What does a student with Asperger Syndrome need in a school program?

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Anyone who knows many children and adults with Asperger Syndrome knows that every person's manifestation of the condition is very different. While they share significant social disability, some are very successful academically, some struggle with accomplishing work; some have intense intellectual interests that lead them to career paths, and others have intense interests that seem to have no practical use; some have a few friendships, others are desperately alone and lonely. Because Asperger Syndrome is an outcome of brain differences in combination with life experiences, no two individuals are exactly alike. Therefore, each student we encounter has different educational needs.

Least restrictive placement is an educational term that means that we want to provide students with the proper level of support for success without placing them in unnecessarily restrictive environments. For students with Asperger Syndrome, we want to provide the level of support that is necessary to help them optimize their skills and strengths without removing them from typical school experiences, if possible. Some students need a protective environment and some learning supports, while others need a little support developing their social skills in a real life setting. Matching the individual need to the level of support is critical to helping a child gain self esteem and independence.

What every family with a member with Asperger Syndrome needs to consider is how are the following potential difficulties being addressed.

1. The development of basic social skills and social relationship abilities. School programs and community clinicians often provide social skills training. The quality and type of this training is critical to progress. Many activities called social skills are not based in solid research. Just because someone provides a child with opportunities for social interaction does not make the activity a useful social skills development experience. Specific skills at the child's level of need coupled with opportunities for generalization outside of the formal training situation are necessary components for skill development to occur. Children with Asperger Syndrome typically have had great difficulty acquiring these skills that typical children simply pick up from their environment. We know that those with AS need specific help to perceive, acquire, and generalize basic social skills. Parents should always ask social skills trainers if they are utilizing proven, evidence-based techniques. If parents are not involved in the program, a vital link for generalizability is lost and families should be somewhat suspect of the program. Sometimes social skills programs are too simplistic, teaching only the basic instrumental skills such as eye contact and greeting. Helping individuals understand social norms and develop more sophisticated social cognition skills

are critical for relationship development, which is really what we all want for them. So, although a parent may be overjoyed that there is any social skills opportunity, it is still necessary to be a critical consumer and request a detailed statement of philosophy and curriculum, whether it is a school or a private practitioner in the community. Secondly, even if basic social skills have been acquired, children with AS may continue to experience difficulty developing authentic relationships. Their interests may be atypical or age inappropriate or they may have all their social overtures rejected by others. Here supportive adults can have an important impact. Teachers and related service providers can facilitate interactions in the real life situations that school provides, particularly on the playground, at lunch, and in other unstructured situations. Parents can help by assisting their children find others with shared interests. Parents often ask what to do when their children are unable to make friends. Finding another who loves Warhammer, entomology, or fantasy goes a long way toward starting a relationship. Parents and teachers can be creative in finding appropriate peers with similar interests through clubs, internet sites, or other personal resources. Putting random children together who share only the diagnosis of AS (and consequently poorly developed social skills) is far less effective than finding two children who are both fascinated by the same activity and can talk endlessly about it together. Even when an appropriate peer has been found, and the children seem to be a good match, adults should bear in mind that their facilitation of social interaction can help immensely, especially in the early stages of acquaintanceship.

2. Organization and academic support within the context of good academic skills Problems with disorganization are very common for students with Asperger Syndrome and frequently have a very negative impact on achievement. If a child has these problems, asking him to just be more organized or providing negative consequences are ineffective and painful interventions. A neuropsychological evaluation can help us understand exactly what underlying skill deficits are causing these students to lose their initial academic advantage. A student who is processing information more slowly than others, or who can't set priorities, or who doesn't understand the passage of time, or who overfocuses on details and never finishes work (and these are all fairly typical of individuals with AS) will find less and less success with academics over time and lose that important source of self esteem. If the underlying problems are identified and specified on an IEP, finding a way to support the student's organizational difficulties becomes an educational imperative, rather than a source of personal criticism. For an unclassified student, the specific recommendations a neuropsychological evaluation can provide may still lead to more specified help and a less likely tendency to blame rather than support. Be ready to suggest a consultant who can educate teachers and other school staff in fundamental brain differences and how they manifest in this population. Many educators just do not know this important information.

- 3. Immature or inappropriate emotional expression. It is a fairly common outcome of having limited friendships that emotional maturity is slow to develop and sometimes develops oddly in the face of daily social pain. Emotional regulation is a developmental skill that arises as an interaction between ones basic brain mechanisms and the daily experiences with others that children have. Children with AS often have differences in the neural circuitry responsible for emotional development. These differences may color their experiences in the world. Furthermore, through self isolation, limited numbers of relationships or peer rejection, the opportunity for social-emotional learning may be less than for typical children. These difficulties play out in school as immature social regulation, inability to modulate response to disappointment or frustration, or anger in response to any deviation from expectancy. Immature behavior further distances the student with AS from others, and may jeopardize the school placement. School personnel often have not been trained in specific techniques to support children having these problems. A simple behavior plan tends to exacerbate rather than help a child who is losing emotional control because of complex brain related issues. A consultant, who is highly experienced in the emotional development of children and adolescents with AS, may be invaluable in helping a school develop a protocol to manage and support this kind of student. This may help a child maintain school placement and contribute to the development of more socially appropriate emotional regulation.
- 4. <u>Isolation and/or depression</u> Often children with Asperger Syndrome retreat to the internet or a fantasy world to avoid social anguish. Families are often at a loss as to how to change these behaviors. Sometimes schools are punitive when students cannot attend, blaming the student for being manipulative or the parents for not exerting discipline. Students with AS who are showing excessive isolation should be evaluated for an anxiety or mood disorder. These are treatable problems that require close cooperation between the school and the family. Schools need to help families find appropriate professionals, cooperate in treatment protocols, and investigate sources of fear and anxiety such as bullying or overwhelming situations. Families need to take potential anxiety and depression seriously and seek appropriate treatment.
- 5. Wide variation in development. Students with AS characteristically exhibit wide disparities in basic abilities. Typical difficulties directly attributable to brain function include poor coordination, handwriting difficulties, slow processing, inattention, and extremes in academic ability. It is more difficult to be a person with widely varying abilities because expectancies are often unrealistic. Just because a student can solve any arithmetic problem mentally does not mean that keeping order in long division is accomplishable. Just because a student can speak eruditely about history does not mean that writing mature compositions about history is possible. So it is critical to understand strengths and weaknesses so that weaknesses can be identified and supported and just as importantly,

intellect can be challenged. Sometimes language or motor function can sabotage other skill areas. Consequently, even for older students, regular Speech and Language, Occupational Therapy, and Physical Therapy evaluations are critical to addressing unevenness of academic performance and helping us develop important interventions to support ongoing academic progress.

Every family needs to make an honest appraisal of what specific problems their child has. A frank conversation with the student's school as to whether addressing these needs is possible within that setting is critical. Avoiding these issues does not make them go away as these children show us every day that they cannot develop such skills on their own. Possible school solutions include

- 1. engaging a consultant to help a child's school address specific problems
- 2. having a trained paraprofessional work with the student
- 3. placement in a setting that has ancillary support available when needed
- 4. finding a special education school capable of providing the level of academic support and challenge needed
- 5. changing to a specialized setting for students with Asperger Syndrome that addresses all the above and provides a peer group and self advocacy model

A professional who is very familiar with the wide array of expression of the condition can help families make a professional assessment of a child's real needs and how they are currently being addressed. Each stage of development brings new challenges to all children. We need to be cognizant of the match between the student's needs and strengths and the academic situation at hand. A school that provided a wonderful environment in third grade may not be able to address the new challenges that middle school brings. Therefore, reappraisal of educational situations and the student's maturity and appropriateness for them is a critical part of academic and personal success from preschool through college. Objective observations can be especially helpful in gaining an unbiased assessment of the success of the match of a school setting and the student's current needs.

Lynda Geller, Ph.D., served on the faculties of Georgetown University, Stony Brook University and NYU Medical Schools for 25 years, where she worked on the development of clinical centers providing a wide array of services for children and adults with autism spectrum conditions. Dr. Geller has a clinical practice in New York City dedicated to providing social, psychological, consulting and coaching services for children and adults with Asperger Syndrome and related conditions. She is currently the Director of the Institute for Cognitive Diversity at Bank Street College, which provides specialized evaluations and executive functioning support for students with Asperger syndrome and other neurodevelopmental issues. Dr. Geller is also on the Advisory Board for the Asperger Syndrome and High Functioning Autism Association.