

2-17-2015

Increasing Effective Service and Support for Students on the Autism Spectrum

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Recommended Citation

Urbani, Jacquelyn; Brown, Billye; and Arnold, Colleen, "Increasing Effective Service and Support for Students on the Autism Spectrum" (2015). *Collected Faculty and Staff Scholarship*. 56.

<https://scholar.dominican.edu/all-faculty/56>

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Increasing Effective Service and Support for Students on the Autism Spectrum

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What is Autism?

Core Domains (DSM-V, 2013):

1. Differences in social communication and social interaction



What is Autism?

Core Domains (DSM-V, 2013):

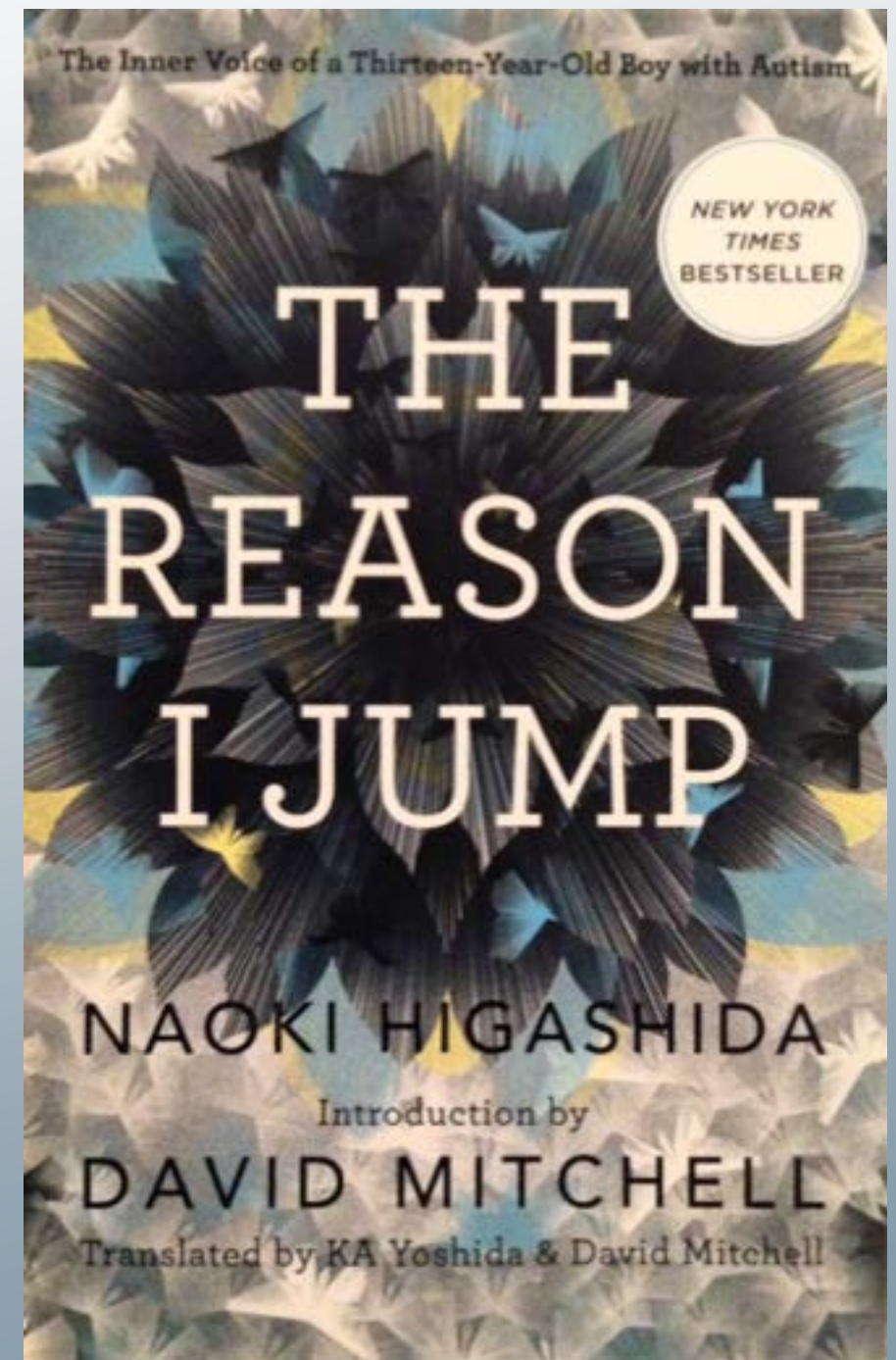
1. Differences in social communication and social interaction
2. Restricted, repetitive patterns of behavior, interest, or activities



What is Autism?

“When I was small,
I didn’t even now
that I was a kid with special needs.
How did I find out?
By other people telling me
that I was different from everyone else,
and that this was a problem.”

(Higashida, p. 3)



What is Autism?

1. Differences in social communication and social interaction

Social-emotional reciprocity

- Failure of back and forth conversation
- Reduced sharing of interests, emotions, or affect
- Failure to initiate or respond to social interactions



What is Autism?

1. Differences in social communication and social interaction

Social-emotional reciprocity

“In ‘set-pattern’ conversations, we manage much better;
. . . conversation is such hard work!”

(Higashida, p. 13)



What is Autism?

1. Differences in social communication and social interaction

Nonverbal communication for social interaction

- Poorly integrated verbal and nonverbal communication
- Abnormalities in eye contact, body language, use of gestures
- Lack of facial expressions



What is Autism?

1. Differences in social communication and social interaction

Nonverbal communication for social interaction

“What we’re actually looking at is the other person’s voice. . . we’re trying to listen to the other person with all of our sense organs.”

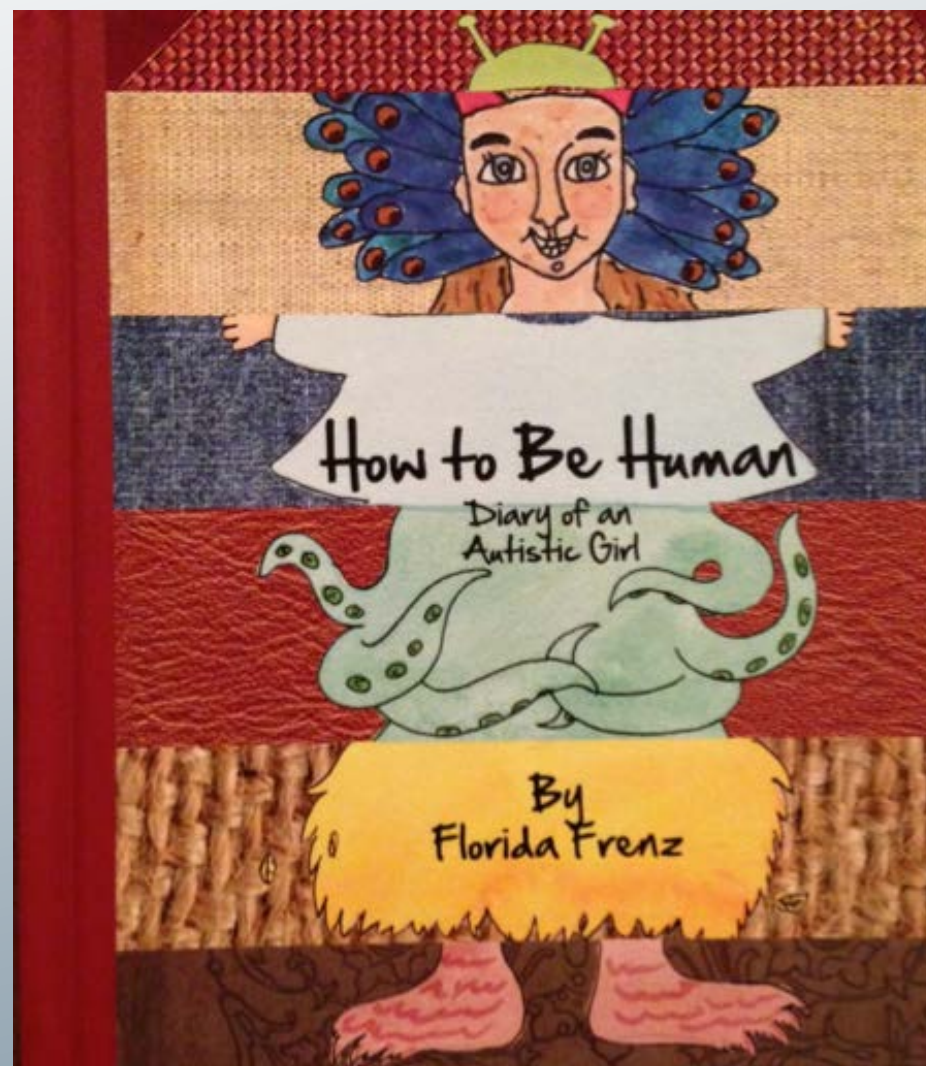
(Higashida, p. 25)



What is Autism?

1. Differences in social communication and social interaction

Nonverbal communication for social interaction



What is Autism?

1. Differences in social communication and social interaction

Developing, maintaining, understanding relationships

- Difficulty adjusting to various social contexts
- Difficulty in making friends
- *Seeming* lack of interest in peers





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KATHY HOOPMANN

**all cats have
asperger
syndrome**



A young child with red hair is sleeping on a bed, tucked under a beige blanket. A long line of various toys, including rubber ducks, a red toy car, and a small clock, is arranged in a curve along the head of the bed.

What is Autism?

2. Restricted, repetitive behavior, interests, or activities

Stereotyped or repetitive motor movements

- Use of objects (lining up toys)
- Echolalia
- Idiosyncratic phrases



What is Autism?

2. Restricted, repetitive behavior, interests, or activities

Stereotyped or repetitive motor movements

- Use of objects (lining up toys)
- Echolalia

“Firing the question back is a way of sifting through our memories to pick up clues about what the questioner is asking.”

(Higashida, p. 12)

What is Autism?

2. Restricted, repetitive behavior, interests, or activities

Insistence on sameness to routines, patterns of behavior or speech

- Distress at small changes
- Difficulty with transitions
- Need to take same route, eat same food daily



What is Autism?

2. Restricted, repetitive behavior, interests, or activities

Insistence on sameness to routines, patterns of behavior or speech

“Unchanging things are comforting,
and there’s something beautiful about that.”

(Higashida, p. 68)

What is Autism?

2. Restricted, repetitive behavior, interests, or activities

Highly restricted, fixated interest; abnormal in intensity or focus

- Strong attachment to objects
- Perseverate on particular interests



What is Autism?

2. Restricted, repetitive behavior, interests, or activities

- ***Hyper- or hypo-reactivity to sensory input; unusual interest in sensory aspects of environment***
 - Apparent indifference to pain/temperature
 - Adverse response to specific sounds, textures
 - Excessive smelling, touching of objects
 - Visual fascination with lights, movement



What is Autism?

Accompanying medical issues:

- Sleep disorders
- Seizure disorders
- Gastro-intestinal disorders
- Visual impairment
- Urinary tract dysfunction
- Obesity



What is Autism?

May occur with or without accompanying issues:

- Intellectual disability
- Language impairment
- Other neuro-developmental, mental, or behavioral disorder

What is Autism?

Autism is defined by patterns of behavior,
but these behaviors are *very diverse*!



Spectrum of Autism: Social Interaction



Aloof



**Active,
“Odd”**



Spectrum of Autism: Communication



Nonverbal



Verbal

Prevalence of Autism

1 in 150
(2002)



1 in 125
(2004)



1 in 110
(2006)



1 in 88
(2008)



1 in 68
(2010)

CDC, 2010

Prevalence of Autism

- Occurs across all races, ethnicities, and socioeconomic groups
- Is 5x more common in boys (1 in 42) than among girls (1 in 189)
- 1 in 6 US children had a developmental disability, ranging from speech language impairment, intellectual disabilities, and autism



CDC, 2010

What is Autism?

Autism is defined by patterns of behavior,
but these behaviors are *very diverse*!

“If you’ve met one person with autism, you’ve met ONE person with autism.”
~Temple Grandin





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TEMPLE GRANDIN, Ph.D.

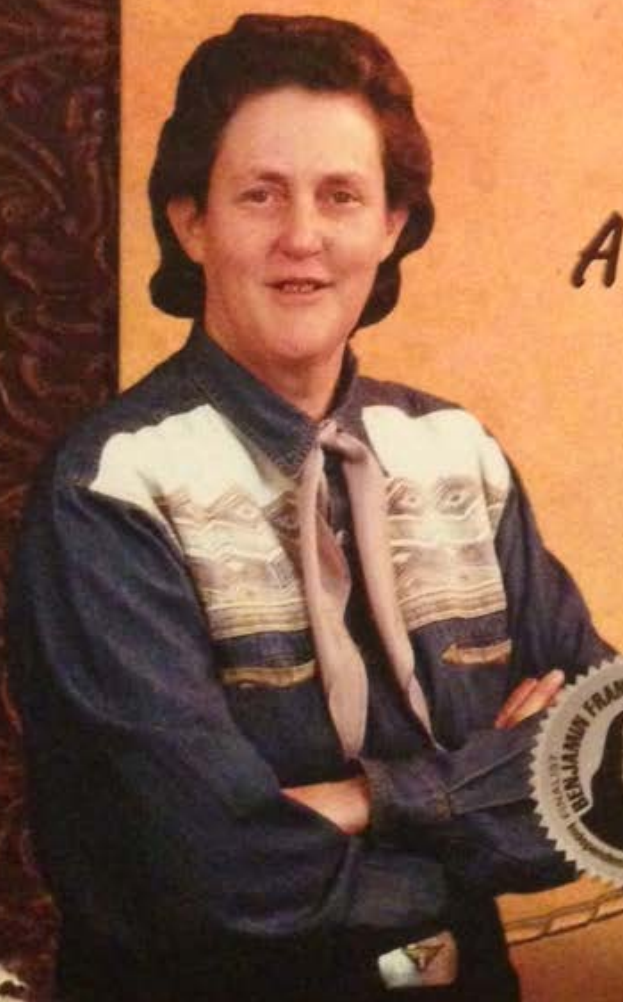
The HBO movie based on her life brought in 7 Emmys,
a Golden Globe, and a Screen Actors Guild Award!

The Way I See It

REVISED & EXPANDED
2nd EDITION
with 14 New Articles

*A Personal Look
at Autism &
Asperger's*

Foreword by EXECUTIVE PRODUCER
EMILY GERSON SAINES



What is Autism?

I want . . . “the world to see that having any type of autism is not something to be ashamed of, and with a little effort, anyone with autism can fit in and even be helpful to others in unimaginable ways.”

~Garrett Lees, HS student



Autistic Cognitive Style

- The cognitive style of many individuals with ASD is monotropic (Lesser & Murray (1998)).
- Monotropic interests are narrow, deep, nonsocial, and unconnected to each other; they are generally individually aroused and involve uni-tasking.
- Individuals with ASD gain a sense of safety and control from mastery and gathering of information in their areas of interest.



Autistic Cognitive Style

- A different way of learning, not a dysfunctional way
- Different gifts and different limitations
- Different interest systems and different allocations of attention



Autistic Cognitive Style

Because of the differing cognitive style of persons with ASD, some commonly used interventions during times of distress, trauma, crisis or chaos can be inappropriate and can worsen the situation rather than provide relief.



Theory of Mind and Perspective Taking

Terminology:

- **Mindblindness:** unable to perceive that others have thoughts or feelings.
- **Perspective taking:** understanding a point of view of another person.
- **Social cognition:** Social “smarts:” written expression, sharing space, understanding thoughts and actions of fictional characters.
- **Theory of Mind:** Understanding of your own and other people’s thoughts, emotions, motives, personality, and belief system.

Perspective Taking Attributes

Central Coherence: big picture thinking – individuals with ASD think in parts.

Executive Functioning: practical problem solving techniques - individuals with ASD need a problem solving formula.

Theory of Mind and Perspective Taking: ability to intuitively track what others know and think during personal interactions. Individuals with ASD lack the ability – unless taught – to be concerned with others' perceptions.

Executive Function Skills

Brain Function Skills that allow us to:

Attend: ability to focus and sustain attention to task; tune out distractions; shift attention between task components;



Demonstrate Inhibition: ability to control impulsive behaviors; evaluate a situation before responding; plan responses before acting;

Initiate & Persist: ability to begin, continue, and finish a task with or without prompts (verbal, physical);

Select Goals: ability to select beneficial and realistic goals that match his/her skill level, time constraints, available materials and opportunity;

Executive Function Skills

Brain Function Skills that allow us to:

Plan & Organize: ability to establish a strategic approach to a problem; identify all necessary steps to achieve a desired outcome.



Be Flexible: ability to adapt a new strategy when faced with changing situations (in environment, with task requirements);

Execute & Attain Goals: ability to demonstrate deliberate, purposeful effort toward a desired outcome; and

Self-Regulate: ability to recognize and correct errors, predict outcomes of one's own behaviors/words, anticipate consequences of ineffective strategies/plans; recognize need for help/cues.



Considerations Regarding Inappropriate Behaviors

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- **Behavior** that may be perceived as inappropriate **is** a means of **communication**
- An increase in unusual or difficult behaviors probably indicates an increase in stress. Sometimes stress is caused by feeling a loss of control.
- Use positive and chronologically age-appropriate behavior procedures. Consistent treatment and expectations from everyone is vital.



Considerations Regarding Inappropriate Behaviors

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“ . . . Inside we’re aching and hurting
because we know we don’t even have control
over what our own bodies are doing.

“ . . . please handle and approach our behavioral issues with a strong
faith that they are definitely going to pass, at some point in the
future. . .

And until we reach that point,
we’d like you to stick with it,
and stick with us.”

(Higashida, p. 100-101)



Considerations Regarding Inappropriate Behaviors

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- Don't take misbehavior personally.
- The high-functioning person with autism is not a manipulative, scheming person who is trying to make life difficult.
- Usually misbehavior is the result of efforts to survive experiences which may be confusing, disorienting, or frightening.
- People with autism are, by virtue of their handicap, egocentric and have extreme difficulty reading the reactions of others.

Assisting Students with ASD to Self-Regulate

**Supports will vary based upon the student's needs,
but some strategies can be generalized to help all students.**

- Model self control in words and actions when you are frustrated.
- Provide structure and predictability.
- Anticipate transitions and announce changes in classroom topics, schedules, activities.
- Provide positive verbal support/statements.
- Seek assistance from Office of Disability Services and/or Special Education professors.

What does the research say?

- McKeon, Alpern, Zager (2013)
- Administered a survey to professors at a private urban university
- Research was to help professors work more successfully with students with Autism Spectrum Disorder
- Survey showed most frequent behaviors witnessed as areas of struggle were:
 - Language and Communication
 - Executive Function



What does the research say?

“Students with learning disabilities may be bright, participate well, and in general do well with the accommodated testing. The students certainly changed my stereotype of autistic people. I had always thought of them as somewhat remote, unrelated, un-responsive, etc. The two I had this semester were extremely friendly and related, to me and the other students. One is so connected he has been hired as a freshman orientation leader. He will do a fine job.”

Pg. 356

What does the research say?

- Professors' Teaching Strategies
 - 50% adapted instructional styles
 - 66% provided support for long-term assignments and allowed rewrites
 - 81% reported providing extra opportunities for individual conferencing

Possible Accommodations

- Extended time
- Distraction free testing environment
- Note-takers for lectures
- Access to assistive technology (AT)



Interventions for Success

“To be able to study like other people,
we need more time and different strategies and approaches.

And those people who help us study,
they actually need more patience than we do.

They need to understand our eagerness to learn,
even though from the outside we may not appear to be keen
students.

But we are.
We, too, want to grow.”

(Higashida, pp. 81-82)

Interventions for Success

- Clear guidelines and expectations for assignments given in both oral and written form
- Providing an exemplar to clarify assignment expectations
- More frequent breaks allowed
- Pre-prepared questions presented to the student prior to class (privately), to give time for processing and planning

Interventions for Success

- Clear guidelines and expectations for assignments given in both oral and written form
- Providing an exemplar to clarify assignment expectations
- More frequent breaks allowed
- Pre-prepared questions presented to the student prior to class (privately), to give time for processing and planning

“By the time it’s our turn to speak,
the reply we wanted to make has often upped and
vanished from our heads.”

(Higashida, p. 18)

Interventions for Success

- Structured conversations for group work; sentence stems, questions posted for reference before/during discussion
- Promote collaboration and social engagement by assigning roles during group work



Interventions for Success

“When planning activities and discussions, professors should know that group work can often be difficult and very overwhelming for students with autism.”

~college student with autism



Facilitator:	Timekeeper:	Recorder:	Researcher:
<ul style="list-style-type: none"> • Moderates discussion • Ensures participation 	<ul style="list-style-type: none"> • Sets agenda • Keeps members on task 	<ul style="list-style-type: none"> • Takes notes • Prepares conclusion 	<ul style="list-style-type: none"> • Acts as liason between group and instructor
Topic(s)	Time frame(s)	Facts / Concepts / Conclusions	Information Needed

Interventions for Success

- Using clear concrete language, limiting sarcasm, play on words
- Attention to sensory input (seating, lighting, noise level in the classroom)
- Provide frequent and varied assessment with a variety of forms



Interventions for Success

- Set a private goal for participation to get student engaged, or to encourage equal participation of all students
- Check-in for understanding
- Include visual organizers with explicit content
- When changes to schedule occur, give advanced notice via Moodle



Interventions for Success

- When feasible, create a consistent class structure with some level of predictability
- Provide support for long-term assignments, such as chunking and suggested short term due dates
- Have patience when questions are asked, post information regarding assignments in multiple formats (Moodle, syllabus, verbal discussion)



Interventions for Success

“Really the most important thing that professors can do is talk to the student to find out what what works best for them and what doesn't work as well.

They need to take the time to get to know their student and not just judge them because they have a disability.”

~college student with autism



Questions?

I want . . . “the world to see that having any type of autism is not something to be ashamed of, and with a little effort, anyone with autism can fit in and even be helpful to others in unimaginable ways.”

~Garrett Lees, HS student



References

Grandin, T. (2011). *The way I see it: A personal look at autism & Asperger's* (2nd ed).

Arlington, TX: Future Horizons, Inc.

Frenz, F. (2013). *How to be human: Diary of an autistic girl*. Berkeley: Creston Books.

Higashida, N. (2013). Translated by David Mitchell. *The reason I jump*. New York:

Random House.

Hoopman, K. (2006). *All cats have Asperger Syndrome*. Philadelphia: Jessica Kingsley Publishing.

Hoopman, K. (2013). *Inside Asperger's looking out*. Philadelphia: Jessica

References

Council for Exceptional Children
Presentations at the Annual Conference, Philadelphia, PA
April 2014

- Baumann, M. *Autism Spectrum Disorders: Brain development and contributions of intervention.*
- Bambara, L. M., Kunnch, C., Cole, C., Tsai, S. C., Ayad, El, & Lubar, A. *Improving the social-communication skills of high school students with Autism through peer mediation.*
- Geller, N., & Reynolds, R. R. *Changes in DMS-5: New directions for comprehensive diagnostic process.*

Resources

MIND Institute, UC Davis

National Professional Development Center on Autism Spectrum Disorders

Easter Seals

STAR Autism Support

Autism Speaks

Thinking Person's Guide to Autism

CA Department of Education