequently excluded. Even in the best of situations, however, caregivers need ongoing support in order to remember what they should do and why, to be relieved during difficult times, and to be encouraged for weathering through those times.

Involving Caregivers in Plan Development

Often the people responsible for day-to-day implementation of behavior support plans are not involved in the assessment or plan development, and have not had the opportunity to have their opinions considered or their questions answered. Unless provisions are made to help the caregivers understand why they're asked to ignore some behaviors and respond to others, they will most certainly make mistakes.

Understanding Caregiver Values/Culture/Beliefs

Sometimes caregivers are expected to compromise their own values when supporting someone with challenging behavior. A simple, but common example of this is asking someone who has strong objections to cursing to "just ignore it." While it may seem like an easy thing to do for some caregivers, it creates a great deal of stress for others.

Providing Training and Technical Assistance

It is not enough to tell caregivers what to do, or to give them a behavior support plan to read. They need to be able to ask questions, watch someone demonstrate, receive frequent reminders and frequent feedback on how they're doing.



Providing Effective Role Models

Helping someone improve her behavior can be a slow process, with subtle and often unrecognizable changes in the person's behavior. It is healthy for caregivers to focus on the quality of the care they provide as their source of satisfaction, rather than focusing only on the desired changes in the other person's behavior. After all, the only thing that caregivers have control over is how they live up to their own expectations. Unfortunately, many caregivers don't have high expectations of themselves. They have never seen someone deal with violent behavior gently and effectively. They don't know that there are alternatives to retaliation or restraining people. By providing effective role models, caregivers are sometimes inspired to be better, and to set their expectations higher.

Providing Frequent and Relevant Feedback

Knowing that the person supported is doing better is a reward that often keeps caregivers hanging in there. Sometimes that improvement is very small and goes unnoticed. Sharing charts and graphs with the caregiver that documents improvement can be an effective reward for her efforts. Many times, however, the behavior change comes too late, and the caregiver finds herself frustrated and burned out before any real progress is noted. Feedback should also focus on how the caregiver behaves. Do his rewards outnumber corrections? Are his instructions more effective? Has he been more patient, even though the person's behavior has not yet improved?

Ensuring Caregivers have Ongoing Emotional Support

All caregivers need the opportunity to share frustration when the stress becomes too great, to grieve when they have failed to live up to their own expectations, and to celebrate when they have been successful. This support may come in the form of parent groups, relationships with fellow teachers or direct support personnel, email discussions, exercising, reading books, membership in religious communities, and much more. Whatever form it comes in, all caregivers need some way to obtain emotional support in order to prevent them from burning out.

Responding to Caregiver Requests in a Timely Fashion

Caregivers need to know there is help available to them when they need it. It may be the school counselor or psychologist. It may be the service coordinator or respite provider. Whoever they trust to help them with challenging behavior, that help needs to be available soon after the request. It is when requests are not honored that caregivers stop asking.

Providing Opportunities for Professional/Personal Growth

Caregivers need the chance to grow as individuals, separate from the people they support. This growth may include the chance to reflect on and refine one's professional leadership skills or one's spiritual beliefs. It may be attending a conference or reading a good book. Regardless of the form, caregivers must have an avenue to learn and grow in ways that best meet their needs.

Northern Arizona University, Institute for Human Development

www.nau.edu/ihd/positive/ovrvw.shtml



Reinforcement Strategies

By: Lori Ernsperger, PhD

■ Since all people are motivated by positive reinforcement, using rewards or reinforcement strategies is a key element for teaching students with autism. Most typically developing students are reinforced through task completion and teacher praise, but students with autism are not typically reinforced through these internal methods. They require external motivation to maximize their learning and increase adaptive behaviors. Therefore school personnel must identify appropriate reinforcers and use them effectively throughout the school day. Remember, high quality reinforcement increases and maintains desired adaptive behaviors across settings.

Types of Reinforcers

Edibles
Tangibles
Social Praise
Activities

Caution: Edibles should seldom be used, and then only while other reinforcers are developed.

Guidelines for Selecting Reinforcers

Selecting reinforcers for students with autism is a continuous process which changes throughout the school year. Not all students are motivated by the same items. Selecting appropriate high-quality reinforcement involves:

- observing the student in the classroom
- completing a reinforcement survey
- interviewing the student or other adults

The reinforcement interests of some students may be readily apparent. Reinforcing other students require investigation. Some students may have little experience playing with certain toys and games and therefore must be taught to enjoy specific items or activities. There are a few basic tenets for using reinforcement:

- Reinforcers are contingent upon the student's behavior. The student is *only* reinforced after meeting the criteria for the task or exhibiting the desired behavior.
- Use a variety of reinforcers to avoid satiation. Each student should have a variety of reinforcers that are rotated frequently. If the same reinforcement is used every day, it will lose its potential as a change agent.
- Use age-appropriate reinforcers based on the chronological age, NOT on the developmental age. This makes finding reinforcers more



challenging for secondary students, but the goal is to help the student be functional and independent and viewed in a positive manner by peers.

- Don't allow free access to strong reinforcers.
- Select reinforcers which can be readily removed from the student's environment and easily manipulated by the staff.
- Pair high-quality reinforcers with praise to further develop more natural reinforcement. The goal of reinforcement is to eventually fade concrete rewards to natural rewards (e.g. a sense of pride, payment for a job well done, etc.) and social interaction with an adult or peer.

Key Concept: Avoid Bribery

Reinforcement depends on the student's completion of a task or of his exhibiting a desired behavior. Therefore reinforcement is NEVER to be used as bribery. For example, reinforcement would not be provided to a student in the middle of a tantrum. Nor would a student receive a high-quality reinforcer to entice him into working. Bribery teaches the student that he does not have to comply in order to achieve the desired outcome.

Reinforcement Schedules

Reinforcement is provided to the student after the student has met the predetermined criteria for a task or has exhibited a targeted or desirable behavior. The rate of reinforcement will be determined based on the task and the individual skills of the student. A reinforcement schedule will assist the staff in determining the appropriate timing for reinforcement. There are several options for reinforcement:

- Continuous and immediate
- Intermittent
- Delayed
- Provided within the natural setting

When first teaching a new skill or desired behavior, reinforcement should be immediate and continuous. This immediate and continuous reinforcement will develop repetition of the desired behavior. As the student progresses with a newly acquired skill or behavior, the reinforcement schedule will be thinned and become more intermittent. An intermittent schedule is like a slot machine: The student may receive the pay-off at different intervals, but the student does not know when those pay-offs will occur. Delayed reinforcement is used in a token economy system (see below) where the tokens are earned and can be exchanged for the reinforcement at a later time. Delayed reinforcement should be systematically scheduled to increase the desired behavior. Inconsistencies with delayed reinforcement increase student frustration and trigger problem behaviors. Again, the goal of reinforcement is to help the student become naturally self-motivated.



Back to School Idea: Reinforcement Hierarchy

Include a written list of the top ten student reinforcement items as part of the student profile. Simply brainstorm all of the reinforcement items from your observation and assessment. List them in order from most powerful to least powerful for increasing or maintaining the desired behaviors. Review the list once or twice a month to make additions and deletions.

Reinforcement Hierarchy

Student Name: _____ Date: _____

List of reinforcement from most preferred to least preferred:

Projects: Art, puzzles
Praise
Edibles
Games: Chase
Chores in Class
Favored People

Media: Video
Sports/playground
Special Rules: Line-up 1st
Small Toys
Computer

A-List

1. _____
2. _____
3. _____
4. _____

B-List

1. _____
2. _____
3. _____
4. _____

C-List

1. _____
2. _____
3. _____
4. _____

Token Economies

Token economies are one of the most-used behavior management techniques for reinforcement. A token economy uses stickers, coins, points and the like to reward a student who demonstrates the desired replacement behavior. The



token is used as visual evidence to the student that he or she has achieved a desired behavior.

Token economies are flexible and easy to implement across settings.

1. Identify an appropriate sturdy token board.
 2. Identify appropriate tokens such as coins, stars, chips, or stickers. An appropriate token can be very rewarding in itself. Place Velcro on the back of each token.
 3. Determine the reinforcement to be exchanged for the tokens. Begin the token economy process with the student earning as few tokens as possible.
 4. Be consistent in exchanging the tokens for the reinforcement.
 5. Gradually increase the number of tokens needed for exchange.
- Token economies provide an easy to use system for reinforcing desired behaviors while teaching an alternative behavior which meets the desired function for the student.



Back to School Idea: Token Economy Puzzles

Another way to create a token economy is to create a picture of the high-quality reinforcer that motivates the student. For example, if a student enjoys working on the computer, take a picture of the computer, laminate the picture, and cut it into several pieces. The number of pieces into which the picture is cut is based on how long the student is able to maintain the desired behavior.

After the picture has been divided, put small pieces of Velcro on the back of each piece and secure it to a piece of cardboard. At this time the student is taught that he must earn the pieces of the puzzle in order to receive reinforcement. The completed picture of the computer is a visual cue to the student of his success and reward.

Differential Reinforcement

Differential reinforcement of adaptive behaviors is an active behavior management strategy that focuses on catching the student being good. High-



quality reinforcement is provided to the student for avoidance of the problem behavior.

The staff is trained to reinforce the student when the target behavior is not being displayed. All staff must continuously observe the classroom and ask themselves: "What behaviors can I immediately reinforce for this student?" Although differential reinforcement does not involve teaching a replacement skill, it does focus on a positive approach to problem behaviors.


Back to School Idea: Reinforcement Challenge

Providing reinforcement may not be a natural act for all staff members in the classroom. It may be helpful to create a classroom staff challenge to increase the amount of reinforcement provided by each team member. Keep a running tally of every reinforcement a staff person provides to a student. A simple piece of masking tape placed on some clothing can be used as the tally sheet. Have each staff member keep track of the amount of reinforcement they provide in one day. Award a special prize to the winner and challenge them all to improve the following day.



Easy to Use Data Collection for School Personnel

By: Lori Ernsperger, PhD

 Data collection is a key element in teaching students with autism. It provides school district personnel and parents with vital information on the gains made by the student. Reliable data collection must be periodically obtained throughout settings for students with autism. Most notably, data collection is a vital component of a legally defensible autism program. Unfortunately, solid data collection methods have been replaced with teacher observations and anecdotal notes. If programs and school personnel are to be accountable, data collection methods must be systematically addressed.

Data collection is an on-going process that provides a permanent record of student learning and the acquisition of new skills. Although data collection must be completed regularly for every student, it does not have to be cumbersome. The IEP team determines the appropriate data collection methods for meeting goals and objectives for each student.

Guidelines for Data Collection:

- Data collection must include specific mastery criteria and measurable outcomes.
- It must be individualized for each student.
- Data collection methods may be implemented at various times throughout the school day.
- All staff have responsibility for data collection.
- Data collection forms should be included as part of a student profile.
- Create a data collection area in the classroom for easy access.
- Analyze data regularly to determine program effectiveness and student outcomes.

Data Collection Forms

Data collection forms may vary from state to state. Contact your local school administrator for data collection forms that may be issued by the school district. If no specific district forms exist, the staff may create their own data collection forms. In general, data collection forms include the following information:

1. Student name
2. Date
3. Goals and objectives
4. List of target behaviors
5. Table or graph to collect information
6. Reinforcement list
7. Materials



8. Adequate space to report types of prompting
9. Comments

Key Concept: Data Collection: Keep It Short and Simple

Specific data collection methods do not have to be used after every lesson or activity. Data collection may occur at different intervals throughout the day or week. Be sure to vary the times and activities when data is being collected in order to cover all domain areas. Also, consider easy to use data collection tools, such as those offered by [Super Duper Products](#). Their Stopwatch/Counter is an easy and effective tool for frequency counts and duration data.

Behavioral Data Collection Forms

One type of data collection form may be a behavior log for recording the frequency and duration of problem behaviors such as calling out in class, out of seat, or crying in class. A behavior log would include:

1. Student name
2. Date
3. Target behavior
4. Antecedents (things that happened or situation prior to the behavior)
5. Consequences (what happened after the behavior occurred)

School personnel should measure and record the duration and frequency of problem behaviors. The following data collection forms provide the multidisciplinary team with specific information regarding effectiveness of a behavioral intervention program:

Behavioral Data Collection
Duration

Student Name: _____ DOB: _____

Target behavior: _____

Observer: _____

Date	Time	Setting/Antecedent	Duration	Comments
------	------	--------------------	----------	----------



--	--	--	--	--

Steps for Completing the Duration Form:

1. Fill in Student Name and Date of Birth
2. Clearly define the target behavior
3. Fill in the name of the Observer
4. Identify antecedents or triggers to the target behavior
5. Measure and record the elapsed time per episode of the target behavior

Behavioral Data Collection
Frequency/Rate of Behavior

Student Name: _____

DOB: _____

Target behavior: _____

Observer: _____

Date	Time	Setting/Antecedent	Frequency/Rate	Comments
------	------	--------------------	----------------	----------



--	--	--	--	--

Steps to Completing the Frequency Form:

1. Fill in Student Name and Date of Birth
2. Clearly define the target behavior
3. Fill in the name of the Observer
4. Identify antecedents or triggers to the target behavior
5. Begin by recording the frequency of the target behavior. Frequency counts can be taken utilizing a tally mark on a clipboard or a piece of masking tape attached to the student's desk or by using a hand counter that can be purchased.

Behavioral data collection methods should be implemented throughout the behavior change process. Baseline data should take place prior to any proactive and reactive programs occur, in order to determine the effectiveness of the behavior intervention plan. On-going data collection results in accountability for the multidisciplinary team and a positive outcome for the student.


Back to School Ideas: Data Collection Schedule

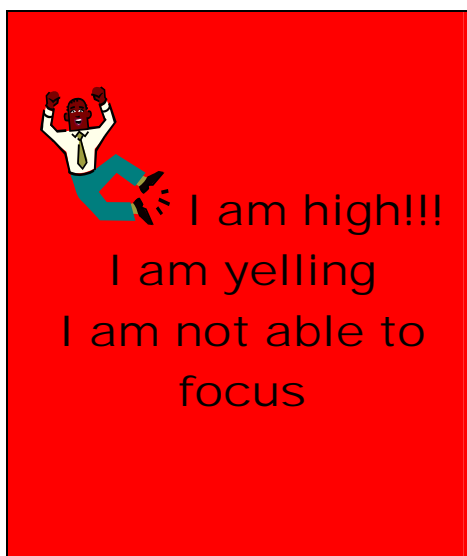
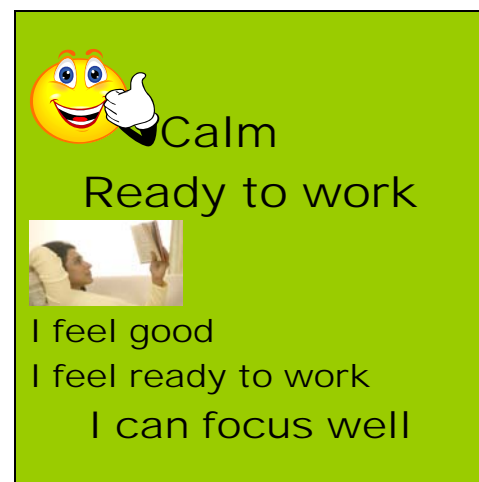
Determine a rotating schedule for data collection. Identify specific days and times for collecting data for each student and for each domain area. For example, Monday, Wednesday, and Friday might be data collection days for self-help, social, and fine and gross motor skills, while Tuesday and Thursday will be data collection for sensory, cognitive/academics and play. Be sure to rotate the domains each week to ensure quality data collection.



Examples of Sensory/Emotions Visual Supports

By: Sonia Dickson-Bracks

 Color-coded for mood (cold vs. hot), visual symbols such as this strip of three blocks can be used to develop awareness of arousal levels, to prompt for self-identification of arousal level, or to serve as a visual prompt of strategies appropriate to the student to help return to 'ready to work' state. Personalize for the student, cut, laminate and keep visible to the student at all times, initially teaching him to identify his current 'state,' then teaching related intervention strategies, and ultimately fading to where he identifies his state and seeks out the appropriate strategy for self regulation.



WHAT DO I NEED TO DO?



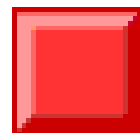
To get ready to work I can:

eat crunchy foods
walk outside
jump
eat lemon sours
drink lemonade
chew gum



I AM CALM

I feel great
I can focus
I can work
YES!



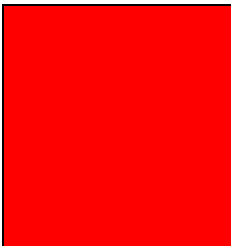
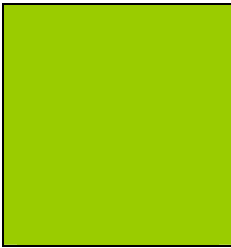
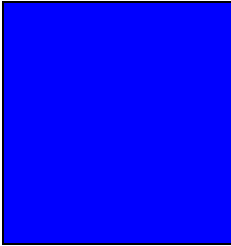
To get to calm I can:

breathe 1..2...3...4...5
do arm pushes
ask for squeeze
joint compressions



How do I feel?
My Sensory System

1. I am feeling:



What do I need to do?

I need to: _____ -



Feelings and emotions: SAD



*When I feel sad
I sometimes cry
I may sit and feel very tired and want to cry
Maybe I need help and need to talk to someone*

*When I feel sad,
It may help to:*

cry

talk to someone

ask for help

spend time alone



Feelings and emotions: Frustrated



When I am frustrated I may yell

*I may feel like shouting and yelling
and running away*

I may also feel sad, maybe like I want to cry

*I can tell my teacher or friend 'I am frustrated'
I need to figure out how to calm down
I can ask for help*



Feelings and emotions: EXCITED!



*Feeling excited is a great feeling.
It means I am happy and I am smiling and waiting for
something good to happen, or someone I like to see!!!!*

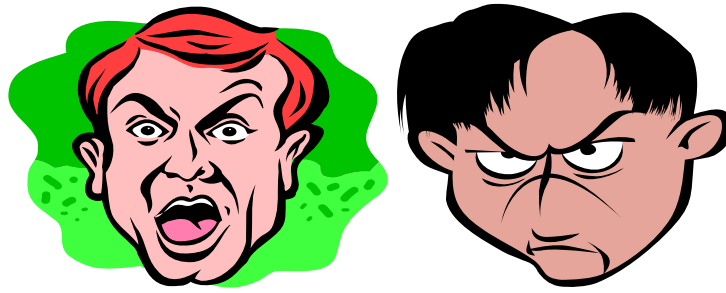
*Sometimes when I am excited, I can feel high and act a little
wild.*

I can be disruptive to others.

I might need to use strategies to return to a calm state.



Feelings and emotions: ANGRY!



*Feeling angry can really be difficult
When I feel angry I might use behavior to express how mad I
really am!*

When I am ANGRY I need to:

stop

calm down

get help!



Feelings and emotions: CONFUSED!!



When I am confused, I need help

I may need a schedule so I know what is happening next

*I may need more information,
Where am I going?*

What am I doing?




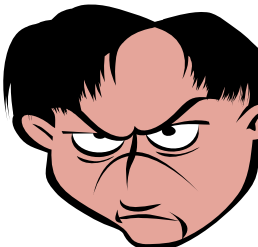

What is happening?

What else do I need to know?

I can tell someone 'I am confused'

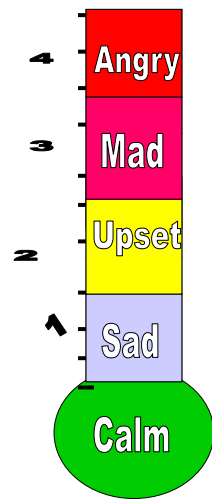


How do I feel?

<i>I am confused</i>	<i>I am frustrated</i>	<i>I am sad</i>
		
<i>I am angry</i>		<i>I am excited</i>
		



Emotions Level



Invisible Aide Game

By: Sonia-Dickson-Bracks

OVERVIEW

PURPOSE: To assess specific areas/issues related to independence, organization, social confidence, and self advocacy; to initiate fading of one-to-one aide support

GUIDELINES: Initially, game should be implemented during one class period per day, starting with the easiest period. A Class Period = the moment the student steps out of previous class until he leaves the target class. The student and staff will de-brief on the game (review and discuss what occurred) during their individual daily session. Based on this evaluation, they will determine whether to repeat the same period the following day, or target a different period. Once all periods have been assessed, plan and determine next steps for further assessment or program development and implementation.

PLANNING THE GAME

Together the student and staff determine which period would be the best to pretend the student is alone (not accompanied by the aide). This is based on comfort in the specific setting (classroom, teacher, students and subject). The student and staff should also develop specific gestural cues in order to provide a “time out” from the game. (See Exceptions to the Rules)

Once plan and period are determined, the staff will notify the teacher (in advance) of this plan. As an option toward promoting self-advocacy, the student and staff can decide if the student should notify the teacher.

RULES OF THE GAME

Once the game begins, both student and staff will make every effort to act/pretend as if the staff is not present. That is, the student will not seek assistance from the aide, nor will the aide offer assistance. The student may rely on natural supports (peers, teacher) as appropriate to the setting. Neither will engage in conversation with one another. The staff try to stay out of the student’s line of sight (i.e., stay behind the student while walking and when seated in the classroom). Exceptions to “the rules of the game” should only occur when the pre-determined cues are used.

EXCEPTIONS TO THE RULES (“Time out” prompts & gestural cues)

- ***“I need help”:*** The student feels he needs help and wants a “time out” from the game (e.g., he makes eye contact with the staff and touches his own nose).



- “*Are you okay? Do you need help?*”: The staff is observing signs of stress that are of relatively significant concern (e.g., he touches the student on the shoulder and when student turns around, he rubs his forehead);
- “*Are you sure you want help? Remember the game is on*”: The student has initiated conversation or indicated he wants help but did NOT use the pre-determined cue. This may be because he forgot the game was on or just out of habit. The staff in turn will provide a “reminder” cue that means “are you sure you want help? Remember the game is on” (e.g., he rubs his hands together). At that point, the student should make a conscious decision to either use the “I need help cue” or acknowledge (nodding) that he forgot or doesn’t need help. However, if he doesn’t use the cue but appears distressed, the staff should provide assistance.

DOCUMENTATION

Staff will document observations throughout the game. The completed form will be used during debriefing at the end of each day. (See *Invisible Aide - Observation Form*).



Invisible Aide – Observation Form

DATE: _____ TARGET PERIOD/SUBJECT: _____

RATIONALE (Period Selection): _____

(Comfort: Classroom, teacher, students and subject).

REVIEWED "TIME OUT" CUES: _____ TEACHER NOTIFIED BY: _____

OBSERVATION START TIME: _____ END TIME: _____

TRANSITION FROM LAST TO TARGET PERIOD:

OBSERVATIONS DURING TARGET PERIOD: (Record on separate sheet)

OVERALL INDEPENDENCE RATING (1 – 3): _____

ORGANIZATION RATING (1 – 3): _____ Was student organized during class activity?
Describe/Explain:

Did student record homework, other work to complete, etc., based on assignment from teacher? Record assignments here:

SELF-ADVOCACY RATING (1 – 3): _____ Did student seek assistance from teacher or peers when needed? Describe/Explain:

SOCIAL CONFIDENCE RATING (1 – 3): _____ Did student appear confident/comfortable during observation? Did student exhibit signs of discomfort? Describe/Explain:

GAME RULES: ADHERENCE/EXCEPTIONS **If exceptions required, record circumstances:

Student Initiated (Describe):

Staff Initiated (Describe):

Were cues utilized? YES / NO Reason (Explain):

Outcome (Describe):

If rules changes or altered, record reasons for change or exceptions:



DE-BRIEFING

STUDENT RATINGS (Refer to above questions to help student make assessment)

OVERALL INDEPENDENCE RATING (1 – 3): _____
STUDENT COMMENTS:

ORGANIZATION RATING (1 – 3): _____
STUDENT COMMENTS:

SELF-ADVOCACY RATING (1 – 3): _____
STUDENT COMMENTS:

SOCIAL CONFIDENCE RATING (1 – 3): _____
STUDENT COMMENTS:

RECORD COMPARISON & DISCUSSION OF DEBRIEFING:

OVERALL INDEPENDENCE RATING

ORGANIZATION RATING

SELF-ADVOCACY RATING

SOCIAL CONFIDENCE RATING

Learning Objectives to consider:

DETERMINE NEXT TARGET PERIOD:

RATIONALE:

ADDITIONAL COMMENTS:



Baseline Autism Quiz

By: Sonia Dickson-Bracks

Baseline Autism Quiz

Name _____

Date _____

1. **When a child receives a diagnosis of autism, he needs to meet diagnostic criteria in three areas. What are the three areas?**
 1. sensory, behavior and language
 2. communication/ language, social and behavior
 3. language, social and special diets
 4. language development, behaviors and sensory
2. **What are the current statistics for the prevalence of autism spectrum disorders in the USA?**
 1. 1:150
 2. 2:190
 3. 1:166
3. **When supporting a student with autism, what key areas will you need to address first in order to support learning, social skills and independence?**
 - communication, organization and sensory
 - behavior, learning and friendships
 - social, play, academics
4. **What is a Positive Behavior Support Plan?**
 - A plan that is put in place after a functional assessment is completed to address behaviors and teach replacement strategies for those behaviors
 - An intervention plan that is used to provide consequences for behaviors when they occur
 - A system that all staff need to follow and take data on
5. **Why do some individuals with autism exhibit behaviors?**
 - because they are willful and stubborn
 - because they often have challenges expressing their needs verbally so they use behavior to communicate
 - because they are angry
 - the students hate school and want to avoid all work
6. **Sensory dysfunction is:**
 - a process by which you motor plan a movement
 - challenges processing incoming sensory information that affects the your response to the environment
 - when a student is hypo sensitive to smell
7. **ABA stands for:**
 - Autism Behavior Analysis
 - Applied Behavioral Analysis
 - Autism and Behavior and Advice



8. When supporting a student in the classroom, what is the staff's primary role?

- helping the student to access the academics, socialize with peers and develop skills that will help him manage the group/ classroom setting
- doing everything for the student and make sure he has everything he needs
- speaking for the student, staying next to him and never leaving his side

9. A schedule provides a student with autism with:

- a list of what he has to do in the exact order its written
- a visual representation of the day's events that he must follow at all times
- a system by which he can organize himself, understand daily occurrences, be warned of unexpected changes, and know the who, what, where of the day

10. What does ASD stand for?

- Autism, Symptoms and Disorder
- Autism Spectrum Disorder
- Autism, Solutions and Decisions

10. Why is autism described as a spectrum disorder?

- it covers a range of symptoms from mild to severe, and the symptoms present in each individual differently
- the spectrum is an overview of what autism may be
- It affects students of all races and ethnic backgrounds

11. If you had to define what you think autism is to someone who does not know, how would you describe it?

12. In the classroom it is your role to help support the student and also to help the student be part of the group. How best do you think you can help the student you support?



Sensory Processing Quiz

By Sonia Dickson-Bracks

Sensory Processing Quiz

Name

Date

1. List the five senses:
2. List the two “hidden senses”:
3. What is hypersensitivity?
 - a. under responsive to a sensation
 - b. senses running all around
 - c. over responsive to a sensation
4. What is hyposensitivity?
 - a. over responsive to sensory input
 - b. sensitive to everything
 - c. under responsive to sensory input
5. Tactile defensiveness is a condition in which:
 - a. an individual is extremely sensitive to touch, which may lead to misinformation or behavioral responses regarding touch
 - b. an individual needs light touch and craves brushing
 - c. an individual likes to be brushed with a feather or withdraws from strong smells
6. The Vestibular System refers to:
 - a. structures within the inner ear
 - b. structures within the muscles and joints
 - c. structures within the chest cavity
7. Dysfunction within the vestibular system may manifest itself in two different ways. Some individuals may be hypersensitive to vestibular stimulation and have fearful reactions to ordinary movement activities (e.g., swings, slides, ramps, inclines) OR some may actively seek very intense sensory experiences such as excessive body whirling, jumping, and/or spinning.

True**False**
8. Proprioceptive System refers to:
 - a. the system that provides the body with information about head position and ear ache
 - b. components of muscles, joints, and tendons that provide a person with a subconscious awareness of body position
9. What is sensory dysfunction?



Group Case Study Activities

By: Sonia Dickson-Bracks

Team Case Study

Review your case (see cases) and use the following to plan and guide your team discussion and presentation.

1. What visual supports could you develop, including schedules, organization tools and academic accommodations?
2. Does your student need support for social skills? If, yes what supports could you put in place and how and when would you implement them?
3. Why do you think behaviors are occurring? Can you develop possible reasons (underlying/ communicative intent) for the behavior?
4. What prevention/ intervention and positive supports could you develop to help decrease disruptive/ negative behaviors?
5. Are there any other concerns you have? What supports would you put in place to promote independence in the classroom?

For the team presentations, make sure each team member speaks. You are encouraged to draw any examples/visuals you feel would be helpful (and it is good practice!)



CASE STUDY 1

Martin is a seven year old boy with a diagnosis of PDD (NOS). He is in second grade in a general education setting. Martin receives speech, OT and Adapted PE as related services.

You have been assigned to support Martin as a 1:1 aide in the school setting. Martin is a bright, funny student with a positive smile and personality. Martin likes coming to school and enjoys being with peers, however he tends to walk right up to peers and ask the same two or three questions, "What's your name?", "I like Blue's Clues, what do you like?" and "I like pizza, do you?" He tends to be socially isolated because of his behavior; he stands right next to peers and will follow them around at recess and lunch-- the boys find it annoying and tease him, the girls try to hold his hand like a little boy and baby talk with him.

Martin loves reading but when he has to do reading comprehension questions/activities he becomes upset, cries and puts his head on his desk. Martin focuses well but often after recess and when he returns from PE, it takes Martin fifteen minutes to get back to work, as he is either excited or lethargic.

Martin continually asks "When is it time for...?" If there is a change in staff and/or routine he becomes upset and keeps repeating "I want to go home".

Martin loves PE but has a difficult time with motor planning and especially does not like games with balls. He goes to Adapted PE to help with this, but has a lot of fear so during Adapted PE he either tries to run away or lies on the ground.

Martin has verbal skills but sometimes finds it difficult to express the language of emotions, such as anxiety, fear, when he is upset, etc. and this inability to express his feelings often results in negative behavior. He never asks for a break.



CASE STUDY 2

Sophie is nine years old and in fourth grade, and has a diagnosis of autism. She is new to the school and you will be assigned to support her during the school day.

Sophie likes school but her parents acknowledge that it is very difficult to get her out of the car and into the school--she yells and screams and tantrums. Once she is in school she is fine.

Sophie likes recess and lunch so she perseverates on when lunch will be. She has a difficult time following more than one verbal direction and is very easily disorganized. Sophie has verbal skills but she mostly uses memorized scripts to communicate, usually from movies and favorite TV shows. This makes it very difficult for her to interact with peers and they just see the talk as strange. If her attempts at connecting with other students do not work, Sophie walks away and tends to prefer to play alone. The girls in the class often snicker at her, but they are not trying to be mean--just confused by the strange-sounding scripts and unsure of what to do.

Sophie reads but has a difficult time with comprehension and resists activities such as writing and journal activities. When asked to write in her journal about a weekend, she writes about a cartoon, and it tends not to make sense.

Sophie loves to tickle children and adults, as she loves it when the person reacts. Even when she is told to stop she continues to try to tickle peers, which creates another obstacle to social interaction.

Sophie gets confused and upset when the teacher talks a lot to the class or asks the students to follow complex directions that require several steps (e.g., take out your social studies book, turn to page 73 and look at the map.) Often she will either script a cartoon or start tickling others.

Sophie's parents have asked the school staff to give them some information on Sophie's school day so they might better understand her behavioral issues, as well as be able to work with her on targeted skills at home, so the team needs to develop a communication log.



CASE STUDY 3

Jamie is a new student in your Learning Center classroom. He is five years old and has a diagnosis of autism. He will be included in general education for 30% of the day as well as PE, lunch and recess.

Jamie is a very happy young boy, he likes school and is well liked by peers and staff.

Jamie has limited verbal skills; he can say approximations of sounds and some words, but unless you know him well, he can be difficult to comprehend. Jamie has a few PECS icons that he uses (bathroom, break and some food choices), but generally he comes with a book of PECS options that he does not use--he either grabs a person's hand for help, or uses behavior to show he is overwhelmed or unhappy.

Jamie's reports say that he gets anxious about when activities will occur and he has a difficult time with transitions and changes to the routine. Jamie becomes attached to familiar staff and has a difficult time when there is a substitute teacher.

Jamie becomes very upset if a student sits on his spot on the carpet and group time. He likes to touch everything, including others' belongings; while this does not affect his work, it is often upsetting to other students.

The parents and IEP team are looking for appropriate times for Jamie to be in the inclusion setting, but need suggestions and a plan. The goal is for him to have access to social skills and appropriate models of behavior and social play, as he tends to play alone and needs support with interactive play, group play and initiating, sharing and turn taking.

Jamie has a difficult time with academics and learning due to focus.

The team recognizes that Jamie also needs behavior interventions. The preschool team identified triggers for behavior as: just before lunch (possible reasons?), changes in routine, and challenging tasks such as sitting to work, writing and counting, etc.



CASE STUDY 4

Halley is ten and in fourth grade. Halley has a diagnosis of autism and has been assigned to you. You will help include her in a general education setting.

Halley receives speech and OT. Halley has been attending the same elementary school since Kindergarten and is well known and accepted by peers. However, peers tend to say hi to her and play sometimes, but the gap in social skills is widening and fourth grade is a crucial year.

Halley often asks when specific activities are going to take place, and becomes upset when a change happens. She is often slow to transition and reluctant to move from one activity to another.

Halley does not just go and play with her peers. If left unattended she wanders off on her own. She is able to sit comfortably in the lunch room, but often sits alone.

Halley likes to get up often from her seat and wanders around. She also tries to hug students all the time, which is not age appropriate in fourth grade.

Halley loves animals and painting. Uno is a favored activity. She does not know how to pump her legs on the swings, and is confused by the activity and disturbed by the chaos of large group games. She loves to run.

You have been asked to support Halley in the school setting during lunch and recess, so you can support social skills.



CASE STUDY 5

Robert is eleven and in fifth grade. He has a diagnosis of autism. Robert spends time in the learning center classroom and goes into general education setting at recess and lunch and for science and social studies. The teacher has asked for information on autism, and a brief explanation of what the issues are--she has never had a student in her class with autism before.

You are assigned to be Robert's paraprofessional, accompanying him to both the learning center and general education classes.

Robert becomes nervous about his day. As soon as he gets to school he asks questions about what time math is and if it is time for recess.

Robert is interested in his peers but has a difficult time with social skills. He often sits alone at recess and lunch and when he goes to class, rarely initiates conversation with his peers.

When he is in the general education setting Robert has a difficult time remaining in his seat for the duration of the science and social studies lessons, though he generally does well during hands on lab activities and projects. He often gets up and wanders around. The general education teacher is okay with Robert's movement as she has been told it is necessary for him, but recognizes it is very distracting to the other students.

Robert has a hard time with math and writing. He often resists working and tries to climb under the table, put his head on the desk and, when pushed to work, will pull hair and pinch those around him. The team recognizes his assignments will need some modifications, but they don't know what kind.

Robert has a hard time working for longer than eight minutes. He tends to lose focus and resist more work, but an IEP goal is for him to work longer and focus. What can you do to develop ways to encourage this goal?


Robert also has some self stimulatory behaviors, such as spinning the wheels on toy cars, spinning pencils, etc. As soon as adult attention is taken off him, he will try to engage in these self stimulatory actions. However, he does stop when verbally redirected. Another goal is to shape and establish independent work skills, so he is not as reliant on adult prompting to remain on task.

The learning center teacher needs information from you on what you need in the classroom setting, and has asked that you identify key areas for which you will need materials and supports.



Autism/Asperger Simulation Activity

By: Lori Ernsperger, PhD

 The following simulation activity is intended to be implemented with school teams to increase awareness and understanding of students with autism. The activity takes 5-10 minutes and can be used with staff at any grade level, or with peers from upper elementary and older. The steps for implementation include:

Prep Work:

1. Copy the following sheets on Pink, Blue, or White paper. If the paper says "Talk to the person with the Blue sheet" that page should be on Pink paper and vice versa. The sensory sheet is copied on to white paper.
2. Cut the papers in half.
3. Collate the pages into sets of Pink/Blue/White. The number of sets is determined by the number of participants. Each participant will receive one half-sheet of paper.

Activity:

1. Tell the group that they are going to do a fun interactive activity. Don't share too much in the beginning. Let them come to their own conclusions.
2. Have participants get into groups of 3, this activity does not work with groups of 2 or 4 people.
3. Hand-out the sets of Pink/Blue/White papers to each group. Each participant should take a half sheet of paper and quickly review the instructions on their sheet only. Let participants know that they are not to read each other's paper.
4. After a few seconds, tell the groups to begin. The participants with the Pink/Blue sheets should quickly begin talking about food.
5. The participants with the White sheets may need some encouragement to interrupt their colleagues to discuss the sensory system. Walk around and encourage all participants to follow the directions exactly as they have on their papers.
6. After two minutes, stop the group. Most groups will have uncovered the hidden meaning of this activity.
7. Discuss the hidden intent of this activity. Ask the following questions:
 - What did it feel like to play your role in the group? Have the participants explain in one word how it felt, i.e. awkward, lonely, annoying, uncomfortable, sad.
 - Ask the participants with the White sheets if they observed the non-verbal cue their peers were using when they were speaking. Did they observe the non-verbal cue?
 - How was it different for the people with the Pink/Blue sheets vs. the person with the White sheet?
 - Relate their experience to students with autism and their peers. How does this two-minute simulation impact the educational experience of students with autism?
 - Discuss the importance of teaching social skills to help to avoid these situations.
 - Discuss the impact on bullying and depression for older students.



Participant #1: Please follow directions below.

1. Have a normal conversation with the person with the Blue sheet only.
2. Talk only about the following topic: Food, which includes-
 - ◆ Favorite restaurants
 - ◆ Best meals
 - ◆ Recipes
 - ◆ What did you have for dinner last night
3. The person who is speaking should clasp their hands in front of them when they are talking. This non-verbal signal will indicate who is talking.
4. Carry-on a conversation for 3-5 minutes. Have fun!

Participant #1: Please follow directions below.

1. Have a normal conversation with the person with the Blue sheet only.
2. Talk only about the following topic: Food, which includes-
 - ◆ Favorite restaurants
 - ◆ Best meals
 - ◆ Recipes
 - ◆ What did you have for dinner last night
3. The person who is speaking should clasp their hands in front of them when they are talking. This non-verbal signal will indicate who is talking.
4. Carry-on a conversation for 3-5 minutes. Have fun!



Participant #2: Please follow directions below.

1. Have a normal conversation with the person with the Pink sheet only.
2. Talk only about the following topic: Food, which includes-
 - ◆ Favorite restaurants
 - ◆ Best meals
 - ◆ Recipes
 - ◆ What did you have for dinner last night
3. The person who is speaking should clasp their hands in front of them when they are talking. This non-verbal signal will indicate who is talking.
4. Carry-on a conversation for 3-5 minutes. Have fun!

Participant #2: Please follow directions below.

1. Have a normal conversation with the person with the Pink sheet only.
2. Talk only about the following topic: Food, which includes-
 - ◆ Favorite restaurants
 - ◆ Best meals
 - ◆ Recipes
 - ◆ What did you have for dinner last night
3. The person who is speaking should clasp their hands in front of them when they are talking. This non-verbal signal will indicate who is talking.
4. Carry-on a conversation for 3-5 minutes. Have fun!



Participant #3:

Please follow directions below:

1. Speak directly to your group.
2. It is your responsibility to share with your group the following facts:

The Sensory System

<u>Tactile System</u> : located on the skin. This area has a density of cells distributed all over the body, which includes the mouth, hands, and feet.	The function of the tactile system is to provide information about the environment and object qualities i.e. soft, sharp, dull, cold, hot.
<u>Visual System</u> : Located in the retina of the eye-stimulated by light	Provides information about objects and persons. Helps us define boundaries as we move through time and space.
<u>Auditory System</u> : Located in the inner ear and stimulated by air/sound waves.	Provides information about sounds in the environment i.e. loud, soft, low, near, far.
<u>Gustatory System</u> : The taste system is located on the tongue and closely related to smell	Provides information about different types of taste i.e. sour, bitter, salty, spicy, sweet.
<u>Olfactory System</u> : Located in the nasal structure.	Provides information about different types of smells i.e. musty, acrid, putrid, flowery, sweet.

3. It is extremely important that your group thoroughly understand the facts of the Sensory System. So, please be bold in your attempts to share the information.

Participant #3:

Please follow directions below:

1. Speak directly to your group.
2. It is your responsibility to share with your group the following facts:

The Sensory System

<u>Tactile System</u> : located on the skin. This area has a density of cells distributed all over the body, which includes the mouth, hands, and feet.	The function of the tactile system is to provide information about the environment and object qualities i.e. soft, sharp, dull, cold, hot.
<u>Visual System</u> : Located in the retina of the eye-stimulated by light	Provides information about objects and persons. Helps us define boundaries as we move through time and space.
<u>Auditory System</u> : Located in the inner ear and stimulated by air/sound waves.	Provides information about sounds in the environment i.e. loud, soft, low, near, far.
<u>Gustatory System</u> : The taste system is located on the tongue and closely related to smell	Provides information about different types of taste i.e. sour, bitter, salty, spicy, sweet.
<u>Olfactory System</u> : Located in the nasal structure.	Provides information about different types of smells i.e. musty, acrid, putrid, flowery, sweet.

3. It is extremely important that your group thoroughly understand the facts of the Sensory System. So, please be bold in your attempts to share the information.

