Life Journey Through Autism:
An Educator’s Guide to Asperger Syndrome
Notice to Readers

April 1, 2016

This is a reprint of Life Journey Through Autism: An Educator’s Guide to Asperger Syndrome. Since publishing this resource guide in 2005, the Organization for Autism Research (OAR) has distributed more than 10,000 copies to teachers, autism professionals, and other interested consumers in the autism community.

In reading this edition, please be aware that the “Asperger Syndrome” diagnosis was eliminated from the American Psychiatric Association’s Diagnostic Manual of Mental Disorders, 5th Edition (DSM-V) that was released in 2013. Since then, Asperger Syndrome is captured under the broad term Autism Spectrum Disorder (ASD). That aside, the content of this guide remains current and germane for those that retain the Asperger Syndrome diagnosis.
Life Journey Through Autism:
An Educator’s Guide to Asperger Syndrome

by

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Dear Educators,

The Organization for Autism Research (OAR) was founded in 2001 with the intent to raise money, fund research, and change lives. OAR funds research that holds practical value for today’s families, answering questions they face daily. As part of this mission, we strive to put information into the hands of those who need it most – parents, teachers, and other professionals. The first two publications in our *Life Journey through Autism* series address issues relating to autism research and education for elementary-aged children with autism. This guide, *An Educator’s Guide to Asperger Syndrome*, addresses the specific needs of students with Asperger Syndrome, an autism spectrum disorder (ASD).

Education is an important issue to every parent, and it becomes even more critical when the child has an ASD. As we developed the first *Educator’s Guide to Autism*, it became clear that the issues children with classic autism face in school differ significantly from those experienced by children with Asperger Syndrome. So we decided to separate the two disorders and focus an entire book on each. The *Educator’s Guide to Autism* has been distributed to more than 4,000 teachers and families, and we have received positive feedback on its utility in the classroom. It is my hope that this guide will be similarly informative and useful.

Asperger Syndrome presents myriad challenges in the classroom setting. It affects the way a child thinks, feels, and behaves. Children with this disorder display significant impairments in cognitive and social skills, which can negatively impact their relationships with peers. This guide is designed to give teachers and other professionals an introduction to Asperger Syndrome, some of its characteristics, and several teaching strategies that can be employed in the classroom. It is meant to serve as a starting point for further learning; it is not meant to have all the answers. Each child with Asperger Syndrome is different; this book will help you recognize the specific challenges faced by the child(ren) with Asperger Syndrome in your class, and how to prepare your classroom appropriately.

We are extremely fortunate to work with Dr. Brenda Myles, one of the Nation’s top experts on Asperger Syndrome and would like to thank her team of graduate students at the University of Kansas, her professional colleagues, and her for volunteering their time to write this guide. In addition to Dr. Myles and her team, we have again collaborated with Danya International for the design and layout of the guide, and thank them for their many contributions. Special thanks go to the OAR staff and Serge Visaggio, a parent volunteer whose insight and experience proved invaluable during the editing and revision of the guide. I would also like to thank the parents, teachers, and others who reviewed the initial drafts of this book and provided feedback to make it better. Your comments helped us round out the content, making it more personal, practical, and targeted. Thank you for your efforts.

As the father of four children, two of whom have autism, I know firsthand the impact that a teacher can have on the lives of his or her students. It is my hope that this guide helps you make a difference in the life of a child with Asperger Syndrome.

Sincerely,

James M. Sack
President
ACKNOWLEDGMENTS

Special thanks to Brenda Myles, Ph.D. and her team of graduate students at the University of Kansas and colleagues for their lead role in writing this publication. Teams from the Organization for Autism Research (OAR) and Danya International, Inc. (Danya), joined Dr. Myles in overseeing the publication of this guidebook. OAR is dedicated to providing practical information to those living with the challenges of autism – individuals, families, educators, and other professionals. Danya is a health communications company committed to shaping healthier futures for children, families, and communities around the globe through the creative use of technology and research.

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INTRODUCTION

As a teacher, you are responsible for helping to shape the lives of young people and preparing them to be successful adults. Your students may come from different family backgrounds and leave your classroom for different futures, but they spend a significant portion of their young lives with you right now. Next to their parents and immediate family, you have the greatest opportunity and the power to positively influence their lives. To do this successfully, you need to understand and be able to meet their needs. You already know that, in addition to intelligence, passion, and enthusiasm, teaching requires patience, sensitivity, and creativity. Having a child with Asperger Syndrome in your classroom will present unique challenges for you as a teacher, but it also gives you the opportunity to learn new ways to teach young people the academic and social skills that will last them a lifetime.

Asperger Syndrome was first identified in the 1940s by Viennese physician Hans Asperger. He noticed that four boys with normal intelligence and language development were exhibiting behaviors similar to those of children with autism, such as social impairments, communication difficulties, and insistence on sameness. In 1944 he published a paper describing his observations, and people initially thought the disorder was a type of high-functioning autism. We now know that Asperger Syndrome is different from autism, even though the two disorders exist on the same spectrum and share similar characteristics. In 1994 the term “Asperger Syndrome” was added to the American Psychiatric Association’s Diagnostic Manual of Mental Disorders, 4th Edition (DSM-IV) under the heading “Pervasive Developmental Disorders,” and currently exists in the DSM-IV Text Revision (DSM-IV TR) published in 2000.

The diagnosis of Asperger Syndrome among children is increasing. It is unclear whether this is due to more children actually having Asperger Syndrome or better awareness of the disorder among health care professionals. Estimates on the number of children with Asperger Syndrome are widely debated. For example, the DSM-IV TR reports that definitive prevalence data do not exist. Other sources have estimated that as many as 48 per 10,000 children may have Asperger Syndrome.

With the passage of the Individuals with Disabilities Education Act (IDEA) in 1975 and subsequent legislation, all children with disabilities are entitled to a free and appropriate public education. Inclusive classrooms, where children with all types of
Disabilities are included in the general education classroom for part or all of the day, are now the norm in public schools. Given the increasing numbers of children diagnosed with Asperger Syndrome, chances are good you will have a child with the disorder in your school and at some point in your classroom.

Having a child with Asperger Syndrome in your class will have an impact on the educational and social environment of the classroom. Children with Asperger Syndrome have academic strengths and weaknesses like all children, but the effects of the disorder require different teaching strategies to discover and capitalize on their strengths and facilitate successful learning. Children with Asperger Syndrome also face many obstacles to successful social interactions and relationship building, which are essential elements of the school experience for young people. As a teacher, you can help ensure that children with Asperger Syndrome are fully integrated into the classroom and are able to participate socially with their peers in the day-to-day activities of school life.

The first challenge for you in teaching a child with Asperger Syndrome is to recognize it as a serious mutual challenge for the student and you. It can be very deceptive, almost invisible to the untrained eye at first. Children with Asperger Syndrome can look and act like their typical peers and often perform as well or better academically, thus masking the potential effects of Asperger Syndrome.

The purpose of this guide is to help you understand and be able to respond effectively to the needs of children with Asperger Syndrome in an inclusive classroom setting. Of course, each child with Asperger Syndrome will be different—like all children—and you will need to find your own style for supporting each child’s classroom experience. This guide is meant to orient you to the challenges and skills of students with Asperger Syndrome and outline strategies that can be easily implemented to meet their needs. More specifically, the goals of this guide are to:

- **Educate you and help you prepare for having a student with Asperger Syndrome in your classroom.** The guide begins with background information on the characteristics of Asperger Syndrome, a description of the range of behaviors a child with the disorder might display, and a brief overview of helpful educational approaches.

- **Describe the use of appropriate academic and environmental strategies to promote classroom success for a student with Asperger Syndrome.** A variety of approaches are included in the guide to help teachers and other school personnel meet the academic and environmental needs of a student with Asperger Syndrome in the classroom.

- **Promote the development and use of strategies that foster successful peer relations and social interactions for a student with Asperger Syndrome.** The guide describes several approaches that can be used to address the social challenges Asperger Syndrome presents. The importance of peer education is also
discussed, with resources given for improving social interactions between a student with Asperger Syndrome and typically developing peers.

- **Encourage communication and collaboration with the parents of a student with Asperger Syndrome.** Parents are your best source of information on the child’s behavioral issues and the strategies and treatments that are effective. As much as any student you teach, the child with Asperger Syndrome will benefit most when the teacher and parents are on the same page and efforts in the home and at school become mutually supporting.

The heart of this document is a six-step plan you and your team can use to prepare for the inclusion of a child with Asperger Syndrome in your classroom. The six steps are simple and highly flexible—think of them as continuing and often concurrent actions.

In addition, the Appendices in the back of this guide offer detailed strategies for developing and providing academic, environmental, and social supports for children with Asperger Syndrome in the classroom. Information is also given to help teachers address the sensory needs of children with Asperger Syndrome and work with parents and other educational professionals to develop Individualized Education Programs (IEPs) and plan for transitions related to school and later life.
BACKGROUND

What is Asperger Syndrome?

Asperger Syndrome is a complex developmental disability marked by impairments in socialization, communication, cognition, and sensation. Like classic autism, Asperger Syndrome is a neurological disorder that affects a person’s ability to communicate and relate to others. It is a lifelong disorder that carries with it considerable and long-term behavior problems. Although the characteristics of Asperger Syndrome will differ from person to person, common effects of the disorder include:

- Trouble understanding social cues and conversational language styles
- An inflexible adherence to a nonfunctional routine or ritual
- Repetition of movements or words and phrases
- Difficulties with fine-motor skills and sensory integration
- A persistent preoccupation with objects or narrowly focused topics of interest

Asperger Syndrome may be diagnosed when a person exhibits atypical repetitive patterns of behavior, interest, and activities, such as the examples listed above. All people possess some of these traits, but it is the excessive presence of these characteristics that makes life challenging for individuals with Asperger Syndrome. It is also important to note that these behaviors are neurologically based and do not represent the individual’s willful disobedience or noncompliance. Because Asperger Syndrome is a neurological disorder, individuals with the disorder often have difficulty controlling certain behaviors. It is important to understand the underlying psychological and medical bases of the disorder to develop an effective teaching strategy, as well as to help the individual better manage these behaviors.

Asperger Syndrome is one of five Pervasive Developmental Disorders (PDD) that vary in the severity of symptoms, age of onset, and presence of other disorders like mental retardation. Because language impairments are not a hallmark of Asperger Syndrome, children may not be diagnosed with the disorder until they are in school and other symptoms emerge. Other PDDs include autism, Rett’s Disorder, Childhood Disintegrative Disorder, and Pervasive Developmental Disorder - Not Otherwise Specified (PDD-NOS). The cause of PDDs, including Asperger Syndrome, is unknown.
The term Autism Spectrum Disorders (ASD), which is frequently used in the field and in professional literature, is not a medical term. ASD is normally used to describe three of the PDDs—Asperger Syndrome, autism, and PDD-NOS—because these three disorders share common characteristics that are manifested on a continuum from mild to severe. Children with Asperger Syndrome have, by definition, normal to above-normal intelligence, whereas children with autism or PDD-NOS can have a range of intellectual functioning from below to above normal.

What Does Asperger Syndrome Look Like?

As mentioned above, the main characteristics of Asperger Syndrome involve impairments in socialization, communication, cognition, and sensation. These characteristics exist on a continuum, varying from severe disability to minor impairment. Each individual with Asperger Syndrome is different and, as such, will present his or her own unique challenges. Particularly challenging for teachers is the fact that symptoms can vary widely from day to day. It can often seem that the student you are teaching today is a completely different person from the student you taught yesterday. The chart below lists sample characteristics a child with Asperger Syndrome may exhibit that can impact the classroom experience. Each of these areas is described in more detail on the following pages. As emphasized previously, however, each child with Asperger Syndrome is unique and may display some, many, or none of these behaviors.

<table>
<thead>
<tr>
<th>Common Characteristics of Persons with Asperger Syndrome</th>
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<tr>
<td><strong>Social Challenges</strong></td>
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<tr>
<td>◆ Lack of understanding of social cues and subtleties</td>
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<tr>
<td>◆ Literal interpretation of others’ words</td>
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<tr>
<td>◆ Difficulty engaging in reciprocal conversation</td>
</tr>
<tr>
<td>◆ Tendency to speak bluntly without regard for impact of words on others</td>
</tr>
<tr>
<td>◆ Universal application of social rules to all situations</td>
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<tr>
<td>◆ Focus on single topic of interest that may not be of interest to others</td>
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<tr>
<td><strong>Communication Challenges</strong></td>
</tr>
<tr>
<td>◆ Difficulty understanding social nuances such as sarcasm or metaphor</td>
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<tr>
<td>◆ Echolalia – may repeat last words heard without regard for meaning</td>
</tr>
<tr>
<td>◆ Poor judge of personal space – may stand too close to other students</td>
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<tr>
<td>◆ Abnormal inflection and eye contact</td>
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<tr>
<td>◆ Inappropriate facial expressions or gestures</td>
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<tr>
<td>◆ Difficulty interpreting others’ nonverbal communication cues</td>
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<tr>
<td><strong>Cognition Challenges</strong></td>
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<tr>
<td>◆ Poor problem-solving and organizational skills</td>
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<tr>
<td>◆ Concrete, literal thinking</td>
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<tr>
<td>◆ Difficulty differentiating relevant and irrelevant information</td>
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<tr>
<td>◆ Obsessive and narrowly defined interests</td>
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<tr>
<td>◆ Difficulty generalizing and applying learned knowledge and skills across different situations, settings, and people</td>
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<tr>
<td><strong>Sensory and Motor Challenges</strong></td>
</tr>
<tr>
<td>◆ Over- or under-sensitivity to different sensory stimuli, including pain</td>
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<tr>
<td>◆ Difficulty with fine-motor skills, such as handwriting</td>
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</table>
What are the Classroom Challenges?

The characteristics of Asperger Syndrome just described translate into challenges to learning, behavior, and socialization for the child with the disorder and pose just as significant difficulties for the teacher in terms of teaching, controlling behaviors, and maintaining a classroom environment that is conducive to learning by all students, including the child with Asperger Syndrome. The chart below provides a quick reference guide for some of the common difficulties children with Asperger Syndrome have in the classroom.

<table>
<thead>
<tr>
<th>Common Classroom Difficulties of Those with Asperger Syndrome</th>
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<tr>
<td>Interests limited to specific topics</td>
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<tr>
<td>Insistence on sameness/difficulty with changes in routine</td>
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<tr>
<td>Inability to make friends</td>
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<tr>
<td>Difficulty with reciprocal conversations</td>
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<tr>
<td>Pedantic speech</td>
</tr>
<tr>
<td>Socially naïve and literal thinkers</td>
</tr>
<tr>
<td>Tend to be reclusive</td>
</tr>
<tr>
<td>Difficulty with learning in large groups</td>
</tr>
<tr>
<td>Difficulties with abstract concepts</td>
</tr>
<tr>
<td>Problem-solving abilities tend to be poor</td>
</tr>
<tr>
<td>Vocabulary usually great; comprehension poor</td>
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Because these children have so many strengths, it is often easy to overlook their weaknesses. Also, some of their behaviors may be misinterpreted as “spoiled” or “manipulative,” resulting in the mistaken impression that children with Asperger Syndrome are being defiant and “troublemakers.”

It is important for teachers to recognize that inappropriate behaviors are usually a function of poor coping skills, low frustration tolerance, and difficulty reading social cues. Most teaching strategies that are effective for students with autism (structure, consistency, etc.) also work for students with Asperger Syndrome. However, because these children are often aware that they are different and can be self-conscious about it, teachers may need to be subtler in their intervention methods.

Note: Taken from the book, *Inclusive Programming for the Elementary Students With Autism*, by Sheila Wagner, M.Ed.
How Does Asperger Syndrome Affect a Child?

Socialization

Social impairments, a hallmark trait of Asperger Syndrome, are among the greatest challenges for students with this disorder. Despite wanting to have friends, social skills deficits often isolate students with Asperger Syndrome from their peers. Building and maintaining social relationships and friendships can be problematic because of the student’s lack of understanding of social cues, literal interpretation of others’ words, and language comprehension problems. This lack of social skills can and often does make students with Asperger Syndrome the object of teasing, victimization, and bullying by their peers, especially in middle and high school where social differences become more evident and take on greater importance within peer groups. Common socialization difficulties experienced by students with Asperger Syndrome are described below.

◆ **Conversational style:** Individuals with Asperger Syndrome typically exhibit a one-sided social interaction style marked by abnormal inflection and words and phrases that do not match those of their conversational partner. When conversing with an individual with Asperger Syndrome, one often gets the impression of being talked at instead of participating in a reciprocal conversation. The information shared by the individual with Asperger Syndrome is usually a topic that is fascinating to him, regardless of others’ input or interest.

◆ **Bluntness:** People with Asperger Syndrome have a tendency to “blurt out” exactly what comes to mind, which can make them seem rude and insensitive. Utterances such as, “Those pants make you look fat,” or, “Your breath smells really bad,” are examples of ways a student with Asperger Syndrome might state an observation in an extremely honest and indiscreet manner. It is important for others to understand that the child with Asperger Syndrome is not intentionally being mean when he says things like this.

◆ **Social rules:** Students with Asperger Syndrome are poor incidental learners. They often learn social skills without fully understanding when and how they should be used.

"Kids with Asperger Syndrome want to interact socially but haven’t learned from watching and doing like other children. Often times, social interactions with smaller groups and with adult supervision are more successful for these children. Explaining a sequence of events and even giving a sample script helps them succeed."

− Mother of a 12-year-old diagnosed with Asperger Syndrome

Recurring burping is acceptable behavior for young boys when they are with their peers. Most boys do not have to be taught that repetitive burping in public is neither polite nor acceptable. Max, who has Asperger Syndrome, observes students laughing and belching loudly in the hallways, during lunch, and before school. However, Max does not understand the changed social setting. Much to his surprise, he was punished for belching loudly in quick repetition during the middle of class. He had mistakenly perceived burping to be socially acceptable.
In an attempt to understand the social world, they typically apply inflexible and universal social rules to all situations. This often is an unsuccessful strategy that causes many problems for the student with Asperger Syndrome. Social nuances, which are referred to as the “hidden curriculum,” are aspects of socialization that children normally learn through daily experience and do not have to be taught. Most children with Asperger Syndrome do not learn that way and do not understand the hidden curriculum. Therefore, they must be taught these skills. Every classroom, school, and society has a hidden curriculum. It is incumbent upon the teacher, in collaboration with the parents of the student with Asperger Syndrome, to identify the key elements of this curriculum and develop a plan to teach it to those who do not come by it naturally.

**Communication**

Although children with Asperger Syndrome generally have good grammar and a vocabulary that seems to equal or surpass their typically developing peers, they experience both verbal and nonverbal communication deficits. The extent and nature of these deficits put individuals with Asperger Syndrome at a clear disadvantage in understanding social situations and can increase the susceptibility of children with Asperger Syndrome to bullying by their peers. Teachers should be aware of the common communication challenges children with Asperger Syndrome face, such as those described below.

- **Social aspects of language:** Students with Asperger Syndrome often find it difficult to maintain an interaction that does not involve a narrowly defined topic area. They may discuss at length a single topic that is of little or no interest to others and speak with exaggerated inflections or in a monotone fashion. This adult-like and pedantic speech can make them unappealing or “weird” to their peers, further exacerbating their social isolation. Echolalia, or the repetition of words and phrases with little or no social meaning, can also be problematic for students with Asperger Syndrome in conversational settings.

- **Abstract concepts:** The effects of Asperger Syndrome can make it difficult to understand the many abstract concepts that present themselves in conversation, including different meanings of the same word. Due to their concrete learning style, students with Asperger Syndrome often struggle with language that involves metaphors, idioms, parables, allegories, irony, sarcasm, and rhetorical questions.

- **Nonverbal communication:** Children with Asperger Syndrome often have difficulty using nonverbal communication behaviors effectively and appropriately. Examples of these deficits include limited or inappropriate facial expressions and gestures, awkward body language, difficulty with social proximity (standing too close or too far away during a conversation), and peculiar or stiff eye gaze. Students with Asperger Syndrome also
have difficulty reading, interpreting, and understanding the facial expressions and body language of others.

Cognition

In general, individuals with Asperger Syndrome have average to above-average intelligence. They often take an interest in and talk about topics well beyond their age level. However, Asperger Syndrome also creates cognitive deficits that can lead to social and academic difficulties. Common examples and the effects of these deficits are described below:

◆ Academic challenges: Despite having at least normal intelligence, students with Asperger Syndrome often experience cognitive difficulties that impact their academic achievement. These difficulties can result from:
  - Poor problem-solving and organizational skills
  - Concrete, literal thinking—difficulty understanding abstract concepts
  - Difficulty differentiating between relevant and irrelevant information
  - Interests that are obsessive and narrowly defined
  - Low social standing among their peers

◆ Emotions and stress: Asperger Syndrome affects how individuals think, feel, and react. When under stress, people with Asperger Syndrome experience increased difficulties and tend to react emotionally, rather than logically. To some, it is as if the “thinking center” of the brain becomes inactive, while the “feeling center” becomes highly active. All too often students with Asperger Syndrome react without thinking. This inability to inhibit their emotional urges may cause them to engage in rage behaviors. Even when they learn more acceptable behaviors, under stress they may not be able to retrieve and use the newly learned behavior. Instead, they will default to a more established behavior that is often inappropriate.

◆ Ability to generalize knowledge: Another cognitive challenge that students with Asperger Syndrome often face is the ability to generalize and apply the knowledge and skills they learn across situations, settings, and people. Despite having above-average rote memorization skills, people with Asperger Syndrome typically store information as disconnected sets of facts. This often gives others the inaccurate impression that they have mastered the information or skill because they are able to recite a rule or set of procedures. However, students with Asperger Syndrome typically experience difficulty applying the information.

◆ “Theory of Mind”: This concept refers to the idea that people with Asperger Syndrome do not understand that other people have their own thoughts and feelings. As a result, these individuals often have difficulty interpreting or predicting the emotions and behaviors of others. Because they cannot “put themselves in another’s shoes,” individuals with Asperger Syndrome may appear uncaring or self-centered, but there is no evidence to support that they feel superior to others.
**Executive Functioning:** Executive functions are neurological processes that help us make decisions, initiate actions, and plan for future events. They also play a part in impulse control, strategic thinking, and a person’s ability to shift focus between two or more activities. These functions are impaired in people diagnosed with Asperger Syndrome, which can have a serious impact on classroom behavior and performance. These students have difficulty recognizing the most important topics within lectures and reading materials, and they may fail to understand the “big picture” of a given assignment or project.

**Sensory Issues**

Individuals with Asperger Syndrome may have problems processing information from one or more of the seven sensory systems: tactile (touch), vestibular (balance), proprioception (movement), visual (sight), auditory (hearing), gustatory (taste), and olfactory (smell). These processes take place at an unconscious level, and they work together to help attention and learning. Each system has specific receptors that pick up information that is relayed to the brain. The sensory characteristics of individuals with Asperger Syndrome can be responsible for many of their negative behaviors and unpleasant emotions. Reactions to sensory stimuli for typically developing individuals often become stress responses for people with Asperger Syndrome.

<table>
<thead>
<tr>
<th>Sensory System Impact on Individuals with Asperger Syndrome</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tactile System – Touch</strong></td>
</tr>
<tr>
<td>The tactile system provides information about objects in the environment. Tactile defensiveness may involve physical discomfort when coming into contact with someone or something that others might not register. Standing in line, taking a bath, unexpected touch, touch that is either too light or too heavy, and using a glue stick present potentially stressful situations for tactilely defensive individuals. In contrast, individuals who are hyposensitive fail to respond to the touch of others, yet often use touch to explore the environment for the tactile input they crave.</td>
</tr>
<tr>
<td><strong>Vestibular System – Balance</strong></td>
</tr>
<tr>
<td>The vestibular system is stimulated by movement and changes in head position. Individuals with vestibular hypersensitivity have low tolerance for movement and exhibit difficulties with changing speed and direction. They may experience nausea from spinning and have difficulty sitting still; others may display gravitational insecurity. Some may seek out vestibular input by crashing into things or rocking, might be considered clumsy, or have difficulty “switching gears.”</td>
</tr>
<tr>
<td><strong>Proprioception System – Movement</strong></td>
</tr>
<tr>
<td>The proprioceptive system makes carrying multiple objects (i.e., backpack, books, musical instrument) down a packed hallway possible by providing information about the location and movement of a body part. For some, these movements do not come naturally. Problems in the proprioception system can result in poor posture, a lack of coordination, and chronic fatigue accompanying physical activity. Some students do not receive accurate information from their bodies about how hard or soft they are hitting or pushing something. This can result in using too little or too much force when tagging a peer or kicking a ball.</td>
</tr>
<tr>
<td><strong>Visual System – Sight</strong></td>
</tr>
<tr>
<td>Compared to other sensory areas, the visual system appears to be a relative strength for individuals with Asperger Syndrome. The problems that do arise are often related to hypersensitivities to light, poor hand-eye coordination/depth perception, and hyposensitivities that make finding an object “in plain sight” very difficult. Some students may have perfect 20/20 vision yet have difficulties with visual tracking and convergence. These problems can be detected by an exam with a behavioral ophthalmologist or optometrist.</td>
</tr>
<tr>
<td><strong>Auditory System – Hearing</strong></td>
</tr>
<tr>
<td>While they have intact hearing abilities, children with Asperger Syndrome may not efficiently or accurately interpret auditory information. They may be hyper- and/or hyposensitive to noise, responding negatively to loud or small noises and failing to respond when their name is called.</td>
</tr>
<tr>
<td><strong>Gustatory and Olfactory Systems – Taste and Smell</strong></td>
</tr>
<tr>
<td>Issues related to the taste system manifest themselves in avoiding certain foods, eating a very circumscribed diet, and/or being very picky about foods. Closely related to the sense of taste, the olfactory system in the nose is most often characterized by a hypersensitivity to many of the smells that others enjoy or fail to notice.</td>
</tr>
</tbody>
</table>
Individuals with Asperger Syndrome vary in their sensitivity to certain sensory stimuli—with some individuals being overly sensitive and others undersensitive. To complicate matters, thresholds occur along a continuum and can fluctuate. When sensory systems are overloaded, a person with Asperger Syndrome will often experience a “Fight or Flight” reaction. For examples of ways to address the sensory needs of children with Asperger Syndrome, refer to Appendix A on page 25.

Motor Concerns

The majority of students with Asperger Syndrome have challenges with fine-motor skills, including handwriting. The handwriting of students with Asperger Syndrome is often illegible due to heavy pressure, poor spacing, or letter size that is either too big or too small. Many students with Asperger Syndrome dislike or refuse to complete tasks that require handwriting, or else require extensive time to complete such tasks. For anyone unfamiliar with the characteristics of Asperger Syndrome or unaware that a student has the disorder, the refusal to write may be perceived as inappropriate, noncompliant behavior. However, this is rarely the case. Handwriting may in fact be uncomfortable and even painful, as well as emotionally and physically draining for children with Asperger Syndrome. For the student with Asperger Syndrome, it is often necessary to separate the creative and the mechanical acts of writing so that the student’s creativity is not hampered by the motor effort required of handwriting.

Co-occurring Conditions

To add to the complexity of the disorder, individuals with Asperger Syndrome may have co-morbid conditions, including anorexia nervosa, anxiety, attention deficit hyperactivity disorder (ADHD), borderline personality disorder, depression, obsessive-compulsive disorder (OCD), and Tourette Syndrome (TS). The most common co-morbid condition in adolescents with Asperger Syndrome is depression. Teachers in the middle and high school settings should be particularly aware of the early warning signs of depression in this age group.
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 steps are as follows: (1) educate yourself; (2) reach out to the parents; (3) prepare the classroom; (4) educate peers and promote social goals; (5) collaborate on the implementation of an educational program; and (6) manage behavioral challenges.

Step 1: Educate Yourself

As the person responsible for the education and behavior management of all your students, including a child with Asperger Syndrome, you must have a working understanding of Asperger Syndrome and its associated behaviors. Different behaviors are very much a part of Asperger Syndrome. When children with Asperger Syndrome do not respond to the use of language or act out in class, it is typically not because they are ignoring you, trying to clown around, or waste class time. These behaviors may be more related to their Asperger Syndrome, and they may be having difficulty interpreting language and expressing their needs in socially acceptable ways. It is important to find ways to create a comfortable environment for your students with Asperger Syndrome so that they can participate meaningfully in the classroom.

Learning about Asperger Syndrome in general and about the specific characteristics of your student will help you effectively manage this behavior and teach your class. You have already started your education by reading this guide. Below are some helpful hints that can guide everyday school life for young people with Asperger Syndrome. They can be applied to individuals with Asperger Syndrome across the school years and are applicable to almost all environments.

- **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, to gather materials, and to orient themselves during transitions. Provide this time or modify requirements so they can fit in the time allotted and match the student’s pace. Avoid rushing a child with Asperger Syndrome, as this typically results in the child shutting down. When time constraints are added to an already stressful day, the student can become overwhelmed and immobilized.

- **Manage the environment.** Any changes—unexpected changes, in particular—can increase anxiety in a student with Asperger Syndrome; even changes considered to
be minor can cause significant stress. Whenever possible, provide consistency in the schedule and avoid sudden changes. Prepare the child for changes by discussing them in advance, over-viewing a social narrative on the change, or showing a picture of the change. The environment can also be managed by incorporating student preferences that may serve to decrease his or her stress. For example, when going on a field trip, the student might be assigned to sit with a group of preferred peers. Or if the field trip is going to include lunch, the student has access to the menu the day before so he or she can plan what to eat. Additional information is included in the Providing Academic and Environmental Supports section (Appendix B) on page 29.

◆ **Create a balanced agenda.** Make a visual schedule that includes daily activities for students with Asperger Syndrome. It is essential that the demands of the daily schedule or certain classes or activities be monitored and restructured, as needed. For example, “free time,” which is considered fun for typically developing youth, may be challenging for students with Asperger Syndrome because of noise levels, unpredictability of events, and social skills problems. For a child with Asperger Syndrome, free time may have to be structured with prescribed activities to reduce stress and anxiety. A good scheduling strategy is to alternate between preferred and nonpreferred activities with periods in the schedule for downtime. It is important to distinguish free time from downtime. Free time refers to periods during the school day when students are engaged in unstructured activities that have marked social demands and limited teacher supervision. Lunch time, passing time between classes, and time at school before classes actually begin all meet the criteria for free time. These activities are stressful for many students with Asperger Syndrome. Downtime, on the other hand, provides an opportunity for the child or youth with Asperger Syndrome to relax or de-stress. Students’ downtime may include using sensory items, drawing, or listening to music to relieve stress. During downtime, excessive demands are not made on the students.

◆ **Share the agenda.** Students with Asperger Syndrome have difficulty distinguishing between essential and nonessential information. In addition, they often do not remember information that many of us have learned from past experiences or that to others come as common sense. Thus, it is important to state the obvious. One way to do this is to “live out loud.” Naming what you are doing helps the child with Asperger Syndrome accurately put together what you are doing with the why and the how. In addition, “living out loud” helps the student to stay on task and anticipate what will happen next.

◆ **Simplify language.** Keep your language concise and simple, and speak at a slow, deliberate pace. Do not expect a student with Asperger Syndrome to “read between the lines,” understand abstract concepts like sarcasm, or know what you mean by using facial expression only. Be specific when providing instructions. Ensure that the child with Asperger Syndrome knows what to do, how to do it, and when to do it. Be clear, and clarify as needed.
Manage change of plans. When planning activities, make sure the student with Asperger Syndrome is aware that the activities are planned, not guaranteed. Students with Asperger Syndrome need to understand that activities can be changed, canceled, or rescheduled. In addition, create backup plans and share them with the child with Asperger Syndrome. When an unavoidable situation occurs, be flexible and recognize that change is stressful for people with Asperger Syndrome; adapt expectations and your language accordingly. For example, a teacher could state, “Our class is scheduled to go to the park tomorrow. If it rains, you can read your favorite book on dinosaurs.” Prepare students for change whenever possible; tell them about assemblies, fire drills, guest speakers, and testing schedules. In addition to changes within the school day, recurring transitions, such as vacations and the beginning and end of the school year, may cause a child with Asperger Syndrome to be anxious about the change. Students with Asperger Syndrome may require additional time to adjust to the new schedule and/or environment.

Provide reassurance. Because students with Asperger Syndrome cannot predict upcoming events, they are often unsure about what they are to do. Provide information 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 young people 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 the teacher is providing praise.

Note: A special thanks to Dena Gitlitz and Diane Adreon for allowing us to adapt the above material for the Educator’s Guide to Asperger Syndrome.

Teachers who employ the above techniques are more likely to have a successful inclusive classroom, and their student(s) with Asperger Syndrome will be better able to learn class material. In addition to these methods, it is also essential to recognize the importance of matching the teaching style with the student. Children with Asperger Syndrome generally respond well to teachers who are patient and compassionate, flexible in their teaching styles, and speak in a calm, quiet manner. Whenever possible, students with Asperger Syndrome should be placed in this type of classroom environment.

“Teachers can wield a great deal of influence in motivating the child with Asperger Syndrome. I think an effective way to do that is to provide the student with ongoing positive input. In my son’s case, even just a little bit of praise from a teacher goes a long way.”

− Parent of a 14-year-old boy with Asperger Syndrome
Step 2: Reach Out to the Parents

It is vitally important to develop a working partnership with the parents of your student with Asperger Syndrome. They are your first and best source of information about their child and Asperger Syndrome as it manifests itself in that 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.

Your first conversations with the family should focus on the individual characteristics of the student, identifying strengths and areas of challenge. The family may have suggestions for practical accommodations that can be made in the classroom to help the child function at his or her highest potential. In these conversations, it is critical to establish a tone of mutual respect while maintaining realistic expectations for the course of the year.

Building trust with the parents is very important. Communication with families about the progress of the student should be ongoing. If possible, schedule a monthly meeting to discuss the child's progress and any problems he or she may be having. If regular telephone calls or meetings are hard to schedule, you can exchange journals, e-mails, or audiotapes with families. 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. Families could respond with their perspective on the problem and their suggestions for solutions. Families can also support you from home in your social and behavioral goals for your student with Asperger Syndrome.

Open, ongoing communication with families of students with Asperger Syndrome creates a powerful alliance. Be aware that some families may have had negative experiences with other schools or teachers in the past. You will have to help them work through that. If you make the effort to communicate with the family about the progress of their child and listen to their advice and suggestions, they will accept you as their child’s advocate and thus be more likely to give you their complete support.

Appendix C, on page 45, contains a worksheet with suggested questions to ask during your initial meetings with the parents. Also included is an example of a journal that can be used for teachers and parents to communicate with each other daily or weekly regarding the child’s performance and progress.
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. There are ways that you can manipulate the physical aspects of your classroom and ways you can place children with Asperger Syndrome within the classroom to make them more comfortable without sacrificing your plans for the class in general. Appendix C contains information about specific approaches for structuring the academic and physical environment to address the particular behaviors, sensitivities, and characteristics of your individual student with Asperger Syndrome.

Step 4: Educate Peers and Promote Social Goals

Perhaps the most common myth about children with Asperger Syndrome is that they do not have the ability, motivation, or desire to establish and maintain meaningful relationships with others, including friendships with peers. This, for the most part, is not true. There is no doubt that children with Asperger Syndrome have social deficits that make it more difficult for them to establish friendships than typically developing children. However, with appropriate assistance, children with Asperger Syndrome can engage with peers and establish mutually enjoyable and lasting relationships. It is critical that teachers of children with Asperger Syndrome believe this to be true and expect students with Asperger Syndrome to make and maintain meaningful relationships with the adults and other children in the classroom. Clearly stated social skills, behaviors, and objectives should be part of the IEP and assessed regularly for progress.

While teasing may be a common occurrence in the everyday school experience for young people, children with Asperger Syndrome often cannot discriminate between playful versus mean-spirited teasing. Educators and parents can help children with Asperger Syndrome recognize the difference and respond appropriately. A more serious form of teasing is bullying. It is important for teachers and school staff to know that students with Asperger Syndrome are potentially prime targets of bullying or excessive teasing and to be vigilant for the signs of such activities to protect the child’s safety and self-esteem.
One strategy for educators could be to assign a “buddy” or safe student in the classroom. In this way, the student with Asperger Syndrome would have a friend to listen to them and to report any potential conflicts with other students. Also, educators should routinely check in with the student with Asperger Syndrome and/or the parents to ensure the comfort of the student in the classroom.

In addition to the “buddy” strategy described above, it may also be important to educate typically developing students about the common traits and behaviors of children with Asperger Syndrome. The characteristics of Asperger Syndrome can cause peers to perceive a child with the disorder as odd or different, which can lead to situations that involve teasing or bullying. 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. When educated about Asperger Syndrome and specific strategies for how to effectively interact with children with Asperger Syndrome, more frequent and positive social interactions are likely to result.

Many of the social interactions occur outside the classroom in the cafeteria and on the playground. Without prior planning and extra help, students with Asperger Syndrome may end up sitting by themselves during these unstructured times. To ensure this does not happen, you may consider a rotating assignment of playground peer buddies for the student with Asperger Syndrome. The student will then have a chance to observe and model appropriate social behavior of different classmates throughout the year. This “circle of friends” can also be encouraged outside of school.

The academic and social success of young people with Asperger Syndrome can be greatly enhanced when the classroom environment supports their unique challenges. Peer education interventions, such as those listed in the Resources section of this guide, can be used with little training and have been shown to improve outcomes for both typically developing peers and young people with developmental disorders, such as autism and Asperger Syndrome. Specific strategies that can be used to support social interactions for students with Asperger Syndrome are described in Appendix D, page 51.

Step 5: Collaborate on the Educational Program Development

The next key step in your preparations will be to participate in the development and implementation of an educational program for your student with Asperger Syndrome. It is
critical to develop this plan based on the assessment of the child’s current academic skills and his or her educational goals, as defined in the IEP.

**A Brief Legislative History**

Congress passed the Education of All Handicapped Children Act in 1975 and reauthorized it in 1990 as IDEA. This legislation guarantees that all students with disabilities will be provided a free and appropriate public education (FAPE). It also states that students with disabilities should be placed in the least restrictive environment (LRE), where they can make progress toward achieving their IEP goals, meaning that as much as possible, children with disabilities should be educated with children who are not disabled. Finally, it states that students with disabilities must have an IEP, which describes the student’s current level of functioning, his or her goals for the year, and how these goals will be supported through special services. IEPs are an important focus of the six-step plan, and they are discussed in greater detail below.

Because the challenges associated with Asperger Syndrome affect many key aspects of development, the impact of the disorder on education and learning is profound. Therefore, children with Asperger Syndrome are considered disabled under the IDEA guidelines and are legally entitled to an IEP plan and appropriate accommodations from the school to help them achieve their developmental and academic goals.

**Individualized Education Program**

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. The IEP is a blueprint for everything that will happen to a child in school for the next year. Special and general education teachers, speech and language therapists, occupational therapists, school psychologists, and families form the IEP team and meet intermittently to discuss student progress on IEP goals.

Before the IEP team meets, an assessment team gathers information together about the student to make an evaluation and recommendation. The school psychologist, social worker, classroom teacher, and/or speech pathologist are examples of educational professionals who conduct educational assessments. A neurologist may conduct a medical evaluation, and an audiologist may complete hearing tests. The classroom teacher also gives input about the academic progress and classroom behavior of the student. Parents give input to each specialist throughout the process. Then, one person on the evaluation team coordinates all the information, and the team meets to
make recommendations to the IEP team. The IEP team, which consists of the school personnel who work with the student and families, then meets to write the IEP based on the evaluation and team member suggestions.

IEPs always include annual goals, short-term objectives, and special education services required by the student, as well as 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. Annual goals and short-term objectives can be about developing social and communication skills, or reducing problem behavior. Appendix E (page 61) provides more information on IEP and transition planning for students with Asperger Syndrome, including writing objectives and developing measurable IEP goals for learners with Asperger Syndrome.

As a general education teacher, 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 as outlined in the IEP. You also will be asked for input about developing new goals for the student in subsequent and review IEP meetings. A student calendar, which may be customized for an individual student and used to document the child’s progress toward each specific, measurable goal, is also included in Appendix E. This resource can decrease the time spent documenting the student’s performance in a comprehensive manner.

**Step 6: Manage Behavioral Challenges**

Many students with Asperger Syndrome view school as a stressful environment. Commonplace academic and social situations can present several stressors to these students that are ongoing and of great magnitude. Examples of these stressors 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.

Students with Asperger Syndrome rarely indicate in any overt way that they are under stress or are experiencing difficulty coping. In fact, they may not always know that they are near a stage of crisis. However, meltdowns do not occur without warning. There is a pattern of behavior, which is sometimes subtle, that can indicate a forthcoming behavioral outburst for a young person with Asperger Syndrome. For example, a student who is not blinking may well be so neurologically overloaded that they have “tuned out.” They may appear to be listening to a lesson when, in fact, they are taking nothing in.
Tantrums, rage, and meltdowns (terms that are used interchangeably) typically occur in three stages that can be of variable length. These stages and associated interventions are described below. The best intervention for these behavioral outbursts is to prevent them through the use of appropriate academic, environmental, social, and sensory supports and modification to environment and expectations.

### The Cycle of Tantrums, Rage, and Meltdowns and Related Interventions

#### Rumbling
During the initial stage, young people with Asperger Syndrome exhibit specific behavioral changes that may appear to be minor, such as nail biting, tensing muscles, or otherwise indicating discomfort. During this stage, it is imperative that an adult intervene without becoming part of a struggle.

**Intervention**
Effective interventions during this stage include: antiseptic bouncing, proximity control, support from routine and home base. All of these strategies can be effective in stopping the cycle of tantrums, rage, and meltdowns and can help the child regain control with minimal adult support.

#### Rage
If behavior is not diffused during the rumbling stage, the young person may move to the rage stage. At this point, the child is disinhibited and acts impulsively, emotionally, and sometimes explosively. These behaviors may be externalized (i.e., screaming, biting, hitting, kicking, destroying property, or self-injury) or internalized (i.e., withdrawal). Meltdowns are not purposeful, and once the rage stage begins, it most often must run its course.

**Intervention**
Emphasis should be placed on child, peer, and adult safety, as well as protection of school, home, or personal property. Of importance here is helping the individual with Asperger Syndrome regain control and preserve dignity. Adults should have developed plans for (a) obtaining assistance from educators, such as a crisis teacher or principal; (b) removing the student from the area [removing the upset student from the peer group is far less memorable for the peers than is moving the entire peer group away from the upset student]; or (c) providing therapeutic restraint, if necessary. Especially in elementary and middle school, every effort should be made to prevent allowing a student to have a meltdown in view of peers as this behavior tends to “define” the student in the peers’ minds in years ahead.

#### Recovery
Following a meltdown, the child with Asperger Syndrome often cannot fully remember what occurred during the rage stage. Some may become sullen, withdraw, or deny that inappropriate behavior occurred. Other individuals are so physically exhausted that they need to sleep.

**Intervention**
During the recovery stage, children are often not ready to learn. Thus, it is important that adults work with them to help them to once again become a part of the routine. This is often best accomplished by directing the youth to a highly motivating task that can be easily accomplished, such as an activity related to a special interest. If appropriate, when the student has calmed sufficiently, “process” the incident with the student. Staff should analyze the incident to identify whether or not the environment, expectations, or staff behavior played a role in precipitating the incident.

### Pulling It All Together

The six-step plan, discussed on the preceding pages, presents a constructive framework for how to approach the inclusion of a child with Asperger Syndrome in your
classroom. Specific strategies for developing and providing academic, environmental, and social supports are given in the Appendices of this guide.

Your classroom is already a diverse place, including many students with varying backgrounds, talents, difficulties, and interests. With the increasing inclusion of students with Asperger Syndrome, the challenges associated with managing a diverse classroom into today’s educational environment will grow. Just as every child with Asperger Syndrome is different, so is every school environment. It is quite likely that there will be constraints—environmental, interpersonal, financial, and administrative—on the ways that you can implement the approaches suggested in the Guide.

Despite the challenges, your hard work makes a difference in the lives of all the children in the classroom. It is clear, though, that children with Asperger Syndrome may need more help and support than some of your typically developing students. The investment of time and energy in the strategies listed above can pay off tenfold—not only for the child with Asperger Syndrome, but also for all the young learners in your school community.

You will benefit as well. As you learn more about children with differences and how to support their inclusion in the classroom, you will become a mentor to other educators who may be facing this challenge for the first time. Many of the skills that make you a powerful educator will help you succeed in the tasks ahead of you. Your curiosity will fuel your education about Asperger Syndrome and other disorders on the autism spectrum; your communication skills will help you create a meaningful alliance with the parents of the child with Asperger Syndrome in your class. Most of all, your collaboration skills will help you work as a key part of the team that will support the child with Asperger Syndrome throughout the course of the school year. The reward for your patience, kindness, and professionalism will be the unique sense of satisfaction that comes with knowing that you have helped a child with a special need and will have made a difference in that young person’s life!

"I learned a lot from my first experience teaching a child with autism, and it has benefited not only how I teach students with autism, but also how I work with all my students."

— General education teacher
APPENDICES
APPENDIX A

ADDRESSING SENSORY NEEDS
Given the variance and complexity of issues associated with each sensory system for people with Asperger Syndrome, the design and implementation of support strategies for these issues usually involves an occupational therapist (OT) versed in sensory processing. The OT can conduct an evaluation to determine the sensory needs of the individual using a variety of assessment methods (see Resources for a list of assessment measures).

The results of the sensory assessment, sometimes called a sensory profile, yield important information about an individual’s sensory processing. This information enables the OT to develop the necessary strategies for sensory-based support. These support strategies must be available to the child at all times and in all environments. To that end, the OT can identify sensory objects (often called “fidgets”) that efficiently serve an individual’s needs and can train all who come in contact with the child, at home and at school, to help the child use them.

Presented below are examples of sensory support strategies and fidgets that can be used to address common sensory problem areas for young people with Asperger Syndrome. For a more comprehensive guide to the interpretations of and interventions for sensory-related behaviors, see Asperger Syndrome and Sensory Issues: Practical Solutions for Making Sense of the World.

### Sensory Support Process

<table>
<thead>
<tr>
<th>Sensory Problem</th>
<th>Signs or Behavior</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overly sensitive to touch, movements, sights, or sounds</td>
<td>Distractible, withdraws when touched, and avoids certain textures, clothes, and foods; reacts negatively to ordinary movement activities, such as playground play or P.E.; sensitive to loud noises.</td>
</tr>
<tr>
<td>Under-reactive to sensory stimulation</td>
<td>Craves intense sensory experiences, such as spinning, falling, or crashing into objects. Fluctuates between under- and over-responsiveness.</td>
</tr>
<tr>
<td>Coordination problems</td>
<td>Poor balance, great difficulty in learning a new task that requires motor coordination; appears awkward, stiff, or clumsy.</td>
</tr>
<tr>
<td>Poor organization of behavior</td>
<td>Impulsive or distractible; shows lack of planning in approach to tasks; does not anticipate results of actions; difficulty adjusting to new situations or following directions; gets frustrated, aggressive, or withdrawn when encountering failure.</td>
</tr>
<tr>
<td>Unusually high/low activity level</td>
<td>Constantly on the move or slow to get going and fatigues easily.</td>
</tr>
<tr>
<td>Poor self-concept</td>
<td>Lazy, bored, or unmotivated; avoids tasks; appears stubborn or troublesome.</td>
</tr>
</tbody>
</table>

**Note:** Taken from the book, *Answers to Questions Teachers Ask About Sensory Integration*, by Carol Stock Kranowitz, M.A.
When any part of the sensory process is out of order, a number of problems in learning, motor development, or behavior may be observed. A child with Asperger Syndrome may encounter at least one or more of the following:

<table>
<thead>
<tr>
<th>Sample Sensory Problem Area</th>
<th>Sample Support Strategy and Fidget</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caesar has difficulty pouring a glass of water without spilling it. He may have trouble with motor planning related to successfully completing a task.</td>
<td>Increase the weight of the container and decrease the amount of liquid in it, or fill cups or bowls only partially.</td>
</tr>
<tr>
<td>Greta cannot keep her hands and feet to herself during circle time in her preschool classroom. Greta may crave tactile input, in which case she may learn by handling objects, and/or she may fail to understand about personal boundaries.</td>
<td>Provide a visual or physical boundary for sitting, such as a bean bag, pillow, or tape boundaries; or provide a fidget, such as a Koosh Ball™, stress ball, or something else academically related.</td>
</tr>
<tr>
<td>Mikhail will only wear different colors of his favorite cotton sweatsuit, despite his mother’s urging for him to try jeans. He may like his outfit because of the soft cotton texture and dislike jeans because of the texture or because certain characteristics may be irritating or uncomfortable, like a waistband or the width/length of the leg.</td>
<td>Respect the child’s preferences when appropriate. Other interventions include rubbing lotion on the child, removing irritating clothing tags, or using a fragrance-free detergent.</td>
</tr>
<tr>
<td>Chen constantly chews on her pens and pencils at school and her clothing at home. She may find this calming or may be seeking oral, tactile, or proprioceptive input.</td>
<td>Provide her with something appropriate to chew on, such as candy, straws, gum, or a sports-type water bottle.</td>
</tr>
</tbody>
</table>
APPENDIX B

ACADEMIC AND ENVIRONMENTAL SUPPORTS
Students with Asperger Syndrome may require different interventions to succeed in school. A standard set of interventions should not be prescribed for individuals with Asperger Syndrome, as each student will have individual needs. Interventions that provide predictability, support, and empowerment, while also reducing anxiety and building on strengths, are generally effective. Some interventions that merit consideration for young people with Asperger Syndrome include:

- Priming
- Classroom assignment accommodations
- Visual supports
- Home base
- Choice making
- Handwriting modifications
- Incorporation of special interests
- Homework considerations

These intervention activities are described in more detail on the following pages.
Priming is a method of preparing a student with Asperger Syndrome for an activity that he or she will be expected to complete by allowing the student to preview the activity before it is presented for completion. Priming helps to:

- Accommodate the student’s preference for predictability
- Promote the student’s success with the activity
- Reduce the likelihood that the student will experience anxiety and stress about what lies ahead—with anxiety and stress at a minimum, the student can focus his or her efforts on successfully completing activities

During priming, the student will preview the materials that will be used in an activity, such as a worksheet, outline for a project, or schedule of events that will occur. Priming is not a time for teaching or reviewing the content of activity, or having the student actually complete the activity. Anyone can help the student with priming, from a teacher to a parent to a peer.

Priming may occur the day before an activity, the morning of it, the class period before, or even at the beginning of the class period when the activity will be completed. Priming should occur in short, concise time periods in an environment that is relaxing for the student with Asperger Syndrome, and with a person who is patient and supportive.
Classroom Assignment Accommodations

Many students with Asperger Syndrome require assignment accommodations to be successful at school. Assignments may need to be reformatted into a step-wise progression to accommodate the student’s inability to inherently detect problem-solving sequences and distinguish relevant from irrelevant details. Students with Asperger Syndrome also have a difficult time neurologically shifting from one thought process to another. For this reason, grouping like questions together on quizzes and tests will be very helpful. Common examples of these accommodations include:

- Allowing additional time for the student to complete tasks
- Shortening tasks or reducing the number of tasks for student to complete
- Outlining precisely what information the student should learn from reading
- Giving students a model to follow of what is expected on assignments

Modifying assignments can be accomplished easily without drawing undue attention to the student. For example, when reducing the number of math problems assigned to the whole class, the teacher can simply circle the problems on the student’s assignment sheet that the student must complete.

Students with Asperger Syndrome may also read slowly and have trouble discerning important facts from irrelevant information. Highlighted text and study guides help these students maximize their reading time. Teachers can also help by identifying the information the student will be responsible for in upcoming tests.

A model of what is expected on assignments or a specific list of grading criteria may also be helpful for students with Asperger Syndrome. For example, if an essay will be graded on neatness and spelling, as well as content, this must be explained to the student. A model of an “A” paper and a “C” paper highlighting the differences between the two can also help the student be more successful.
Visual Supports

Visual supports help individuals with Asperger Syndrome focus on the task at hand by:

- Clarifying the task that is to be completed
- Reminding the individual of the task to be completed
- Directing the individual’s energies toward completing the task at hand

Most children do not want to appear different from their peers. Therefore, care should be taken when designing visual supports for young people with Asperger Syndrome to ensure that they are either used by everyone in the class or that they are not obvious to others in the class except the teacher and student with Asperger Syndrome. Although the use of visual supports may benefit all students, they are essential for students with Asperger Syndrome. A variety of visual supports that can be used to make life easier for students with Asperger Syndrome at the middle and high school levels are shown in the table below.

<table>
<thead>
<tr>
<th>Type and Purpose of Support</th>
<th>Description</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Map of school outlining classes:</td>
<td>The map shows the student where his or her classes are, the order in which they take place, and when he or she should visit his or her locker.</td>
<td>Taped inside locker&lt;br&gt;Stuck inside back cover of textbook or folder/notebook</td>
</tr>
<tr>
<td>Assist the student in navigating school halls and locating classes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Helps orient and structure the student</td>
<td></td>
<td></td>
</tr>
<tr>
<td>List of classes, room numbers, books, and other supplies needed:</td>
<td>The list outlines the class, room number, supplies needed, and when the class starts and ends.</td>
<td>Taped inside locker&lt;br&gt;Stuck inside back cover of textbook or folder/notebook</td>
</tr>
<tr>
<td>Aids the student in getting to class with needed materials</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Works well with students who have difficulty with maps</td>
<td></td>
<td></td>
</tr>
<tr>
<td>List of teacher’s expectations and routines for each class:</td>
<td>This support details the routine that is to be followed in the classroom and outlines particular characteristics that can help the student get along in class. For example, the list could describe that a particular teacher does not permit talking with neighbors, or that another teacher allows students to bring a bottle of water to class.</td>
<td>Stuck inside back cover of textbook or folder/notebook&lt;br&gt;Placed on a key ring that is kept in a pocket or on a backpack</td>
</tr>
<tr>
<td>Helps the student understand the environment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reduces anxiety associated with routines and lack thereof</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Visual Supports for Secondary School Students with Asperger Syndrome

<table>
<thead>
<tr>
<th>Type and Purpose of Support</th>
<th>Description</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Schedule of activities within the class:</td>
<td>This list simply details what activities will occur during a given class. As each activity is completed, it can be erased, crossed out, or checked off.</td>
<td>Listed on chalkboard or whiteboard</td>
</tr>
<tr>
<td>- Prepares the student for upcoming activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Assists in transitions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outlines and notes from lectures:</td>
<td>Providing the student with outlines and notes from lectures, rather than expecting the student to take his own notes, allows the student to focus on understanding the content.</td>
<td>Prepared in advance by the teacher and given to the student</td>
</tr>
<tr>
<td>- Facilitates the student’s understanding of content material</td>
<td></td>
<td>Notes taken by a peer during class using carbon paper or photocopied, and handed out at the end of class</td>
</tr>
<tr>
<td>- Addresses fine-motor difficulties that can make it difficult for a student to take handwritten notes</td>
<td></td>
<td>Tape recording of lecture by the teacher, with the tape discreetly given to the student at the end of class</td>
</tr>
<tr>
<td>- Reduces anxiety the student may have about listening and taking notes at the same time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sample models of assignments:</td>
<td>A model of assignments helps the student be visually aware of format requirements. This allows the student to concentrate his efforts on content. The model can be an actual copy of an assignment that received an “A” grade.</td>
<td>Prepared in advance by the teacher and given to the student discreetly</td>
</tr>
<tr>
<td>- Helps the student understand exactly what is required</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Provides a concrete, visual model</td>
<td></td>
<td></td>
</tr>
<tr>
<td>List of test reminders:</td>
<td>A study guide that lists content and textbook pages covered in the test is helpful. This study guide should include a timeline for studying and outlining content to be studied each night and the approximate time required to do so. The teacher assumes responsibility for developing it initially, but then works with the student to complete the task independently. A school-wide homework hotline is helpful. If this is not available, a teacher, other adult, or carefully selected peer can serve as the homework hotline for the student.</td>
<td>Prepared in advance by the teacher and given to the student with sufficient time to study</td>
</tr>
<tr>
<td>- Ensures that the student knows when a test will occur and what material will be covered</td>
<td></td>
<td>Final reminder given the day before the test</td>
</tr>
<tr>
<td>Type and Purpose of Support</td>
<td>Description</td>
<td>Location</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>-------------</td>
<td>----------</td>
</tr>
</tbody>
</table>
| List of schedule changes:   | This prompt helps students prepare for a change in routine. Including the responsibilities of the student in the activity helps her complete the activity with minimal stress/anxiety. If the activity is one that the student is not familiar with, it should also include his or her behavioral responsibilities. | ✦ Listed on chalkboard or whiteboard  
✦ Prepared at least 1 day in advance by the teacher and given to the student |
| List of homework assignments: | Students with Asperger Syndrome need written details of homework. Teachers often write the basic elements of homework on the board and supplement them verbally as students write down the assignment. This is not sufficient for students with Asperger Syndrome. The homework support should include all relevant information, such as the due date, items to complete, and the format. | ✦ Prepared in advance by the teacher and given to the student discreetly |
| Cue to use home base:       | Students with Asperger Syndrome often do not know that they are entering the cycle for meltdown. When the teacher recognizes the behaviors associated with the start of the cycle, he or she can use this card to prompt the student to leave the room. | ✦ A small card, approximately the size of a business card, is carried by the teacher who discreetly places it on the student’s desk when home base is needed. It is important to cue the student into any missed content when they return from their break so they don’t feel "lost" or "out of sync" with the class |
Home Base

The home base strategy supports the ability of a student with Asperger Syndrome to function within his or her environment, whether it is at home, school, or out in the community. A home base is a place where the student can go:

- To plan or review daily events
- To escape the stress of their current environment
- To regain control if a tantrum, rage, or meltdown has occurred

The location of home base is not important; it can be a bedroom or resource room. What is important is that the student with Asperger Syndrome perceives the home base as a positive and reassuring environment.

Home base should never be used as a time out or as an escape from tasks and activities. For example, when a student goes to home base at school, she takes her assignment with her. The home base may contain items determined to help facilitate self-calming, such as a beanbag chair, weighted blanket or vest, or mini-trampoline.

It may be necessary to schedule the use of home base as a regular part of the student’s day. At the beginning of the day, home base can serve to preview the day’s schedule, introduce and get familiar with changes in the typical routine, ensure that their materials are organized, or prime them for specific subjects. Home base is also effective when scheduled after a particularly stressful activity or task.

Some students may need to spend a longer time in home base than others. This decision is made based on the amount of time the child needs to self-calm.
Choice Making

Choice making is a strategy in which small choices and decisions are embedded into daily routines and activities. This strategy allows students with Asperger Syndrome to feel like they have some control over events in their life. While this is important for everyone, it can be particularly beneficial for students with Asperger Syndrome. Choice making provides students with opportunities to:

- Strengthen their problem-solving skills
- Build their self-confidence
- Have control over their environment

Many opportunities are available throughout the day in which students with Asperger Syndrome can be provided with choices. For instance, completing a math assignment is not a choice, but the color of pencil to use when doing the assignment could be determined by the student.
Handwriting Accommodations

As noted previously, fine-motor skills, such as handwriting, are often difficult for people with Asperger Syndrome. Teachers must take this into consideration and make appropriate accommodations for students with Asperger Syndrome. Examples include:

- Asking a student to only write key words in response to a question, rather than writing complete sentences; some students with Asperger Syndrome may not respond well to this, as they are rule-bound and would think it “wrong” to write incomplete sentences. In such a case, try a different approach
- Modifying assignments and tests to incorporate multiple-choice, fill-in-the-blank, matching, and/or short-answer questions, rather than essay questions
- Letting the student underline or highlight answers to questions within a reading passage, rather than having to write out the answers
- Allowing the student to use a computer or personal desk assistant (PDA) to type information, rather than write it by hand
- Permitting the student to verbally express information and tape record it, rather than write it by hand
- Allowing the student to state information to a scribe
- Supplying the student with a teacher-made outline of main ideas and key points from readings and/or presentations

Keyboarding should be taught from an early age to students with Asperger Syndrome so that they have the opportunity to become fluent in typing. While handwriting is typically emphasized throughout the early school years, people encounter fewer requirements to use handwriting, other than providing a legal signature, as they get older. Fluent typing skills will be useful to students with Asperger Syndrome as they enter high school, college, and the working world.
Incorporation of Special Interests

As mentioned earlier, Asperger Syndrome is typically marked by intense and sometimes all-consuming attention to specific areas of interest. Students with Asperger Syndrome tend to enjoy learning more about their special interests and are motivated by them. Incorporating these special interests into the curriculum of the student with Asperger Syndrome is one way of making tasks seem interesting, when they may initially be overwhelming or meaningless to the student with Asperger Syndrome.
Homework Considerations

While homework can be a valuable component of a student’s learning process, it does not always serve that function for students with Asperger Syndrome. Homework may present major concerns to students with Asperger Syndrome, such as those described below:

- Homework generally requires handwriting, which can be cognitively and physically challenging for students with Asperger Syndrome. As a result, these students may not be able to demonstrate best what they know.

- Many students with Asperger Syndrome have to work hard to remain emotionally composed throughout the school day, and they arrive home exhausted after this effort. These students may need their afternoons and evenings to relax without demands, or else they may reach their emotional limit for the day, which can result in tantrums, rages, or meltdowns.

- Students with Asperger Syndrome may have additional necessary activities in the afternoons or evenings, such as attending social skills groups.

Homework should be considered on an individual basis for each child, and any decision should incorporate the student, school team and additional service providers, and parents. The homework checklist on the following page can be used to aid in this decision-making process.
## Homework Checklist

**Decide whether to (check one):**

- Assign homework
- Provide a homework time during the day
- Waive homework altogether

**Select a homework planner or PDA/personal computer that has (check all that apply):**

- Enough space for the student to write
- A specific place to write assignments for each class

**Decide whether (check one):**

- Teacher(s) will write down homework assignment(s) for the student
- Teacher(s) will prompt the student to write down homework assignment(s) in the planner

**If student writes down the assignment (check all that apply):**

- Teacher(s) will fill in the details student has omitted
- Specific aspects of homework assignments not written by the student will be identified and a system will be taught for handling that portion (i.e., due dates)
- Teacher(s) will reinforce student’s efforts to write down homework

**Homework assignments (check all that apply):**

- Are presented in written form in the same manner and same place every day
- Are specific enough so that parents understand the assignment requirements
- Include models of assignments whenever possible

**The home routine for homework completion includes (check all that apply):**

- A designated location free from distractions
- A specific time when homework is completed
- Special considerations for student (please specify)
- Use of textbooks that are kept at home for easy reference

**A method for clarifying homework is in place that includes (check all that apply):**

- A school homework hotline
- Assignments faxed or e-mailed to parents at home
- A carefully screened peer buddy who can be called to clarify assignments if needed

**The plan to monitor completion and turning in of homework includes (check all that apply):**

- Having a parent sign the homework planner nightly
- Parent-assisted organization of homework assignments in backpack
- Teacher prompt to turn in homework
- Notifying parents weekly of any assignments that have not been turned in
- Monitor the amount of support the parent is providing to the student for homework completion (If an excessive amount of support is required this may indicate adjustments need to be made.)
APPENDIX C

TIPS FOR TALKING WITH PARENTS
This worksheet may be used as a template to communicate with families of students with Asperger Syndrome. It should not be viewed as an endpoint in itself. It is meant to begin the discussion of classroom issues and challenges between educators and families.

1. What are your child’s areas of strength? ____________________________________
   ________________________________________________________________
   ________________________________________________________________

2. What types of things work best for your child in terms of rewards and motivation?
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

3. Does your child have any balance, coordination, or physical challenges that impede his or her ability to participate in gym class? If so, please describe:
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

4. How does your child best communicate with others?
   □ Spoken language       □ Written language
   □ Sign language         □ Communication device
   □ Combination of the above (please describe): __________________________
   ________________________________________________________________

5. Does your child use echolalia (repeating words without regard for meaning)?
   □ Never           □ Sometimes          □ Frequently

6. Do changes in routine or transitions to new activities affect your child’s behavior?
   □ Never           □ Sometimes          □ Frequently
   If yes, what types of classroom accommodations can I make to help your child adapt to change and transitions? ________________________________
   ________________________________________________________________
   ________________________________________________________________

7. Does your child have any sensory needs that I should be aware of?
   □ Yes           □ No
If yes, what type of sensitivity does the student have?
☐ Visual  ☐ Auditory  ☐ Smells  ☐ Touch  ☐ Taste
☐ Other (please describe): ____________________________________________

What kinds of adaptations have helped with these sensitivities in the past?
________________________________________
________________________________________
________________________________________

8. What behaviors related to Asperger Syndrome am I most likely to see at school?
________________________________________
________________________________________
________________________________________

Are there triggers for these behaviors?
☐ Sensory sensitivity  ☐ Change in schedule or routine
☐ Social attention  ☐ Escape a boring task
☐ Other (please describe): ____________________________________________

In your experience, what are the best ways to cope with these challenges and get your child back on task?
________________________________________
________________________________________
________________________________________

9. Is there anything else you think I should know about your child? ______________
________________________________________
________________________________________

10. What is the best approach for us to use in communication with one another about your child’s progress and challenges?
☐ Telephone calls – Phone numbers: ________________________________
☐ E-mails – Addresses: ________________________________
☐ Audiotape exchange
☐ Other: ________________________________

The following reproducible worksheet provides a daily or weekly template that teachers and parents can use to communicate about a child with Asperger Syndrome and his or her performance and progress.
Date: _________________________

Student’s Name: _________________________________________________________

Overall rating of the day/week (please circle): 1 2 3 4 5

Things that went well in class this day/week:
1. _____________________________________________________________________
2. _____________________________________________________________________
3. _____________________________________________________________________
4. _____________________________________________________________________

Things that could have gone better:
1. _____________________________________________________________________
2. _____________________________________________________________________
3. _____________________________________________________________________
4. _____________________________________________________________________

______________________________________
Teacher’s Signature

Parent’s suggestions and advice about things that could have gone better:
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

______________________________________
Parent’s Signature
APPENDIX D

SOCIAL SUPPORTS
Social interactions are an inherent part of everyone’s life, including individuals with Asperger Syndrome. Despite their desire to have friends and interact with others, children and youth with Asperger Syndrome have difficulties with social skills. Thus, it is important that social skills be included as a part of the curriculum for students with Asperger Syndrome. Effective instructional strategies include:

- Direct instruction
- Social narratives
- Cartooning
- Power card strategy
- Incredible 5-point scale

These strategies are described in more detail on the following pages.
Direct Instruction

Young people with Asperger Syndrome must be directly taught the social skills they need to be successful. Fortunately, a variety of social skills curricula have been created to facilitate this very necessary type of instruction (see Resources for a list of social skills curricula).

Effective use of a social skills curriculum should include an instructional sequence that facilitates learning and generalization of social skills. Direct instruction is an interactive process—presenting a child with Asperger Syndrome with a worksheet and telling the child to follow directions will not work. The sequence for direct instruction includes the steps described below:

- **Rationale:** Children with Asperger Syndrome need to understand why the information is useful, how to use the information, and where the information fits in with the knowledge they already possess.

- **Presentation:** The information should be presented in an active and multimodal format to encourage children with Asperger Syndrome to respond to questions, share observations, and provide and receive meaningful corrective feedback.

- **Modeling:** This step shows children with Asperger Syndrome how to do the behavior within the proper context.

- **Verification:** The teacher should closely monitor the child’s understanding of what is being taught and his or her emotional state, providing opportunities for the child to practice the new behavior in a controlled setting.

- **Evaluation:** In addition to adults evaluating the child’s acquisition of new social skills, the child with Asperger Syndrome should also self-evaluate his or her skill performance and set goals for generalization and skill maintenance.

- **Generalization:** The final step provides the child with opportunities to use newly acquired social skills in a variety of settings and structures. Parents can assist with generalization of social skills by observing home- and community-based events in which the child is expected to use the skill.
Social Narratives

Social narratives provide support and instruction for young people with Asperger Syndrome. They are written at the child’s instructional level and often use pictures or photographs to convey content. For young people with Asperger Syndrome, social narratives can be used to:

- Describe social cues and appropriate responses to social behavior
- Teach new social skills
- Promote self-awareness, self-calming, and self-management

**Sample Social Narrative**

When I want my work checked during class, I can place my "assignment done card" on my desk and patiently wait for the teacher. While I wait, I can read my book. The teacher will not forget me or my needs. When she gets to me, I will close my book and put it away. I will give her my full attention and get back to my task.

**MY ASSIGNMENT IS DONE AND READY TO BE CHECKED**

Few guidelines exist for creating social narratives other than to ensure that the content matches the student’s needs and takes student perspective into account. The most frequently used social narrative is Social Stories™, followed by conversation starters and scripts. These social narrative strategies are described below.

**Social Stories™**

A Social Story™ is an individualized text that describes a specific social situation from the perspective of the young person with Asperger Syndrome. The description may include where and why the situation occurs, how others feel or react, or what prompts their feelings and reactions. Within this framework, Social Stories™ are individualized to specific situations, and to individuals of varying abilities and lifestyles. Social Stories™ may exclusively be written documents, or they may be paired with pictures, audiotapes, or videotapes. They are created by educators, mental health professionals, and parents, often with student input. Teachers should monitor the student’s response to this type of intervention, as at some point he or she is likely to find the approach too “childish.”
Conversation Starters

Beginning and maintaining a conversation requires a high degree of social skills and flexibility, which are challenges for young people with Asperger Syndrome. Although they want to interact with peers, young people with Asperger Syndrome might not know what to talk about. A conversation starter card, the size of a business card or trading card, contains five or six different subjects that same-age peers might like to discuss. Topics are generally identified by listening to the conversations of peers in school hallways, at recess, or standing in line at a movie. Topics must be gender-sensitive, as boys and girls find different topics interesting. Teachers may also choose to seat several children, including the student with Asperger Syndrome, around a table. Tell them that you will choose one person to tell the others about his or her weekend (or other item or event), and that the listeners are expected to ask that child a question relevant to the topic being discussed. This exercise can help the child with Asperger Syndrome learn to attend to the content of another’s speech.

Scripts

Scripts are written sentences or paragraphs or videotaped scenarios that individuals with Asperger Syndrome can memorize and use in social situations. Young people with Asperger Syndrome can practice the scripts with other peers or an adult, and then use them in real-life situations. Scripts are used for children with Asperger Syndrome who have difficulty generating novel language when under stress, but have excellent rote memories. Age-appropriate slang and jargon should be included in scripts for young people with Asperger Syndrome.

Sample Script

If I forget my lunch I will go to the lunchroom. I can say this after the lunch helper greets me:

Hello, my name is Neil and I'm in 3B. I forgot my lunch today and need to order a lunch. Could you please tell me my choices? (I will have to pick from only these.) Thank you, I will have the ... (fill in the blank with one of the choices), please. Thank you.
Cartooning

Cartooning promotes social understanding by using simple figures and other symbols, such as conversation and thought bubbles, in a comic strip-like format that is drawn to explain a social situation. An educator can draw a social situation to facilitate understanding or a student, assisted by an adult, can create his or her own illustrations of a social experience.
Power Card Strategy

The Power Card Strategy is a visual aid that uses a child’s special interest to help that child understand social situations, routines, the meaning of language, and the hidden curriculum in social interactions. This intervention contains two components: a script and the Power Card.

- **Script:** An adult develops a brief script written at the child’s comprehension level detailing the problem situation or target behavior. The script also describes how the child’s special interest has addressed that social challenge. This solution is then generalized back to the child.

- **Power Card:** The size of a business or trading card, the Power Card contains a picture of the special interest and a summary of the solution it represents. The Power Card can be carried with the child, placed on the corner of the desk, or stuck inside a book, notebook, or locker. Power Cards should be portable and accessible in a variety of situations to promote generalization.

A sample Power Card scenario and Power Card was created for David, a 9-year-old boy with Asperger Syndrome, who whose current interest is high-end exotic cars, including the Aston-Martin driven by screen legend James Bond. This information was used to generate the Power Card scenario and Power Card presented below.

<table>
<thead>
<tr>
<th>Sample Power Card Scenario and Power Card</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>James Bond Takes His Turn</strong></td>
</tr>
<tr>
<td>James Bond loves to drive his Aston-Martin. He would drive it all the time if he could; however, he is not the only agent in his Majesty’s Secret Service. Other spies need their turn to drive it, also. So James takes his turn and waits patiently for his next chance. He knows his turn will come - if not today, maybe tomorrow, but he will get his chance again. Just like James Bond, you can wait patiently for your turn.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>James Bond knows:</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is sometimes hard to wait, but your turn will eventually come. Just like James Bond, take a deep breath and wait for your turn.</td>
</tr>
</tbody>
</table>

James Bond takes his turn and waits patiently for his next chance. He knows his turn will eventually come - if not today, maybe tomorrow, but he will get his chance again. Just like James Bond, you can wait patiently for your turn.
Incredible 5-Point Scale

Managing one’s emotions and behaviors requires self-awareness and self-regulation, skills that are lacking in many young people with Asperger Syndrome. The Incredible 5-Point Scale provides a clear, concrete visual aid that uses numbers to represent abstract ideas, such as feelings, emotions, and behaviors. It allows individuals with Asperger Syndrome to “talk in numbers” instead of using socially and emotionally loaded language. This format matches the major learning characteristics of many students with Asperger Syndrome. The Incredible 5-Point Scale helps people with Asperger Syndrome learn to:

- Better understand their emotions and reactions to events in their lives
- Modulate their responses and behaviors in difficult situations

To use the Incredible 5-Point Scale, students and adults identify a behavior or problem situation and determine a rating scale for the behavior choices available to the young person with Asperger Syndrome. The scale is unique in that it can be used as an obsessional index, a stress scale, a meltdown monitor, and so on.

If possible, the student with Asperger Syndrome should develop the rating scale. Then, an adult creates a social narrative in the form of a Social Story™, memo, or letter explaining the scale to the child. Using the scale and accompanying social narrative, young people with Asperger Syndrome are taught to recognize the stages of their specific behavioral challenges and learn methods to self-calm at each level. Below is an illustration of how the Incredible 5-Point Scale may be used.

### Sample Use of the Incredible 5-Point Scale

Larry, an 11-year-old boy with Asperger Syndrome, is very soft spoken. The topic of voice volume was his particular social challenge. His social skills group had worked on filling in the colors and numbers on the scale. They determined that a voice volume of 5 was yelling. The number 4 represented a loud voice that might mean the person being talked to would have to move away. A conversation was represented by the number 3. Whispering happened at 2, and 1 was not talking at all. Larry practiced his voice volume using the Scale... and it worked.

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Yelling</td>
</tr>
<tr>
<td>4</td>
<td>Loud</td>
</tr>
<tr>
<td>3</td>
<td>Conversation</td>
</tr>
<tr>
<td>2</td>
<td>Whisper</td>
</tr>
<tr>
<td>1</td>
<td>No sound</td>
</tr>
</tbody>
</table>
APPENDIX E

IEP AND TRANSITION PLANNING
Planning for the transition of young people with Asperger Syndrome out of secondary school into adulthood is an ongoing process outlined by the Individuals with Disabilities Act (IDEA). According to the 2004 revision of IDEA, transitional planning must begin by the time the child is 16, and no later than 1 year prior to the child’s age of majority. Ideally, transition planning should begin upon a child’s entrance to school.

Each student with Asperger Syndrome in an inclusive classroom setting will have an Individualized Education Program (IEP). The IEP is planned by parents, teachers, and other individuals working with the child with Asperger Syndrome. In addition to outlining academic and behavioral goals, the IEP includes interventions, modifications, supports, and hands-on learning opportunities designed to aid the child with Asperger Syndrome in transitioning to a successful adulthood. The transition considerations checklist for pre-K through school to work and the transition timeline from middle school through senior year (or 18−22) are helpful for this process. The checklist and timeline are included in Appendix E on pages 65–70. An overview of how to write objectives and develop measurable IEP goals for learners with Asperger Syndrome is given on pages 71–73, along with an IEP calendar that can be used to mark the student’s progress.

The Comprehensive Transition Education Model (CTEM) and Comprehensive Transition Services Model (CTSM; Sillington, Clark, & Kolstoe, 2000) encourage teams to make nine domains the focus of transition planning, education, and services:

- Communication and academic performance
- Self-determination
- Interpersonal relationships
- Integrated community participation
- Health and fitness
- Independent/interdependent living
- Leisure and recreation
- Employment
- Further education and training

A brief description of each domain is provided on page 77. Given the multitude of domains, and skills within them, involved in adulthood, team members must be forward thinking. As individuals with Asperger Syndrome have average- to above-average intelligence, it is often easy for the school team, including parents, to focus primarily on academic skills. This is a mistake. The other eight domains, which not only further factor into a rich and rewarding quality of life, but also include many areas of challenge for individuals with Asperger Syndrome (as previously discussed), should be an integral part of the instructional program for students with Asperger Syndrome.
In addition to traditional formal (e.g., intelligence, achievement, and aptitude tests) and informal (e.g., observations, interviews) assessments, teams should use transition-specific tools, such as the *Transition Planning Inventory* (TPI; Clark & Patton, 1997), to pinpoint and plan for a child’s transition needs, as well as to monitor the child and team’s progression with the resulting plan. The TPI includes forms for the child, school team, and parents to complete, and it emphasizes transition planning that revolves around the unique strengths, challenges/needs, interests, goals, and preferences of each child and his team.

Student-centered planning is also an integral part of transition planning. Examples of this include the group action plan (GAP), making action plans (MAPS), essential lifestyles plan (ELP), personal futures planning (PFP), and planning for the future (Bassett & Lehmann, 2002). While each method of student-centered planning has unique elements, overall, the methods have the following characteristics in common:

- Discussing who the child is, including his strengths, challenges, interests, goals, preferences, and learning style
- Exploring visions for the child’s future
- Developing an action plan for achieving this vision

Student-centered planning should constitute its own meeting of the child and his team, as opposed to being one part of an IEP meeting.

Focusing on all nine domains within the CTEM and CTSM; using a transition-specific assessment tool, such as the TPI; and incorporating student-centered planning into the transition process will certainly help a child with Asperger Syndrome experience a more successful transition to adulthood. However, the three most critical factors in the transition process, which should always remain at the center of the team’s efforts, include planning for this transition as soon as the child enters school (i.e., as early as possible), individualizing all transition planning to the child, and involving the child in as much of his or her transition planning as possible.
### Transition Considerations and Checklist

<table>
<thead>
<tr>
<th>Pre-K</th>
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<tbody>
<tr>
<td><strong>Setting</strong></td>
<td>Make sure staff has good knowledge of normal child development and is trained in Asperger Syndrome</td>
</tr>
<tr>
<td></td>
<td>Use an integrated approach for goals and services</td>
</tr>
<tr>
<td></td>
<td>Teach generalization skills – focus on the positive</td>
</tr>
<tr>
<td></td>
<td>Be proactive</td>
</tr>
<tr>
<td></td>
<td>Prevent bullying</td>
</tr>
<tr>
<td><strong>Environment</strong></td>
<td>Natural setting, includes similar-age peers who are both social and verbal</td>
</tr>
<tr>
<td></td>
<td>Visually structured with clear, defined boundaries</td>
</tr>
<tr>
<td></td>
<td>Quiet area to reduce anxiety and sensory overload</td>
</tr>
<tr>
<td><strong>Social-Emotional</strong></td>
<td>Provide curriculum that addresses core deficits based on the student’s developmental stage</td>
</tr>
<tr>
<td></td>
<td>Foster self-awareness of feelings and emotions</td>
</tr>
<tr>
<td></td>
<td>Encourage friendships and develop play skills</td>
</tr>
<tr>
<td></td>
<td>Build self-esteem</td>
</tr>
<tr>
<td><strong>Academic</strong></td>
<td>Schedule reflects balanced variety of activities that addresses both cognitive and adaptive needs and skills</td>
</tr>
<tr>
<td></td>
<td>Use student’s special interests to enhance learning</td>
</tr>
<tr>
<td><strong>Behavioral</strong></td>
<td>Ensure staff and classroom expectations meet student’s needs</td>
</tr>
<tr>
<td></td>
<td>Reduce stress and anxiety</td>
</tr>
<tr>
<td></td>
<td>Build in choice making throughout the day, as appropriate; often, presenting too many choices confuses and agitates students with Asperger Syndrome</td>
</tr>
<tr>
<td></td>
<td>Teach the hidden curriculum</td>
</tr>
<tr>
<td></td>
<td>Teach, encourage, and support developmentally appropriate self-advocacy</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Elementary School</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Setting</strong></td>
<td>Same as Pre-K, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Conduct and review assessments</td>
</tr>
<tr>
<td></td>
<td>Check for understanding</td>
</tr>
<tr>
<td><strong>Environment</strong></td>
<td>Same as Pre-K, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Consider student’s needs with teacher style</td>
</tr>
<tr>
<td></td>
<td>Use visual supports and graphic organizers</td>
</tr>
<tr>
<td></td>
<td>Provide structure to unstructured activities</td>
</tr>
<tr>
<td><strong>Social-Emotional</strong></td>
<td>Same as Pre-K, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Use Circle of Friends and social groups to build relationships</td>
</tr>
<tr>
<td></td>
<td>Teach concept of home base and safe person</td>
</tr>
<tr>
<td></td>
<td>Allow and encourage student to be a leader/helper</td>
</tr>
<tr>
<td><strong>Academic</strong></td>
<td>Same as Pre-K, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Be respectful of learner’s strengths and challenges</td>
</tr>
<tr>
<td></td>
<td>Modify and adjust academic expectations to meet student capabilities</td>
</tr>
<tr>
<td></td>
<td>Introduce concept of leisure skills</td>
</tr>
<tr>
<td><strong>Behavioral</strong></td>
<td>Same as Pre-K, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Make sure positive behavioral supports are in place</td>
</tr>
<tr>
<td></td>
<td>Recognize communication of behaviors</td>
</tr>
<tr>
<td></td>
<td>Be aware of teaching independence instead of learned helplessness</td>
</tr>
<tr>
<td>Middle School</td>
<td>Same as Elementary School, in addition to:</td>
</tr>
<tr>
<td>-----------------------</td>
<td>-------------------------------------------</td>
</tr>
<tr>
<td>Setting</td>
<td>Be sensitive to possibility of depression</td>
</tr>
<tr>
<td>Environment</td>
<td>Same as Elementary School, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Provide orientation</td>
</tr>
<tr>
<td></td>
<td>Practice routines</td>
</tr>
<tr>
<td></td>
<td>Provide maps and written directions</td>
</tr>
<tr>
<td>Social-Emotional</td>
<td>Same as Elementary School, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Analyze effects of stress and anxiety</td>
</tr>
<tr>
<td></td>
<td>Teach self-reflection, self-evaluation</td>
</tr>
<tr>
<td></td>
<td>Expand vocabulary of emotions/feelings</td>
</tr>
<tr>
<td></td>
<td>Change the format of social skills training</td>
</tr>
<tr>
<td>Academic</td>
<td>Same as Elementary School, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Build in homework strategies/accommodations</td>
</tr>
<tr>
<td></td>
<td>Provide study hall</td>
</tr>
<tr>
<td></td>
<td>Provide opportunities for leadership in special interest areas</td>
</tr>
<tr>
<td></td>
<td>Further define leisure skills</td>
</tr>
<tr>
<td>Behavioral</td>
<td>Same as Elementary School, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Honor and value student’s opinions</td>
</tr>
<tr>
<td></td>
<td>Reassess motivation and reinforcements</td>
</tr>
<tr>
<td></td>
<td>Introduce self-determination curriculum</td>
</tr>
<tr>
<td></td>
<td>Establish understanding of role and responsibility of law enforcement</td>
</tr>
<tr>
<td>High School</td>
<td>Same as Middle School, in addition to:</td>
</tr>
<tr>
<td>Setting</td>
<td>Prevent intimidation and harassment</td>
</tr>
<tr>
<td>Environment</td>
<td>Same as Middle School, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Provide orientation opportunities prior to beginning of the year</td>
</tr>
<tr>
<td></td>
<td>Possibly attend a summer class</td>
</tr>
<tr>
<td>Social-Emotional</td>
<td>Same as Middle School, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Provide work experience, supported if necessary</td>
</tr>
<tr>
<td></td>
<td>Continue to facilitate friendships and build on like interests</td>
</tr>
<tr>
<td>Academic</td>
<td>Same as Middle School, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Provide enrichment activities in addition to academics</td>
</tr>
<tr>
<td>Behavioral</td>
<td>Same as Middle School</td>
</tr>
<tr>
<td>School to Work</td>
<td>Same as High School</td>
</tr>
<tr>
<td>Setting</td>
<td>Same as High School</td>
</tr>
<tr>
<td>Environment</td>
<td>Same as High School, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Change from high school setting to college or work setting</td>
</tr>
<tr>
<td>Social-Emotional</td>
<td>Same as High School, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Expand friendships to the next environment</td>
</tr>
<tr>
<td>Academic</td>
<td>Same as High School, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Continue to focus on academics or transfers to work environment</td>
</tr>
<tr>
<td>Behavioral</td>
<td>Same as High School, in addition to:</td>
</tr>
<tr>
<td></td>
<td>Builds on self-determination and self-advocacy</td>
</tr>
</tbody>
</table>
Transition Timeline

Middle School Tasks
- Develop study skills and strategies that you know work for you.
- Talk to teachers to identify classroom accommodation needs.
- Evaluate basic skills in reading, mathematics, oral and written language, and plan for remediation, if necessary.
- Identify tentative postsecondary career and personal goals.
- Investigate which high school classes will best prepare you for your postsecondary goals.
- Attend high school orientation or schedule appointment with high school special education department chair to familiarize yourself with high school requirements.
- Review high school diploma options and plan course of study to meet requirements.
- Explore interests through elective courses, clubs, and/or extracurricular activities.
- Investigate ninth-grade vocational class to see if it offers training relevant to your postsecondary goals.
- Attend IEP meeting.
- Make a list of the activities necessary to achieve your transition plan goals.

Freshman Year Tasks
- Learn the specific nature of your disability and how to explain it so others will understand your needs.
- Ask your parent or a special education teacher to help you develop a plan for meeting with your teachers to explain your disability and request accommodations.
- Learn strategies to help you access the same coursework as your peers.
- Continue to remediate basic skill deficits.
- Review diploma options, revise choice as necessary, and plan course of study to meet requirements.
- Consider whether extending your high school graduation date by 1 to 3 years will help you to reach your postsecondary goals.
- Discuss with guidance counselor appropriateness of enrollment in 10th grade career-related courses.
- Visit the school career center and ask the Career Center Specialist to tell you about the college and career planning resources available in your school.
- Meet with your case manager to discuss the comprehensive vocational assessment services offered locally to decide whether a referral is appropriate.
☐ Continue to explore interests through elective courses, clubs, and extracurricular activities.
☐ Update your Career Portfolio.
☐ Meet with your case manager to plan your IEP meeting and to discuss the role you will play in development of your IEP.
☐ Formulate a transition plan with your case manager and IEP team that reflects your goals and interests.
☐ Prepare for and pass the required standardized tests.

**Sophomore Year Tasks**

☐ Ask your parent or special education teacher to help you prepare to meet with your teachers to explain your disability and request accommodations.
☐ Add to your understanding and use of learning strategies to help you access the same coursework as your peers.
☐ Continue to remediate basic skill deficits.
☐ Review diploma options, revise choice as necessary, and plan course of study to meet requirements.
☐ Consider whether extending your high school graduation date by 1 to 3 years will help you to reach your postsecondary goals.
☐ Discuss with guidance counselor appropriateness of enrollment in career-related courses.
☐ Meet with your case manager to discuss available career/vocational assessment options to decide whether a referral is appropriate.
☐ If your career plans will require a college degree, register and take the Preliminary Scholastic Aptitude Test (PSAT) in the fall—consider using testing adjustments and auxiliary aids.
☐ Continue to explore interests through extracurricular activities, hobbies, volunteer work, and work experiences.
☐ Identify interests, aptitudes, values, and opportunities related to occupations in which you are interested.
☐ Update your Career Portfolio.
☐ Participate actively in your IEP meeting.
☐ Continue to actively participate in your IEP transition planning with your case manager and IEP team.

**Junior Year Tasks**

☐ Identify the appropriate academic adjustments and auxiliary aids and services that you will need in postsecondary settings and learn to use them efficiently.
☐ Learn time management, study skills, assertiveness training, stress management, and exam preparation strategies.
☐ Arrange to meet with your teachers to explain your disability and request accommodations.
☐ Continue to remediate basic skill deficits.
Review diploma options, revise choice as necessary, and plan course of study to meet requirements.
Consider whether extending your high school graduation date by 1 to 3 years will help you to reach your postsecondary goals.
Discuss with guidance counselor appropriateness of enrollment in 12th grade in career-related courses.
Meet with your case manager to discuss available career/vocational assessment options to decide whether a referral is appropriate.
Continue to explore your interests through involvement in school- or community-based extracurricular activities and work experiences.
Update your Career Portfolio.
Focus on matching your interests and abilities to the appropriate postsecondary goals.
If your career goals require postsecondary education, look for schools that have courses in which you might be interested.
Speak with representatives of colleges, technical schools, training programs, and/or the military who visit your high school or present at college and postsecondary fairs.
Gather information about college programs that offer the disability services you need.
Visit campuses and their disability service offices to verify the available services and how to access them.
Make sure that the documentation of your disability is current. Colleges want current evaluations, usually less than 3 years old when you begin college.
Ask your guidance counselor about the differences between SAT and ACT tests to determine which better matches your learning style.
Consider taking a course to prepare for the SAT or ACT.
Take the SAT or ACT in the spring. Discuss with your case manager whether to request testing accommodations.
Meet with your case manager to develop a plan for leading your IEP.
Continue to participate in your IEP transition planning with your case manager and IEP team.
Contact the Department of Rehabilitative Services (DRS), the Community Services Board, or other postsecondary agencies to determine your eligibility for services.
Invite a representative of the appropriate adult services agency to attend your IEP meeting.

Senior Year (or 18-22) Tasks
Identify ways in which the accommodations listed on your IEP will translate to postsecondary education and employment settings.
Continue to develop your advocacy skills and to polish study skills.
Arrange to meet with your teachers to explain your disability and request accommodations.
Continue to remediate basic skill deficits.
- Review diploma options, revise choice as necessary, and plan course of study to meet requirements.
- Consider whether extending your high school graduation date by 1 to 3 years will help you to reach your postsecondary goals.
- Discuss with guidance counselor appropriateness of enrollment during fifth, sixth, or seventh year of high school in career-related courses.
- Meet with your case manager to discuss available career/vocational assessment options to decide whether a referral is appropriate.
- Continue to explore your interests through involvement in school- or community-based extracurricular activities and work experiences.
- Update your Career Portfolio.
- Focus on matching your interests and abilities to the appropriate postsecondary goals.
- Meet with your school guidance counselor early in the year to discuss your postsecondary plans.
- Plan to visit schools, colleges, or training programs in which you are interested early in the year.
- Evaluate the disability services, service provider, and staff of any schools in which you are interested.
- Obtain copies of any school records that document your disability to obtain accommodations in postsecondary environments.
- Take the SAT or ACT again, if appropriate.
- Lead your IEP meeting.
- Develop your Individual Transition Plan and present it at your IEP meeting.
- If not done in your junior year, contact the Department of Rehabilitative Services (DRS), the Community Services Board, or other adult service agency counselor to determine your eligibility for postsecondary services.
- Invite a representative of the appropriate adult services agency to attend your IEP meeting.

**Note:** Adapted from Virginia’s College Guide for Students with Disabilities (2003 Edition). Available at [www.pen.k12.va.us](http://www.pen.k12.va.us)
Developing Objectives and Measurable IEP Goals for Learners with Asperger Syndrome

As mentioned previously in this guide, the Individualized Education Program (IEP) is a very important tool to help your student with Asperger Syndrome achieve his or her full potential in your classroom. Federal rules and regulations indicate that every IEP must have six components, including:

- Statement of the student’s current level of performance
- Statement of annual goals, including short-term instructional objectives
- Appropriate objective criteria and evaluation procedures and schedules for determining (at least annually) whether short-term objectives are being met
- Statement of the specific educational and related services (e.g., speech, OT/PT, transportation) to be provided to the student
- Projected dates for the start of the services, along with how long they will be provided
- Statement identifying the extent to which the student will be able to participate in general education classes, and any modifications or accommodations necessary to enable that participation

As a general education teacher, your greatest area for input in the IEP process will be in two areas: (1) You will participate in the development and implementation of individual goals, specific educational goals, and objectives; and (2) you will complete an ongoing assessment of student progress toward meeting these milestones.

Developing goals and objectives that are clearly stated, objectively determined (based on student’s need), and accurately measured is essential to success. While goals may be more broadly stated (In math, Jim will learn addition and subtraction using carrying and borrowing.), the objectives associated with the goal present the clear steps by which this goal might best be attained (When presented with 10 double-digit addition problems involving carrying, Jim will complete all problems with 90 percent accuracy within 10 minutes. Jim will be able to complete this task at this level for 2 consecutive days.). Such clearly defined objectives are often referred to as behavioral objectives. In general, a good behavioral objective must:

- Identify the learner
- Identify the specific skill or behavior targeted for increase
- Identify the conditions under which the skill or behavior is to be displayed
- Identify criteria for competent performance

Each of these components will be discussed in turn in the following sections.
Identify the Learner

In most cases, it will be a simple matter to identify the learner (e.g., “Jim will…” or “Susan will…”). However, more than one learner may be identified in a behavioral objective (e.g., “Jim and Susan will…”), and this needs to be clearly stated.

Identify the Specific Skill or Behavior Targeted for Increase

In identifying the specific skill or behavior targeted for increase, you are, in effect, clearly stating exactly what the learner is expected to be doing when the objective is met. This requires a precise description of skill in terms that are both observable and measurable. In the previous example, the overall goal was stated as: *In math, Jim will learn addition and subtraction using carrying and borrowing.* This is a general statement with little specificity or measurability.

On the other hand, in the second example given, the behavioral objective is stated as: *When presented with 10 double-digit addition problems involving carrying, Jim will complete all problems with 90 percent accuracy within 10 minutes. Jim will be able to complete this task at this level for 2 consecutive days.* In this case we know:

- **Where** the task is presented (in the classroom)
- **How many problems** are presented (10)
- **What type of problems** are presented (double-digit addition with carrying)

In writing clear and measurable behavioral/educational objectives, it is important to use those verbs and related descriptors that are observable and measurable. Examples are given below:

<table>
<thead>
<tr>
<th>Observable Verbs</th>
<th>Nonobservable Verbs</th>
</tr>
</thead>
<tbody>
<tr>
<td>To write</td>
<td>To conclude</td>
</tr>
<tr>
<td>To point to</td>
<td>To appreciate</td>
</tr>
<tr>
<td>To name</td>
<td>To be aware</td>
</tr>
<tr>
<td>To jump</td>
<td>To discover</td>
</tr>
<tr>
<td>To count orally</td>
<td>To learn</td>
</tr>
<tr>
<td></td>
<td>To develop</td>
</tr>
</tbody>
</table>

Identify the Conditions Under Which the Behavior is to be Displayed

A good behavioral/educational objective should include, when appropriate, conditions for performance, such as:

- **What prompts the behavior:** *When presented with the verbal direction, Jim will…*
- **A list of required materials:** *Using the math workbook, Jim will…*
- **Characteristics of the environment:** *During school assemblies, Jim will…*
In this way, myriad aspects of the individual instructional interaction can be presented in as consistent and productive a manner as possible.

**Identify Criteria for Competent Performance**

In this case, the definition of “success” is clearly stated: 90 percent accuracy in a 10-minute time frame, for at least 2 consecutive days. Once this objective is achieved as stated, Jim is to be considered competent at the task and ready to move on to the next objective. A solid IEP goal should always have similarly clear criteria, allowing team members to objectively determine success.

**Summary**

Creating an IEP for a child with Asperger Syndrome is both an art and a science. Using clear language to write achievable objectives is the first step to success. The resource listed below provides more information on this important part of the educational process.

**Reference**

IEP Calendar

Student’s Name: _______________________________________________________________
IEP Goal #1: __________________________________________________________________
IEP Goal #2: __________________________________________________________________
IEP Goal #3: __________________________________________________________________

<table>
<thead>
<tr>
<th>Date</th>
<th>Progress Notes</th>
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<tbody>
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</tbody>
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### Comprehensive Transition Education Model (CTEM) and Comprehensive Transition Services Model (CTSM) Domains

<table>
<thead>
<tr>
<th>Domain</th>
<th>Brief Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication and Academic Performance</td>
<td>◆ Expressive and receptive communication skills</td>
</tr>
<tr>
<td></td>
<td>◆ Academic skills, such as reading, math, language arts, science, and social studies</td>
</tr>
<tr>
<td>Self-Determination</td>
<td>◆ Being the primary &quot;causal agent&quot; in one’s life, which involves making one’s own decisions and acting on them, as well as participating in more self-directed learning</td>
</tr>
<tr>
<td>Interpersonal Relationships</td>
<td>◆ Social skills such as those related to communicating with others (e.g., initiating, maintaining, and ending conversations) and understanding and managing emotions (e.g., conflict resolution)</td>
</tr>
<tr>
<td>Integrated Community Participation</td>
<td>◆ Participating in one’s community through components, such as restaurants, stores, parks, libraries, places of worship, community events, government, and volunteering</td>
</tr>
<tr>
<td>Health and Fitness</td>
<td>◆ Monitoring one’s health, including scheduling and attending regular check-ups, and recognizing symptoms and determining how to respond to them</td>
</tr>
<tr>
<td></td>
<td>◆ Understanding and applying the principles of nutrition and exercise</td>
</tr>
<tr>
<td></td>
<td>◆ Understanding sexuality</td>
</tr>
<tr>
<td></td>
<td>◆ Being prepared to handle medical emergencies</td>
</tr>
<tr>
<td>Independent/Interdependent Living</td>
<td>◆ Adaptive behaviors, such as personal hygiene, obtaining and maintaining a home, cleaning, cooking, and managing one’s finances</td>
</tr>
<tr>
<td>Leisure and Recreation</td>
<td>◆ Activities that are relaxing and enjoyable in one’s downtime, such as those related to sports, arts and crafts, and music</td>
</tr>
<tr>
<td>Employment</td>
<td>◆ General skills related to working, such as following instructions, being punctual and responsible, and taking criticism</td>
</tr>
<tr>
<td></td>
<td>◆ Occupational skills, such as how to search and apply for jobs, integrating one’s self into a new work environment; and basic job skills, such as working well independently or as a member of a team, communicating effectively, reading, and math</td>
</tr>
<tr>
<td></td>
<td>◆ Vocational skills, or those that are specific to a job, such as being able to take someone’s temperature, weight, height, and vitals for someone working in an entry-level health care position</td>
</tr>
<tr>
<td>Further Education and Training</td>
<td>◆ Being able to seek out, apply for, and succeed at postsecondary educational opportunities, such as college, vocational and technical schools, and continuing education</td>
</tr>
</tbody>
</table>

*Note:* Based on Sitlington, Clark, & Kolstoe, 2000.
RESOURCES
RESOURCES BY TOPIC AREA

Cartooning

Incredible 5-Point Scale

Power Card Strategy

Sensory Assessment Measures
Social Skills Curricula


Social Stories


Transition


GENERAL RESOURCES

Books

Web Sites

MAAP: More Advanced Individuals with Autism/Asperger Syndrome and Pervasive Developmental Disorder
[www.maapservices.org](http://www.maapservices.org)

This international support organization provides resources for individuals with high-functioning autism, Asperger Syndrome, and pervasive developmental disorders - not otherwise specified. The site offers an overview of its annual conference and its quarterly newsletters.
OASIS: Online Asperger Syndrome Information and Support
www.aspergerssyndrome.org/

The parents of children with Asperger Syndrome created this user-friendly Web site that offers information related to legal resources and links to diagnosis information, classroom management, research, parent supports, and projects.

The Council for Exceptional Children
www.cec.sped.org

The Council for Exceptional Children (CEC) has numerous books about autism spectrum disorders and IEPs, along with information on professional development and training for teachers. This site also features discussion forums and information on advocacy and special education legislation.

Organization for Autism Research
www.researchautism.org

OAR is an organization formed and led by parents and grandparents of children and adults with autism. Its mission is to put applied research to work providing answers to questions that parents, families, individuals with autism, teachers, and caregivers confront each day. OAR accomplishes this by funding research studies designed to investigate treatments, educational approaches, and statistical aspects of the autism community. The Web site contains monthly newsletters, a comprehensive list of resources, and an overview of practical research underway in autism spectrum disorders.

GRASP: Global and Regional Asperger Syndrome Partnership
www.grasp.org

GRASP is an educational and advocacy organization serving individuals on the autism spectrum. Founded and operated by individuals with Asperger Syndrome and high-functioning autism, GRASP strives to educate the public about ASDs, provide a supportive environment for persons on the spectrum, and celebrate the unique strengths and abilities these individuals possess.

Autism Society of America
www.autism-society.org

ASA promotes community involvement of individuals with autism spectrum disorders through education, advocacy, and public awareness campaigns. The ASA Web site lists state and local autism societies and provides resources for parents, including legislative information, and answers to frequently asked questions from parents about autism spectrum disorders.

Multimedia

Coulter Video. (2004). *Asperger Syndrome Dad: Becoming an even better father to your child with AS.* Winston-Salem, NC: Author. (VCR)
REFERENCES
REFERENCES


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¹ Specific citations were not included in the text for ease of reading. These items, plus all those listed in “Resources,” were used as source material during the writing of this guide.


Asperger Syndrome is a complex disorder that presents numerous challenges within the inclusive classroom setting. This book provides guidelines for meeting the needs of the child with Asperger Syndrome in your class, from elementary to high school. Specifically, the guide contains information on:

- Understanding common characteristics of Asperger Syndrome and how they affect a child
- Promoting positive social goals and educating peers to avoid bullying
- Cooperating with parents and the student’s IEP team
- Implementing strategies to better facilitate learning in the student with Asperger Syndrome

The Organization for Autism Research (OAR) is a national nonprofit organization formed and led by relatives of children and adults with autism and Asperger Syndrome. OAR is dedicated to promoting research that can be applied to help families, educators, caregivers, and individuals with autism find much-needed answers to their immediate and urgent questions. Committed to excellence in its service to the autism community, OAR seeks to fund applied research that will make a difference in individual lives; provide information that is timely, useful, and cost efficient; and offer opportunities for the autism community to collaborate and make advances together.