

Tri-State Autism Spectrum Disorder Webinar Series

This presentation is a collaborative effort between the following:



COLORADO
Department of Education

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Autism and Tertiary Behavior Supports
www.ksdetasn.org

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NEBRASKA
autism spectrum disorders
NETWORK

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Autism Spectrum Disorders: The Basics

Presented by

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History of Autism

- Leo Kanner
 - Child psychiatrist
 - 1943: “Autistic Disturbance of Affective Contact”



History of Autism

- Hans Asperger
 - Pediatrician
 - 1944: “Autistic Psychopathies in Childhood”



History of Autism

- Lorna Wing
 - 1981
 - Introduced concept of an autism spectrum



DSM-V: Autism Spectrum Disorders



1. Persistent deficits in social communication and social interaction (all 3 indicators).
2. Restricted, repetitive patterns of behavior, interests or activities (at least 2 indicators).
3. Symptoms present in early childhood.
4. Symptoms together limit and impair everyday functioning.
5. Symptoms not better explained by intellectual disability or global developmental delay.



What is Autism?

- Autism Spectrum Disorder (ASD) is a neurological, developmental disorder that lasts throughout a person's life. People who have ASD have abnormal or impaired development in social interaction and communication. They have a limited repertoire of activities and interests. They often have problems integrating their senses. Autism is a spectrum disorder in that some people are highly intelligent and verbal, while others are severely cognitively impaired and nonverbal.



Another definition:

- A developmental disorder characterized by marked difficulty in communication and social relations and by the presence of atypical behaviors such as unusual responses to sensation, repetitive movements, and insistence on routine or sameness.

(The Autism Encyclopedia, 2005)



And another definition:

- Complex, lifelong pervasive developmental disorders
 - Affecting the child's ability to interact, communicate, relate, play, imagine, and learn



Early Signs of Autism

- No big smiles or other warm, joyful expressions by 6 months or thereafter
- No back and forth sounds, smiles or other facial expressions by 9 months
- No babbling by 12 months
- No back and forth gestures, such as pointing, showing, reaching or waving by 12 months
- No words by 16 months
- No two-word meaningful phrases (without imitating or repeating) by 24 months
- ANY loss of speech or babbling or social skills at ANY age



Could children be identified earlier?

- A study published in the **British Journal of Psychiatry** indicated that most children with autism could be identified by the age of 14 months. Between 9 and 14 months, children develop and have intact three specific skills that, if absent, are huge indicators of autism:
 - Protodeclarative Point
 - Gaze Monitor
 - Pretend Play



Statistics

- 1 in 88 children being diagnosed (CDC, 2012)
- 177 million cases of autism in the U.S.
- New case is diagnosed every 20 minutes
- Fastest growing developmental disability in the U.S.
- Boys are 4-5 times more likely to be affected



Statistics, continued

- 10-17% annual growth
- Growth comparison during the 1990s:
 - U. S. population increase: 13%
 - Disabilities increase: 16%
 - Autism increase: 172% (U.S. Department of Education, 1999)



Statistics, continued

- \$90 billion annual cost (Jarbrink & Knapp, 2001)
- 90% of costs are in adult services (Jarbrink & Knapp, 2001)
- Cost of lifelong care can be reduced by 2/3 with early diagnosis and intervention (Jarbrink & Knapp, 2001)
- In 10 years, the annual cost will be \$200-400 billion (ASA, 2003)

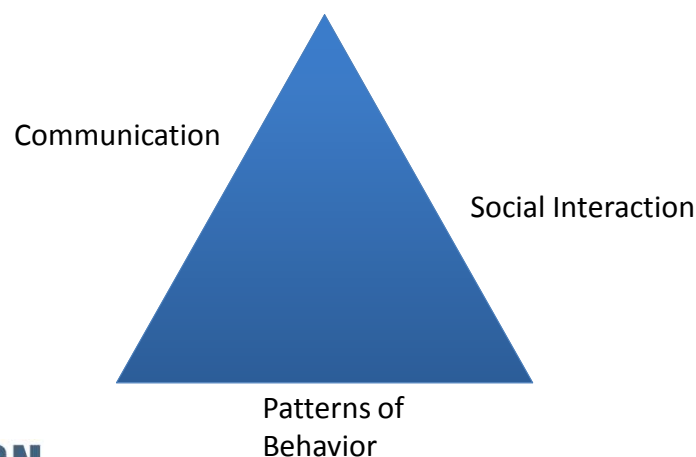


Statistics, continued

- Kansas
 - 2,802 identified students with Autism (MIS, 2011)
 - Only reflects the kids reported as having Autism as their primary diagnosis
 - Many districts did not include students with Asperger's, PDD-NOS, Rett's or CDD.**
 - There are an estimated 15,548 individuals in the state 0-64 with ASD. (SRS, 2007)
 - Of the 5,730 youth currently in the Reintegration Foster Care System there are approximately 37 children in out of home placement identified as having an ASD. (SRS, 2007)



Triad of Characteristics



Social Interaction

- Typically problems noted in social interaction include:
 - Failure to develop peer relationships
 - Inability to create social exchanges and understand the feelings of others
 - Inability or limited ability to use and understand non-verbal cues
 - Impaired ability to share experiences with others



Communication

- Common communication problems include:
 - Delay or absence of verbal language
 - Impaired conversational skills
 - Repetitive language
 - Echolalic language
 - Difficulty in understanding and using abstract language



Patterns of Behavior

- Stereotypical behavior:
 - For example: flapping, spinning, light filtering
 - Insists that routine be followed even when the routine is non-functional
 - Preoccupation with and attachment to objects or parts of objects
 - Narrow scopes of interests



Cognitive Differences

- Estimating “IQ” in individuals with ASD is very difficult due to language and behavior challenges
- New research concludes that the percentage of individuals with intellectual disabilities is much smaller than was originally estimated
- Splinter skills are a part of the ASD profile; savant skills are rare



Educational Challenges and Strategies

- Early diagnosis and intervention is VERY important!
 - Studies show that children with ASD who begin treatment with empirically validated strategies before age 3 achieve more positive outcomes than those beginning after age 3.
 - Average IQ gain of 1.5-2.0 standard deviations with early intervention
 - Can save \$1 million dollars in funding per child

Jacobsent, 1998/Columbia Pacific, 1999



- To date, there is no one intervention that is effective with all children with autism spectrum disorders.



People with ASD can...

- Learn and progress
- Enjoy relationships with friends and family
- Live independently or semi-independently
- Work and participate in their community



“LEAST DANGEROUS ASSUMPTION”

(Anne Donnellan, 1984)

“The criterion of LDA holds that in the absence of conclusive data, educational decisions ought to be based on assumptions which, if incorrect, will have the least dangerous effect on the likelihood that students will be able to function independently as adults.”

“we should assume that poor performance is due to instructional inadequacy rather than to student deficits.”



How Might We Operationalize Donnellan's Least Dangerous Assumption Principle?

The Least Dangerous Assumption is to presume competence.



The Least Dangerous Assumption is to design educational programs and provide supports based on that presumption.



Educational Services

- General Education Classroom
 - Without support
 - With support
- Special Education Services
 - Academic support
 - Social Skills support
 - Speech/Language support
 - Occupational Therapy support
 - Physical Therapy support
 - Community Based Instruction
 - Vocational training
 - Life Skills instruction



Educational Concerns

- Cognitive Development
- Behavior
- Communication
- Integration Strategies
- Transition to adult life and services



Academic Expectations

- Expectations need to be kept in line with abilities.
- Abilities cannot always be determined in traditional ways.
- Expectations that are not attainable will usually lead to disruptive behavior.
- Students with autism need to have their learning styles assessed.



Learning Styles

- Most students with autism:
 - Are visual learners
 - Need simple instructions
 - Do well with visual instructions; written instructions (if they read)
 - Require that lengthy projects be broken into small parts
 - Need to be given problem solving cues
 - Information presented in a sequential format



Visual Learners

- Non-readers respond well to pictures and line drawings.
- Readers can combine text with pictures to gain clarity of demands.
- Manipulatives and visuals in dealing with abstract concepts help students to grasp the concepts presented.



Academic Modifications

- Priming (pre-teaching)
 - Introduce information or activities prior to their use or occurrence
 - Purposes
 - Familiarize the youth with the material before its use
 - Introduce predictability into the information or activity, thereby reducing stress and anxiety
 - Increase the student's success



-
- Classroom assignments
 - Additional time to complete tasks
 - Shortened tasks
 - Number of problems reduced
 - Highlighted text
 - Study guides
 - Identifying precisely which information the student is responsible for
 - Model of what is expected on assignments
 - Specific lists of criteria for grading assignments
 - Variety of ways to demonstrate mastery



- Note-taking

- Determine whether the student knows how to identify main ideas and supporting details
 - Provide a teacher-developed complete outline that includes the main ideas and supporting details
 - Provide a teacher-developed skeletal outline that includes the main ideas and provides spaces for the student to fill in supporting details as these are discussed in class
 - Provide a peer-constructed outline developed by a fellow student



- Graphic organizers

- Enrichment

- Homework

- Often lessened or waived for students to allow them to focus on “de-stressing” and relaxing when they get home from school



Environmental Supports

- Preferential seating
- Organizational strategies
- Home base
- Safe person
- Visual supports



Social Supports

- Hidden curriculum
- Circle of friends
- Social skills instruction
- Social skills interpretation



Behavioral Supports

- Reinforce the smallest steps towards a change in behavior.
- Use positive reinforcement.
- Punishment works only so long as the punisher is present.
- Persons with autism have a tough time generalizing across different settings.



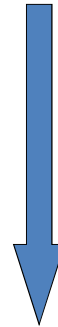
Communication

- Communication is the single largest deficit area for people with autism. The communication skills of persons with autism impede their ability to interact in a social context, make wants and needs known, as well as, exhibit the knowledge they have acquired.



Communication Needs

- Communication skills among people with Autism vary a great deal.
 - Non-communicative
 - Leads
 - Signs
 - Uses augmentative device
 - Combines methods
 - Speaks
 - Maintains conversation



Communication Needs

- The most pressing need that a person with autism has is to have their communication needs met at their present level of functioning.
- Remember the expressive and receptive language skills of the students may be radically different.
- Communication opportunities must occur across environments (home, school, community) and across time.



General Information

- Students identified with Autism Spectrum Disorders frequently seem to have an underlying anxiety.
- A lack of predictable routine will frequently cause the anxiety to bubble to the surface, sometimes presenting itself in aggressive, self injurious, self-stimulatory ways.
- Waiting is frequently a difficult concept for these students to understand.
- Students with ASDs are not inferential learners.



General Tips



- Provide a predictable routine
- Be concrete and specific
- Present material visually
 - Written, demonstration, pictures, object
- Use planted questions
- Develop groups of children in which these kids can contribute
- Understand the Pre-mack Principle
- Be affirmative
- Treat all students with respect and dignity
- Learn about the disability, but more importantly learn about the child
- Put yourself in the child's place, in the parent's place,
empathize, don't sympathize



Helpful Websites

The list below is a sampling of the hundreds of interesting site available on the Internet for obtaining information on Autism Spectrum Disorders (ASD).

- Web sites that may be helpful in learning more about ASD:
 - www.teacch.com
 - www.autism-society.org
 - www.udel.edu/bkirby/asperger/
 - <http://home.vicnet.net.au/~asperger/>
 - <http://www.nap.edu/books/0309072697/html/>
 - www.autism-resources.com
 - <http://www.tonyattwood.com.au/>
 - <http://firstsigns.org/index.html>
- Web sites with information for educators and links to other helpful sites:
 - www.members.aol.com/Room5/welcome.html
 - www.tinsnips.org
 - www.dotolearn.com
 - www.preschoolfun.com/pages/



Helpful Websites, continued

- Web sites that are resources for books, videos, tapes, and other materials on ASD:
 - www.autismsociety-nc.org
 - www.futurehorizons-autism.com
 - www.starfishpress.com
 - <http://www.missouristate.edu/access/library.html>
 - www.AutismShop.com
 - www.speechmark.net
- Other related web sites:
 - www.tourettesyndrome.net
 - www.comeunity.com/disability/sensory_integration/index.html
 - www.hwtears.com
 - <http://www.speakingofspeech.com>
 - <http://hometown.aol.com/mavah/index.html>
 - www.human-emotions.com
 - www.TheGrayCenter.org



www.KansasASD.com

The screenshot displays the homepage of the KansasASD.com website. At the top, the URL 'www.KansasASD.com' is prominently displayed. Below it, the website's header features the TASN logo and the tagline 'Autism and Tertiary Behavior Supports'. A navigation bar includes links for 'Training Calendar', 'Training on Demand', 'Newsletter Archive', 'Request Help', and 'About Us'. The main content area is organized into several sections: 'Regional Consultants' with a 'Request Our Help' button; 'Free Classroom Support Materials' and 'Lending Library' (with a 'Check Out Free Teaching Materials Here' link); and 'Local Service Search'. A central 'News' section highlights two articles: 'Autism reveals itself in different ways in women than in men, according to new research from the University of Cambridge' and 'Parent 'Optimum Training' May Reduce Behavior Problems'. A 'Thumbs Up' section mentions Dr. Amy Finch and Dr. Trisha Self. The 'Other Resources' section lists various organizations such as the Kansas State Department of Education, Kansas Department of Health and Environment, Families Together, Disability Rights Center of Kansas, and Autism Internet Modules. The left sidebar contains links for 'Training Materials', 'TASN Projects', 'Current Providers and Projects', and 'Thumbs Up'.