

STUDENTS WITH ASPERGER'S SYNDROME IN GENERAL EDUCATION CLASSROOMS

Jaclyn Reinking

ELEMENTARY GENERAL EDUCATION, SENIOR, INDIANA UNIVERSITY

ABSTRACT

Since the 1980's the number of students with Asperger's Syndrome (AS) have been seen in larger numbers in the general education classroom. Children with AS may resemble their counterparts without disabilities both physically and in IQ scores. However, students with AS have significant differences in social skills and their ability to function in the general classroom. Often unable to decipher social cues, verbal cues, and body language, these children are considered social outcasts. Regardless of the characteristics of children with AS, educators are required by law, specifically the Individual with Disabilities Education Act (IDEA), to provide a free and appropriate public education. This article provides characteristics of AS and evidence-based interventions teachers can implement in their general classrooms to help educate students with AS.

A current trend in society is the inclusion of students with disabilities in the general education classroom. One such group increasingly seen in the general educator's classroom is students with autistic spectrum disorder. According to Iovannone, Dunlap, Huber, and Kincaid (2003), approximately 7.5 out of 10,000 persons are diagnosed with a form of autism. Autism, one of several pervasive developmental disabilities, includes a range of mild to severe characteristics. Such characteristics include problems with social interactions, language

deficits, and cognitive disabilities. In addition, behaviors of children with autism may be stereotyped and inappropriate in nature because of the instant stimulation and satisfaction they receive from acting out such behaviors (Hallahan & Kauffman, 2003). Due to the wide range of autistic spectrum disorder, this discussion will focus on students with Asperger's Syndrome (AS), a high functioning form of autism. Students with AS will more likely be included in general education classrooms, while severe autistic cases, especially if violent in nature, will not

(Marks et al., 2003). Thus, all educators need to educate themselves about students with AS because they are required by the fundamental nature of Individuals with Disabilities Education Act (IDEA) to meet the needs of these children.

It is imperative for general educators to have knowledge of the disorder and skills to effectively educate a child with AS particularly because of the large increase of incidence rates of children with AS. Stephen Bauer (2000) notes that, "AS has been more common than "classic" Autism" (p. 2). He indicates that 20-25 per 10,000 children are diagnosed with the syndrome. One explanation for this increase is the large range of the autistic spectrum currently used. In other words, diagnostic criteria have improved making diagnoses more accurate and/or more specific. Previously, students may have been labeled with autism or other disorders rather than more specifically with AS (Safran, Safran, & Ellis, 2003). However, an undiagnosed child with AS may still appear slightly unusual in the general education classroom (Bauer, 2000). Therefore, experts and teachers need to be knowledgeable of AS symptoms, which will decrease the likelihood of misdiagnosis or undiagnosed students exhibiting AS symptoms that are simply labeled as slightly unusual characteristics (Safran et al., 2003).

DEFINITION AND CHARACTERISTICS OF A STUDENT WITH ASPERGER'S SYNDROME

Hallahan and Kauffman (2003), define AS as "a developmental disability in which language and cognitive development are normal but the child may show a lag in motor development and impairment in emotional and social development" (p. 513). To further clarify this definition, children with AS may develop language and thinking skills at a normal rate (a notable difference compared to other autistic

spectrum disorders) but have a difficult time using these skills to communicate and function well in society. Their intellectual capabilities range from around common IQ levels to the gifted student status. Thus, children with AS will not look different physically, but rather their disability becomes apparent through communication (Bauer, 2000).

In a world overwhelmed by obsession, routine behaviors, and/or specific rituals, children with AS have difficulties paying attention to their environmental surroundings. For instance, obsessive topics, such as cats, Sponge Bob Square Pants, or specific school subjects can consume a child with AS's thoughts (Safran et al., 2003) and may depict the child in his or her own world. As a result, children with AS also have difficulties participating in typical conversations with others. Their abnormal verbal communication can be associated with inaccurate or inappropriate volume levels, expressions, emotional responses, articulation, and/or rate of speech (Safran, 2002). Consequently, this neurological disorder causes problems for children with AS when trying to fit into a social atmosphere. Their often egotistical worlds direct their attentions away from reading social cues, verbal cues, and body language, which are vital aspects of interaction (Safran et al., 2003). Children with AS have impediments forming successful relationships with peers and may then become dispirited by difficulties associated with social interactions (Bauer, 2000).

PROBLEMS ASSOCIATED WITH IDENTIFICATION OF AS IN EARLY GRADES

Characteristics of AS make it difficult for professionals and families to accurately identify children with AS before the age of five years old. Often, preschool children with AS are overlooked because of their normal intellectual level and language

abilities (Safran et al., 2003). If AS symptoms are found in a child between the ages of three to five, such symptoms are also commonly associated with other pervasive developmental disabilities. As a result, children are more frequently diagnosed at the elementary school age because specific AS characteristics are more noticeable. Elementary general educators may observe such characteristics as increased levels of immaturity, more difficulties with written work than reading, problems making friends, obsessive interests, and communication deficits (Bauer, 2000). As Safran (2002) describes, educators should be careful not to make finalized conclusions about a student based on one or two characteristics observed, but rather identify multiple characteristics associated with AS.

As indirectly stated above, general educators are responsible for educating students with AS. Since the 1990's, inclusive school movements have advocated the inclusion of mild/moderate disabilities within the general classroom (Hallahan & Kauffman, 2003), and incidentally in 1990 Congress added autism to the disability list protected by IDEA (Yell, Katsiyannis, Drasgow, & Herbst, 2003). As a result, general educators are required by law to provide an adequate education for students with AS. Under the current IDEA, individuals with disabilities have the right to "a free, appropriate public education" in the least restrictive environment (Hallahan & Kauffman, 2003). The least restrictive environment, in other words, is an education environment as closely related to a normal school setting that promotes academic success. For many students with AS, the general education classroom is often the best least restrictive environment (Bauer, 2000). Therefore, general classroom educators must be prepared to service these students.

In addition, schools develop teams to review the needs and goals of all children

with disabilities, including AS, in order to abide by IDEA. When consultation on a child is completed, teams determine if there is a need for special educational services. If so, Individualized Education Program (IEP) teams are formed. Individualized education program teams determine goals and programs that will cater to a child's specific academic needs that must be fulfilled by their educator(s) (Yell et al., 2003). Also, IEP teams are highly encouraged to include parents because they are ultimately the experts on their child's needs (Hallahan & Kauffman, 2003).

Once IEPs are created, the teams are required by the Committee on Labor and Human Resources to select the best placement for a child to meet their academic goals. If the best placement (least restrictive environment) is determined to be in the general education classroom, teachers must provide an adequate education to meet the needs stated in the child's IEP. Failure to do so will increase the likelihood of parents pursuing due process (Yell et al., 2003).

In order for general educators to avoid breaking the law and due process, they can embrace their students with AS and create an environment conducive to successful learning. In order to do so, educators should recognize their personal attitudes expressed in their classrooms, and the direct correlation it has on their students' behaviors. This idea was originally expressed by Hans Asperger, the man who identified AS in 1944, when he stated, "They (children with AS) can be taught, but only by those who give them true understanding and affection, people who show kindness towards them and, yes, humor" (Bauer, 2000, p. 7).

EVIDENCE BASED INTERVENTIONS FOR STUDENTS WITH AS

Once a teacher establishes a positive, supportive attitude, he or she should sift

through multiple interventions that can be used within their classroom to cater to the needs of students with AS. However, currently, multiple interventions are very controversial and questioned for validity. Two factors that create this controversy are the lack of knowledge about AS and the unknown cause(s) of AS. Therefore, one must continually evaluate interventions by checking validity and weighing the pros and cons of each method. As recommended by Simpson (2004), an educator should use evidence-based interventions. To do so, general educators can seek outside assistance from other professionals, such as special and speech pathology educators, in recognizing worthy interventions and ways to effectively adapt their classroom for students with AS.

One evidence-based intervention that teachers can use to adapt their teaching style is described by Safran et al. (2003). The ABCs intervention plan (Academics, Behavior, and Communication) is backed by the most relevant research and knowledge, as well as, organized case studies. The authors describe this intervention plan as “conventional wisdom” because currently there is little empirically sound information about the education of students with AS.

To begin, students with AS demonstrate strengths in academics. Often academics can be their link to the real world and socialization. However, a child’s academic level can be affected by obsessive interests that interfere with the learning of school subjects. General education teachers can combat this problem by including special interest “topics” into different facets of their curriculum, such as math or science. Special interests can also connect a child with AS to other children. Teachers can encourage students with AS to participate in clubs that revolve around specific interests, or give the child a class job that highlights their special interests. For ex-

ample, if a child with AS is highly interested in animals, the educator can assign the job of feeding the classroom pet to the child with AS. If special interests are not age appropriate, teachers should focus on these interests as rewards for successfully completing a classroom exercise or task (Safran et al., 2003).

To further academic success, teachers can use alternative forms of educational support systems. For instance, students with AS respond well to visual stimuli but have difficulties writing. Teachers can concentrate on their visual strength by providing various charts, timelines, and pictures to display information, as well as, allow students to answer questions verbally rather than through writing. In addition, teachers can help students with AS stay on track during the academic day by providing hard copies of the daily schedule every week or each morning.

Another main category of the ABCs intervention plan is behavior. Two areas of particular interest to general educators are social behavior and emotional stability. Due to difficulties in a school’s social environment, as described earlier in this article, students with AS can appear to be outcasts in the classroom. However, exclusion cannot be allowed by educators. They need to inform students without AS about the particular characteristics of a child with AS and prohibit bullying inside and outside the classroom (Bauer, 2000). In addition, teachers need to be able to recognize social behaviors not interpreted by a student with AS. For instance, children with AS need to be taught when it is appropriate to ask questions and make comments. Also, a teacher can help by breaking down social situations, such as casual hellos, in a step by step format. Another strategy to help students with AS function in the classroom is to write down the classroom rules, which can be modified to expect realistic behaviors from

these children (Safran et al., 2003).

Other behaviors that teachers may experience on a daily basis are the emotional behaviors that trigger meltdowns as described by Safran and his colleagues (2003). Children with AS can experience stress and anxiety throughout the day with constant over stimulation and transitions. In order to diminish highly stressful situations, teachers can teach self-talk strategies that calm children down (Marks et al., 1999) or provide alternative options for a child, such as a switch in activity or movement to a calm, quiet area. Self-talk strategies include having children with AS tell themselves a calming phrase while taking deep breaths. For example, if a child with AS is experiencing anxiety and stress, Marks et al. recommend the child saying, "This anxiety is annoying, but it is not dangerous" (p. 57). In addition, planning alone, personal time for a child with AS can also relax their emotions. Overall, teachers must learn not to take misconduct and meltdowns personally. Instead, they can alleviate many problems if prior planning occurs to help a child with AS make smoother daily transitions (Safran et al., 2003).

The last component of the ABCs intervention plan is communication. Communication affects a child's everyday life. As children grow older, their levels of communication and socialization should improve. The opposite is true for children with AS, the communication gap widens. In order to encourage positive interactions in the classroom, teachers can assign a peer mentor or a "circle of friends" to a child with AS. This will encourage positive interactions between a student with AS and students who do not have AS. Children with AS can also learn interpersonal skills through specialized computer games, keeping a notebook or tape recording of observed social behaviors, watching cartoons about social interactions, and

analyzing social stories written in easily understood sentences, that describe social situations and appropriate behavioral responses (Safran et al., 2003).

In conclusion, given the rise in the incident rates of Asperger's Syndrome (Iovannone et al., 2003) and the fact that IDEA requires general educators to meet the educational and social needs of students with disabilities, it is clear that general educators will undoubtedly have to teach students with AS in their general education classroom. In turn, teachers should follow IEPs and make adequate adjustments to ensure an environment conducive for students with AS (Hallahan & Kauffman, 2003). In addition, educators should research and implement evidence-based interventions and keep positive, compassionate attitudes toward students with AS (Safran et al., 2003). With such support and care, children with varying levels of AS symptoms will no longer be social outcasts, but will function more efficiently in the classroom and the real world.

REFERENCES

- Bauer, S. (2000). *Asperger syndrome*. The Source. Retrieved September 21, 2004, from http://maapservices.org/MAAP_Sub_Find_It_-_Publications_Stephen_Bauer_Article.htm
- Hallahan, D. P., & Kauffman, J. M. (2003). *Exceptional learners: Introduction to special education*. (9th ed.). Boston: Allyn and Bacon.
- Iovannone, R., Dunlap, G., Huber, H., & Kincaid, D. (2003). Effective educational practices for students with autism spectrum disorders. *Focus on Autism and Other Developmental Disabilities*, 18, 150-165.

- Marks, S. U., Schrader, C., Levine, M., Hagie, C., Longaker, T., & Morales, M., et al. (1999). Social skills for social ills: Supporting the social skills development of adolescents with Asperger's syndrome. *TEACHING Exceptional Children, 32*, 56-61.
- Marks, S. U., Shaw-Hegwer, J., Schrader, C., Longaker, T., Peters, I., & Powers, F., et al. (2003). Instructional management tips for teachers of students with autism spectrum disorder. *Council for Exceptional Children, 35*, 50-55.
- Safran, J. S. (2002). Supporting students with Asperger's syndrome. *TEACHING Exceptional Children, 34*, 60-66.
- Safran, S. P., Safran, J. S., & Ellis, K. (2003). Intervention ABCs for children with Asperger's syndrome. *Topics in Language Disorders, 23*, 154-165.
- Simpson, R. L. (2004). Finding effective intervention and personnel preparation practices for students with autism spectrum disorders. *Exceptional Children, 70*, 135-143.
- Yell, M. L., Katsiyannis, A., Drasgow, E., & Herbst, M. (2003). Developing legally correct and educationally appropriate programs for students with autism spectrum disorder. *Focus on Autism and Other Developmental Disabilities, 18*, 182-191.