

Aspergers Syndrome: A Classroom Guide

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Glossary

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Let's Learn About Aspergers Syndrome: A Video Guide

You may be asking yourself, what is Aspergers? Is that different from a student with Autism Spectrum Disorder? Is it an intellectual disability? With so many individual student needs, it can be overwhelming in understanding them all. I am here to help. Please click on the following link, and let's review the details of Aspergers Syndrome:

<https://www.powtoon.com/show/bEzIBFmZUre/a-classroom-guide/>

or

<https://www.youtube.com/watch?v=2YymvTBTtiM&rel=0>

Breaking it Down: Common Terms

1. **Aspergers Syndrome** – a pervasive developmental disorder characterized by severe and sustained impairments in social interaction and the development of restricted, repetitive patterns of behavior, interests, and activities, in the absence of clinically significant delays or deviance in language acquisition and delays in cognitive functioning
2. **Autism Spectrum Disorder** – neurodevelopmental disorder that impairs ability to communicate and interact with others. It includes restricted, repetitive behaviors, interests. Impairment is significant in social, occupational, and other areas of functioning.
3. **Cognitive Behavioral Therapy** – a type of psychotherapy that aims at aiding emotion management and controlling obsessive interested and repetitive routines
4. **Diagnostic Statistical Manual (DSM-V)** – standard classification of mental disorders used by mental professionals in the United States. It contains a listing of diagnostic criteria for every psychiatric disorder recognized in the U.S. healthcare system
5. **Occupational Therapy** – a form of therapy that aids in the performance of activities required in daily living
6. **Pervasive Developmental Disorder – (PDD)** – a group of disorders characterized by delays in the development of socialization and communication skills
7. **Physical Therapy** – treatment by physical methods such as exercise or massages to improve physical function
8. **Prevalence** - total number of cases of a disease in a given population at a specific time
9. **Social Skills Therapy** – form of group therapy that teaches skills needed to interact successfully in social situations (NINDS)
10. **Treatment** – a session of medical care; can include medications and various therapy types

How Does Aspergers Appear?

A Case Study

Brian is a typical school-aged sixth grade boy. He enjoys pizza, hamburgers, and most of all, technology. Brian loves his routines, more than most. He enjoys doing the same thing, every day. For instance, Brian struggles when he has a substitute teacher. Unannounced fire drills may be exciting for others, but for Brian, these can be devastating to a great day. Brian also faces challenges with his peers. He often makes little eye contact during interaction, and fails to understand nonliteral phrases. When overwhelmed, Brian often runs away. If other peers start to tease him, Brian may get angry, or run away to escape the situation. This frustration often leads Brian to become a bit physical with his peers, thus landing him in greater trouble.

During successful social interaction, Brian often centers the conversation on technology. Whether it is Minecraft or Xbox, he cannot seem to focus on other topics. If his technology is taken away, Brian often states that his life is over. It truly is his favorite activity. In regards to school, Brian is not disadvantaged. With the aid of special education teachers and an IEP, Brian completes assignments with success. Brian also attends therapy outside of school to cope with social deficits and obsessive patterns.

The Rules: The Dos and Don'ts of Aspergers Syndrome

The Dos

- Develop and establish a consistent, structured routine
- Have clear expectations for classroom behavior
- Provide structured choices to aid in the development of self-help skills
- Plan ahead to minimize stress and maximize coping when unexpected events occur
- Find high motivating reinforcement to promote pro-social behavior
- Promote social learning opportunities to aid in the development of social skills
- Have an established plan of action for events such as loss of control, aggression, emotional break downs, and bullying situations
- Provide a “safe zone” for moments where students with AS can go when overwhelmed either emotionally or physically (sensory issues)

The Don'ts

- Do not be inconsistent with student expectations and routines
- Do not overly use figurative language as abstract thinking can be a challenge
- Do not lose your patience when behaviors become challenging
- Do not limit friendships to other children with special needs, but promote inclusion
- Do not assume behaviors are intentional disobedience, but consider factors such as sound sensitivity, environment, and/or social anxiety or frustration
- Do not take lack of eye contact as disrespect, but as a skill to build on
- Do not develop student goals without the context of parents and/or family
- Do not set up student for high risk, small reward situations, especially in regards to peer interactions

Aiding Students with Aspergers Syndrome: Classroom Techniques

Part One: Teaching Social Skills in the Classroom

Two core deficits in children with Aspergers Syndrome (AS) are social interaction and social communication. Research has shown that students with AS benefit most from learning new social skills in appropriate and natural contexts. One can then conclude that social interactions within the classroom can aid students with AS. One could possibly foster social skills in the classroom by following an established framework. A framework discussed by Whitby, Ogilvie, and Mancil (2012) includes the topics of direct instruction, collaboration, and pro-social interactions. The following steps will break down where one can work in social interaction teaching as well as provided instructions and examples. Keep in mind each student is unique, and all instruction should be based off of specific Individualized Education Plans (IEPs).

1. Choosing a Specific Social Skills Curriculum

Direct instruction in the general education classroom involves using a specific curriculum aimed to foster social skills in children with AS. By utilizing a research-based curriculum, you insure the instruction targets the core deficits.

Whitby et al. (2012) suggest the four following guidelines in choosing a curriculum:

- (1) individual characteristics of the student such as age, cognitive level, behavior and social skill level
- (2) systems of reinforcement to promote independence and increase the likelihood of generalization

- (3) use of multiple trainers (can include peers)
- (4) multiple teaching modalities

2. Provide Home-Base Learning

Home base learning is defined as any place where a child feels secure. Providing a home base for your student at school allows them to have a “safe place.” It provides the student and teacher a time to work proactively together, in order to prevent potential problems during the school day. Additionally, it can act as a place for the child to go to get a break from a stressful event, regain emotional control, or recover from losing control. The following chart provides instructions and suggestions on creating a home-base for a student.

Instruction	Suggestion
You should organize the home base with necessary equipment for the child to start the day	One may want to aid the student by providing a visual schedule for the day. This can aid in preparation.
The home base should be safe, secure, and familiar to the child.	One can aim to make the home base to have adequate lighting, technology (if needed), and few visual distractions.
You can provide direct social skill instruction at the home base as well.	One should always promote self-advocacy in the child. Self-advocacy can be as simple as setting personal goals to monitor. Additionally, utilize an established curriculum when providing social skill instruction.

3. Providing Direct Instruction

Direct instruction can be provided in the general education classroom. The skill can be taught one-on-one and then reinforced and highlighted throughout the school day. Examples of highlighting the skills throughout the day include: pointing out examples, praising positive efforts, or other reinforcement. One can break down social skills into steps for students. These steps can be provided both verbally and in print. Opportunities

should be provided to practice skills. These opportunities can include role play, question and answer games, and video modeling activities.

4. **Conceptualizing Social Skills in Natural Settings**

One will want to pair direct instruction with conceptualization of social skills. A great way to do this is through the utilization of peers! There are two types of peer mediations described by Whitby et al. (2012): cooperative learning and peer tutoring. Cooperative learning consisted of students working together and assuming responsibility for their peers learning in addition to their own.

The following steps aid to ensure setting up a cooperative learning that benefits students with AS:

- (1) Insuring the students with ASD/AS are not seated on the outside of the group
- (2) carefully selecting peers for inclusion in the group
 - a. SUGGESTION: choose careful and cooperative students to be in the group
 - b. SUGGESTION: teach peers strategies in interacting with students with AS
- (3) designating a central role to the child with AS to promote interaction
 - a. SUGGESTION: provide role cards to all students in the group as well as a task completion list (this will give an additional visual support for the student with AS)
- (4) provide a high level of reinforcement and social praise to not only the student with AS but the group as a whole

The second peer strategy is that of peer tutoring. Peer tutoring includes the pairing of students in structured learning tasks to promote incidental learning of social skills. Peer tutoring

allows social skills to be taught in a natural classroom setting. For more guidance, one can refer to the Peer Assisted Learning Strategies (PALS) Guidelines to obtain an example of peer tutoring as well as procedures for implementation (IRIS Center, 2008).

5. **Pro-Social Modeling**

Teachers can further aid students with AS through pro-social modeling. Students can benefit from a positive teacher relationship in which the teacher models the positive relationship through action and words. The teacher can even train other staff members, such as cafeteria staff to model positive relationships as well.

Part Two: Aid Students in Coping with Stimuli Sensory

Menzinger and Jackson (209) suggestions for minimizing the negative effects of various sensory stimuli:

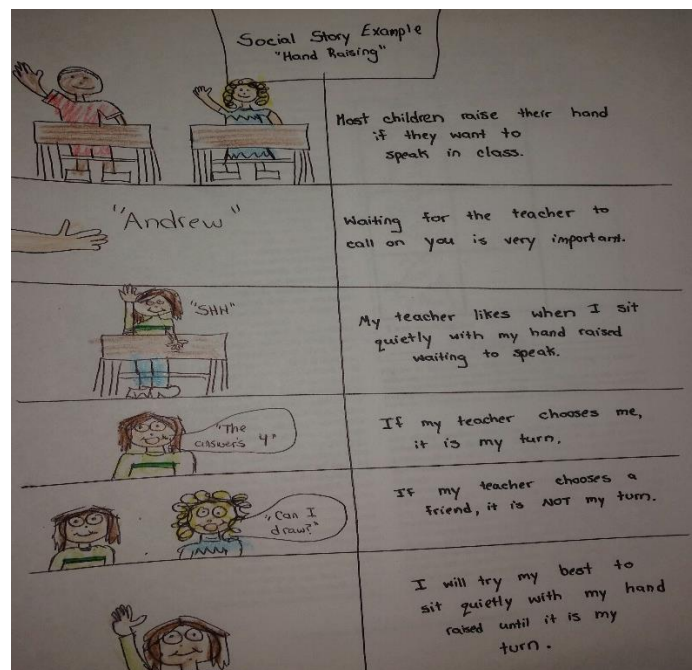
- Establish a place of safety for every pupil who needs it
 - this enables the pupil to go somewhere to calm down in times of overstimulation and distress
 - in doing so, one must ensure that it will never be used by anyone else without explicit permission by the student
- Ensure students need to have a clear understanding of when and where potential sensory issues will occur. For example, school bells, fire alarms, lock down drills, etc
 - Students need to be aware of staff who will be present to offer help and support
- Provide daily reflections to review how certain situations could have been dealt with, and how to prepare for the day to come
- Create a pictorial communication that the student can access during times of high anxiety and stress

Part III: Managing Behavior in Students with Aspergers Syndrome

Various techniques can be utilized to aid behaviors in the classroom. Research has supported three techniques that can be utilized to for students with AS. These techniques include social stories, visual schedules, and student self-management.

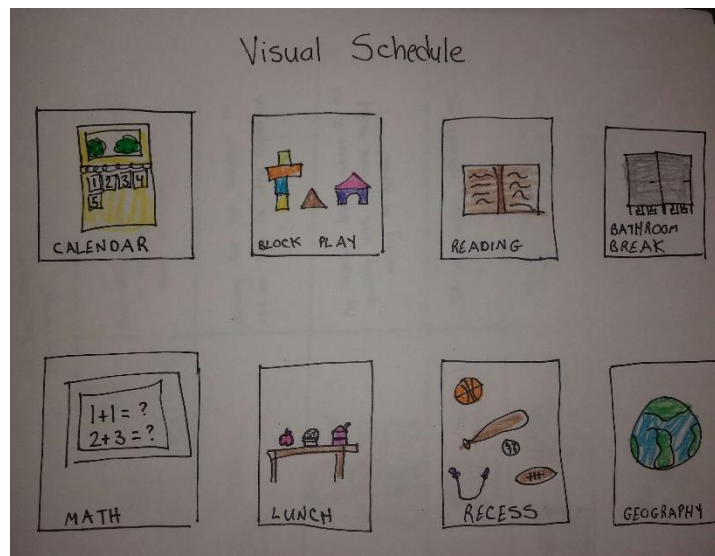
(1) SOCIAL STORIES

Social stories as defined by Schneider and Goldstein (2010) are short stories that describe a situation or behavior that may be ambiguous, confusing, or problematic for the individual. Social stories should include information about the target behavior, and how the teacher may think or feel when it occurred. Target behaviors can include sitting in one's seat, raising your hand, not speaking out of turn, no aggressive behaviors, etc. Each story should be printed with words and pictures/symbols on a laminated paper the student can carry with them as a visual reminder, if needed throughout the day. An example of a social story for raising your hand and waiting to be called on can be seen below:



(2) Visual Schedules

Visual schedules allow students to have a pictorial reminders of their daily schedule and routine. The visual schedule can be adapted from the social story by using pictures and short phrases. The schedule can be about an event, class period, or full day. One can obtain a foam board and create various laminated squares. Each square can depict a different task or instruction. This allows for easy adaptation. The student can also peel off tasks as they are completed as a form of self-monitoring. An example of a visual schedule can be found below.



(3) Token Economy

Shogren et al. suggested the utilization of a token economy for aiding behaviors in children with AS. The following steps should be utilized:

1. design a list of target behaviors (“earners”)
2. Identify undesirable behaviors (“withdrawals”)
3. Select reinforcers and fines
4. select tokens

5. chose form or containers
6. incorporate bonus points
7. organize the exchange of points or tokens

*ensure all behaviors are definable

Example of a token system for a second grader is below:

Token Economy

Target Behavior	
sitting in your seat	
raise hand before speaking	
keep hands to self	
use kind words	

Need 3: 😊😊😊

Working for: 5 mins iPad Time

The Foundation of Techniques: A Review of the Literature

Flood, A.M., Hare, D.J., & Wallis, P. (2011). An investigation into social information processing in young people with aspergers syndrome. *Autism: The International Journal of Research and Practice*, 15(5), 601-624. doi: 10.1177/1362361310387803

This article's author is a clinical psychologist with specialization in children and adults with intellectual disabilities and autism spectrum disorders. Flood is a part of the Manchester Learning Disability Partnership where she worked on a multi-disciplinary team providing work in assessment, consultation, and intervention. The article aims to further investigate the utility of using non-autism spectrum disorder models of social cognition to investigate the specific difficulties of Asperger syndrome. Results found evidence to suggest the children with Asperger syndrome exhibited more internal, global, and stable attributions to various presented scenarios. Additionally, the research supported varied response generation and response evaluation stages of the information processing model in children with Asperger syndrome.

The study informs teachers in regards to the way children with Aspergers syndrome process norms in regards to social information and social functioning. Teachers can use the results to inform a social skill intervention focused on the interpretation of social cues and behaviors. For instance, teachers can aid children with Aspergers syndrome in working through solutions to specific social problems and evaluating the solutions discussed in regards to the outcomes. Additionally, the teachers can practice inclusion, while discussing the importance of such interactions with the class as research supports benefits of such interactions.

Fombonne, E. (2005). The changing epidemiology of autism. *Journal of Applied Research in Intellectual Disabilities*, 18(4), 281-294. doi: 10.1111/j.1468-3148.2005.00266.x

The article is a result of a French psychiatrist and epidemiologist. Fombonne acts as the Director of Psychiatry for the Montreal Children's Hospital as well as the Canada Research Chair in Child Psychiatry. The author published this article to provide an up-to-date review of the methodological features and significant results of epidemiology studies in relation to Autism. Autism spectrum disorders are estimated to be 0.6% in prevalence, including one fifth of that prevalence being Aspergers syndrome. The article discusses that an increased about of autism and related disorders can possibly be attributed to changes in diagnostic criteria and concepts, in addition to improved identification.

Teachers can use this study as a foundation for their knowledge of autism and related disorders, such as Aspergers syndrome. With data on epidemiology, teachers can grasp an understanding of the degree to which risk factors, symptoms, and interventions affect

the population as a whole. Teachers can utilize this data to explain to others how prevalent Aspergers is as a diagnosis, and thus how interventions are essential to have in place in order to aid children.

Menzinger, B., & Jackson, R. (2009). The effect of light intensity and noise on the classroom

behavior of pupils with Asperger syndrome. *Support for Learning*, 24(4), 170-175. doi:

10.1111/j.1467-9604.2009.01420.x

This article is based on the author's experience in special needs education. Menzinger governs on the Council of Management at Camphill School Aberdeen for children and young adults with special needs. The article aims to explain the behavioral response of students with Aspergers syndrome who have light and sound sensitivity. The author establishes numerous practical coping techniques one could utilize in the classroom for students with Aspergers syndrome. For instance, the teacher can establish a place of safety for those students who are sensitive to light and sound.

This article lends information to use in adjusting teachers' educational environments and practices to make accommodations for children with Aspergers syndrome. The several coping techniques described can be utilized in any classroom or after-school program. Policy makers could utilize this information to provide schools and programs with resources and funding needed to incorporate the adjustments as well. The article highlights some techniques that practitioners can utilize in order to foster an inclusionary environment. The techniques can be found in bullet point form in *Part V: Aiding Students with Aspergers Syndrome: Classroom Techniques*

Reilly, C., Campbell, A., & Keran, P. (2009). Screening for Asperger syndrome in school-age

children: issues and instruments. *Educational Psychology in Practice*, 25(1), 37-52. doi:

10.1080/02667360802697589

The article is based on the author's experience as an educational psychologist. Reilly undergoes research at St. Michael's House Services, which provides development and community-based services for people with an intellectual disability in Ireland. The article aims to review a number of screening instruments for Asperger syndrome as well as highlight the need for surveillance of symptoms among professionals who work in educational settings. The author discuss a need to screen school-aged children at risk for Aspergers syndrome as screening is often delayed until late adolescence. By not screening, the author states that children are put at risk for being bullied, and may develop depression and even become suicidal. The article concludes that educational psychologists need to have an understanding of the limits of current screening tools. To obtain a better idea of child context, the author urges professionals in the education setting to be familiar with the signs and symptoms of Asperger syndrome.

Teachers and educators should take steps to become trained about Aspergers syndrome. If teachers are able to identify possible signs and symptoms, they can act as an informant. Additionally, teachers should be aware of the limitations of such instruments as they will likely encounter a student who has undergone testing. The teacher should also be knowledgeable on not only the diagnosis, but the appropriate screening instruments as well. Parents may have concerns about testing, and one can thus understand how to discuss such concerns from the information presented in this article.

Schneider, N., & Goldstein, H. (2010). Using social stories and visual schedules to improve socially appropriate behaviors in children with autism. *Journal of Positive Behavior Interventions*, 12(3), 149-160. doi: 10.1177/1098300709334198

The article is based on the author's master's thesis completed at Florida State University. The article aims to investigate the effects of Social Stories on on-task behavior in inclusive classroom settings in three children with autism. The study results provide evidence to suggest that Social Stories are improved on-task behavior, however with variability. The study also found that visual schedules increase the effect of Social Stories in some children. The study concluded that Social Stories are an active tool that can have magnified positive outcomes when utilized with additional components.

Teachers can use these results to inform their classroom practices. The article presents teachers with the tools of Social Stories and Visual Schedules. The article explains that when working with a child with Aspergers syndrome, there is not one size fits all. Teachers should vary their techniques according to each child's needs. For instance, teachers can pair Social Stories with visual depictions for maximum outcomes.

Shogren, K.A., Lang, R., Machalicek, W., Rispoli, M.J., & O'Reilly, M. (2011). Self-versus teacher management of behavior for elementary school studies with Asperger syndrome: Impact on classroom behavior. *Journal of Positive Behavior Interventions*, 13(2), 87-96. doi: 10.1177/1098300710384508

The author, Karrie Shogren, Ph.D., is an Associate Professor in the Department of Special Education at the University of Kansas. The author's research aims to evaluate and compare the effectiveness of a token economy and self-management intervention in an inclusive kindergarten classroom. The study results suggest that both techniques were effective in increasing classroom appropriate behavior and engagement in two children with Aspergers syndrome. These improvements in the classroom were maintained by these students 2, 4 and 8 weeks upon study completion.

Teachers can try to utilize a token economy as well as a self-management intervention in their classrooms with children not only with Aspergers syndrome but with any child who

seems to be struggling. Teachers who also value ease of implementation and high student responsibility may want to use the social validity interview in regards to self-management systems. These systems can be implemented by teachers at an individual level or at the level of the class as a whole. The article gives teachers interventions to consider to promote appropriate classroom behavior. Interventions are discussed in Part V of the guide.

Sofronoff, K., Dark, E., & Stone, V. (2011). Social vulnerability and bullying in children with

Asperger syndrome. *Autism: The International Journal of Research and Practice*, 15(3), 355-372. doi: 10.1177/1362361310365070

The author's research is a product of her position as associate professor in the School of Psychology at The University of Queensland. The study aims to assess the factors that predict bullying for children with Asperger syndrome. The study also examines the social vulnerability of these children through questionnaires addressing traits such as anxiety, anger, social skills, and behavior problems. The study found that social vulnerability was a significant predictor of bullying in this population.

Teachers need to be aware that children with Asperger syndrome are at an increased risk for being bullied or victimized. Teachers can aid students by creating an intervention to address the two key factors: gullibility and credulity. Additionally, teachers can start an educational campaign or awareness campaign that is implemented school-wide. This would increase attention to subtle bullying. The article lends important information to teachers about the risk Asperger syndrome and its relation to being a victim of bullying.

Szatmari, P., Bryson, S., Duku, E., Vaccarella, L., Zwaigenbaum, L., Bennett, T., & Boyle, M.H.

(2009). Similar developmental trajectories in autism and Asperger syndrome: From early childhood to adolescence. *Journal of Child Psychology & Psychiatry*, 50(12), 1459-1467.

doi: 10.1111/j.1469-7610.2009.02123.x

The author is a Professor and Vice-Chair, Research, Department of Psychiatry and Behavioral Neurosciences at McMaster University. The author's research interests are in the area of Autism and Asperger syndrome. The author aims to chart the developmental trajectories of high-functioning children with autism spectrum disorders from early childhood to adolescence. The research differentiates autism from Asperger syndrome by the presence or absence of structural language impairment. The article concluded that utilizing structural language impairment is a useful distinction between children with autism spectrum disorder and children with Asperger syndrome. Results suggest that children with Asperger syndrome have better adaptive skills in socialization, communication, and daily living, as well as fewer autistic symptoms in adolescence.

The article supports the idea of the disorders being on the spectrum. Teachers will find it essential to distinguish which part of the spectrum a child is on, as it determines the variation in development over time. The article informs teachers that both children with Asperger syndrome and high-functioning autism improve at relatively the same rate, but tend to slow down in adolescence. This trajectory can aid teachers in developing and adapting interventions to suit student needs better. For instance, early intervention may lead to a greater improvement as trajectories of growth flatten out in late adolescence.

Whitby, P.J., Ogilvie, C., & Mancil, G.R. (2012). A framework for teaching social skills to students with Asperger syndrome in the general education classroom. *Journal on Developmental Disabilities, 18*(1), 62-72.

The article is published by a doctorate of exception education. The author is currently an Associate Professor of Special Education at the University of Arkansas. The article's purpose is to provide a framework for teaching social skills to students with Aspergers syndrome in a general education classroom. The article discusses the importance of utilizing a collaborative team across student contexts when teaching social skills. Social skill programing should consist of direct instruction, contextualized practice, and social reinforcement. Additionally, the article suggests the utilization of self-monitoring of student social goals.

Two main areas teachers should focus on are social interaction and social communication; these areas are difficult for children with Asperger syndrome. The article provides a framework across home and school for implementing a social skills program. Teachers can utilize this article as the foundation and then adapt to fit their students unique needs. Through collaboration, social skill development, and pro-social modeling, students with Asperger syndrome can meet their goals in the classroom and at home.

Williamson, S., Craig, J., & Slinger, R. (2008). Exploring the relationship between measures of self-esteem and psychological adjustment among adolescents with Asperger syndrome. *Autism: The International Journal of Research and Practice, 12*(4), 391-402. doi: 10.1177/1362361308091652

The article is based on the author's experience as a clinical psychologist at the Child Development Center in the Chesterfield Royal Hospital. The article examines the relationships between self-esteem and psychological adjustment comparing 19 adolescents with Asperger syndrome and 19 typically developing adolescents. The study found evidence to suggest that adolescents with Asperger syndrome had self-perceptions of being less socially competent than their typically developing peers. Adolescents with

Aspergers perceived themselves as less competent in athletic domains, and to receive less approval from their peers.

Teachers are informed about the self-esteem and psychological adjustment of their students with Asperger syndrome compared to their typical developing peers. Teachers can utilize the result to identify risk factor areas in regards to self-perception in students with Asperger syndrome. Teachers may want to establish social skill training in middle-childhood as an intervention prior to adolescents. Additionally, an awareness of Asperger syndrome would possibly be useful to inform typically developmental peers of the diagnosis and symptoms.

Trying it Out: A Lesson Plan

Objective:

To educate early elementary students on what it is like to be a student with Aspergers Syndrome.

Appropriate Age Level:

Elementary-age. Activity can be adapted for ages 5-8 years.

Type:

Group and individual mixed activity

Materials:

- a copy of Understanding Sam and Asperger Syndrome by Clarabelle van Niekerk & Liezl Venter
- large paper pad
- construction paper
- markers and crayons

Activity:

- 1) Have all the children sit in a circle
- 2) Read Understanding Sam and Asperger Syndrome to the children
- 3) Have the children go back to their seats and be given a piece of paper with markers/crayons
- 4) have each child make a list of strengths and weakness or likes and dislikes (can be drawn, written, or glued pictures depending on age range)
- 5) Have the children compare each other's lists to find similarities and differences
- 6) Have a discussion about how everyone is difference and differences make us who we are
- 7) Gather the children back into a circle and discuss the ten helpful tips listed in Understanding Sam and Asperger Syndrome by Clarabelle va Niekerk & Liezl Venter for interacting with students with Asperger Syndrome

EXAMPLE:

Expanding Knowledge: Additional Resources

<https://www.autismspeaks.org/>

http://www.ninds.nih.gov/disorders/asperger/detail_asperger.htm

<http://www.autism-society.org/what-is/aspergers-syndrome/>

www.kidshealth.org

http://www.nasponline.org/resources/principals/nasp_asperger.pdf

Additional Resources

Asperger Syndrome Fact Sheet. Retrieved March 10, 2014, from National Institute of

Neurological Disorders and Stroke website:

http://www.ninds.nih.gov/disorders/asperger/detail_asperger.htm#259173080

Autism Spectrum Disorder. Retrieved March 10, 2014, from the DSM-V website:

<http://www.dsm5.org/Documents/Autism%20Spectrum%20Disorder%20Fact%20Sheet.pdf>

Kerr, M.M. & Nelson, C.M. (2010) *Strategies for addressing behavior problems in the*

classroom, 6th Edition. Columbus, Ohio: Charles E. Merrill Publishing Company.