

## 1: Eight Tips For Handling Anger At Someone With Asperger's | Kenneth Roberson, Ph.D.

*Encourage your child to help students with Asperger's, not bully them because they seem different. Suggest that he ask his friends and classmates to do the same.*

Info Getting Inside the Heads of Students With Asperger Syndrome Dan Coulter uses film to help teachers understand what goes on inside the head of a student with AS, so that student can thrive in the classroom. Drew and Dan at the U. Space Camp in Huntsville, AL, where Drew got the highest mission score in his group on his first try on the simulated space shuttle. Early in elementary school, I dutifully passed my spelling test to another student. How could anyone do that? Would the teacher believe me if I told her? I sat frozen in my seat and said nothing. I understand now that this was one of the ways Asperger Syndrome can affect children. They can be overwhelmed by emotional situations. It took me years to overcome that reaction. More and more progressive school systems have programs to help teachers understand students with Asperger Syndrome and other Autism Spectrum Disorders. Others are leaving teachers to learn on their own. Mainstream classroom teachers are seeing more students with AS than other forms of autism, because kids with AS tend to have normal to superior intelligence and be placed with typical peers. Long before his AS diagnosis at age 14, Drew demonstrated an exceptional memory in schoolwork. He was especially animated when he got to talk about one of his special interests, Greek mythology. It can be like everyone else is speaking in secret code. You hear and think you understand, but people are upset by your attempts to respond. It was easy to assume that he was being willfully disrespectful, but such Asperger-generated impulses are very hard to control. People with AS often have to work to learn social skills that others pick up by observing. So you get scolded by teachers and teased or ignored by classmates. When you try to make conversation, you drive away potential friends by lecturing when you should be listening. My wife and I started producing videos about Asperger Syndrome after Drew was diagnosed. We found his school situation improved dramatically when teachers and classmates were shown how Asperger Syndrome affected Drew and others. Drew, pre-diagnosis, at a charity walk in Birmingham, Alabama. Photo courtesy of Dan Coulter Asperger Syndrome offers a smorgasbord of symptoms in different combinations too numerous to list in detail here. It could make him tune out, and repeat the mistake later. But having Drew think about a desired behavior and practice it ahead of time made it more likely he could remember in class. A teacher and student also can work out private cues to correct a behavior without interrupting the class. Often special instruction outside of class is helpful. Teachers are in a unique position to help them break through the wall that hides their talent and potential. Thanks in no small part to great teachers, Drew has graduated from college, is working, owns his own condo, and has a circle of friends. Drew meets with his boss at the library. He also takes on many different roles at Coulter Video and is currently writing a book. My teachers never knew I had Asperger Syndrome. But they believed in me and helped me overcome my Asperger tendencies, even without a label. We have two terrific adult children. If you do the same, you could be the teacher who gives a student with Asperger Syndrome what he absolutely needs to succeed. Six Asperger Tips for Teachers Discover the strengths of a student with Asperger Syndrome and incorporate them into his class work as motivation. If he loves astronomy, you could give him a math project about the distances between planets. A student with a special interest in geography might be allowed to teach part of a lesson that involves geography. Take active steps to prevent bullying. Students with Asperger Syndrome tend to be easy targets and are frequently teased or harassed. Offer clear instructions and assignments and check periodically to ensure a student with Asperger Syndrome understands them. Students with AS tend to take things literally, have difficulty with implied meanings, and have difficulty asking for help. Establish a safe place and a safe person such as a counselor that a student can seek out to calm himself if he gets overwrought. Some people with Asperger Syndrome are hyper-sensitive to touch or bright lights or loud noises. Take this into account in classroom seating and activities. Help your student transition to the outside world. In everything you do, keep in mind how it will help him succeed on his own after graduation. Dan Coulter wrote this article for YES! Magazine, a national, nonprofit media organization that fuses powerful ideas with practical actions. Dan and his wife Julie, founders of Coulter Video, produce DVDs about

## HOW TO HANDLE STUDENTS WITH ASPERGERS SYNDROME pdf

autism, and present at autism conferences across the country. Dan is a former broadcaster and public relations executive. Just Readers Like You. You can help fund powerful stories to light the way forward.

## 2: How to Give Consequences to Children With Asperger's | How To Adult

*Children and teens with Asperger's syndrome often struggle with the social skills necessary for success in school and social settings. Tony Attwood, a psychologist and acclaimed expert on Asperger's syndrome, has written books that can help parents and teachers better understand the nature of this complex condition.*

How would you know? The person may be able to identify basic emotions, such as intense anger, sadness or happiness yet lack an understanding of more subtle expressions of emotions such as confusion, jealousy or worry. A person is diagnosed based on the signs and symptoms he or she has rather than the results of a specific laboratory or other type of test. The assessment process itself is time consuming and it can be costly. Examples of actual statements are: I find it difficult to imagine what it would be like to be someone else. I miss my best friends or family when we are apart for a long time. It is difficult for me to understand how other people are feeling when we are talking. I feel very comfortable with dating or being in social situations with others. The questionnaires and scales for adults are as follows, in alphabetical order: To do that, an experienced professional needs investigate two things: Personal History Diagnoses are most valid and accurate when they are based on multiple sources of information. It is often the case that a person seeking an evaluation does not have any documentation, formal or informal, that is relevant to the assessment process. That is not an insurmountable problem. It helps when that evidence is available but it is not critical. The first meeting covers general facts about the person, particular those relating to his or her present life. I am interested in how the person gets along at work and his or her work performance, how the person manages daily living, what initiative the person takes in planning and achieving life goals, and how satisfied the person is with his or her life. Hence a thorough understanding of early social, emotional, family, academic and behavioral experiences are essential to the diagnostic process. The third and final meeting is a time to clarify questions that were not completely answered in the previous meetings, gather additional information and raise additional questions that have emerged from the information collected so far. When everything has been addressed to the extent allowed in this timeframe, the final part of the clinical interview is the presentation of my findings. Presenting these findings is a multi-step process. An example of this is difficulty noticing whether people are bored or not listening in conversations. Persistent difficulty in communicating with, and relating to, other people. Their conversations have to be generally one-sided. There has to be reduced sharing of interests and a lack of emotional give-and-take. Superficial social contact, niceties, passing time with others are of little interest. Little or too much detail is included in conversation, and there is difficulty in recognizing when the listener is interested or bored. Poor nonverbal communication, which translates into poor eye contact, unusual body language, inappropriate gestures and facial expressions. Difficulty developing, maintaining and understanding relationships. Narrow, repetitive behaviors and interests. Signs of these characteristics as early as months of age, although the difficulties with social communication and relationships typically become apparent later in childhood. Clear evidence that these characteristics are not caused by low intelligence or broad, across-the-board delays in overall development. What happens if someone has some of these difficulties but not all? It can eliminate the worry that a person is severely mentally ill. It can support the idea that the person has genuine difficulties arising from a real, legitimate condition. A new, and more accurate, understanding of the person can lead to appreciation and respect for what the person is coping with. Acceptance by friends and family members is more likely. Employers are more likely to understand the ability and needs of an employee should that employee make the diagnosis known. Accommodations can be requested and a rationale can be provided based on a known diagnosis. Having the diagnosis is a relief for many people. It provides a means of understanding why someone feels and thinks differently than others. There can be a new sense of personal validation and optimism, of not being defective, weird or crazy. Acceptance of the diagnosis can be an important stage in the development of successful adult intimate relationships. It also enables therapists, counselors and other professionals to provide the correct treatment options should the person seek assistance. Liane Holliday Willey is an educator, author and speaker. Yes, but the list is shorter than the list of advantages. No longer will they be able to hope to have a satisfying, intimate relationship. Instead, their future

will be filled with loneliness and alienation from others with no expectation of improvement. While it is not legally acceptable to do so, we know that silent discrimination happens, hiring decisions are not always made public and competition can leave someone with a different profile out of the picture. It very well might be that some other condition is the real problem or, more likely, two or more conditions are overlapping. Brain imaging and studies of the brain structure show similarities between the two disorders. Having said that, there are important differences between the two. People with ADHD often try to do multiple activities at the same time. They get distracted easily and jump from one interest or activity to another. Focusing on one thing for a long time is hard for them. They are hyper-focused rather than unfocused. There is a similar difference with respect to impulsivity. People with ADHD will do things without considering the outcome of their actions. They act immediately and have trouble waiting. They interrupt, blurt out comments and seem unable to restrain themselves. They do not tend to have specific weaknesses in their understanding and use of language. They also speak with a normal tone of voice and inflection. They may talk a lot and have more one-sided conversations as do adults with ADHD but they do so because lacking an understanding of how the person they are talking to is grasping what they are saying they are, in effect, talking to themselves. They confuse behaviors that may be appropriate in one setting from those that are appropriate in another, so that they often act in appropriate for the situation they are in. They find it hard to interpret the meanings of facial expressions and body posture, and they have particular difficulty understanding how people express their emotions. When they do communicate their feelings they are often out of synch with the situation that generated the feeling. Adults with ADHD tend to process sensory input in a typical manner. They may have preferences for how they handle sensory input like music, touch, sounds, and visual sensations but generally the way they handle these situations is much like other adults. They may be overly sensitive to one kind of sensation and avoid that persistently. Or they may prefer a certain type of sensation and, a certain type of music, for example, and seek it over and over. Obsessive-Compulsive Disorders The core features of obsessive-compulsive disorder OCD are frequent and persistent thoughts, impulses or images that are experienced as unwelcomed and uninvited. Along with these thoughts are repetitive behaviors or mental acts that the person feels driven to perform in order to reduce stress or to prevent something bad from happening. Some people spend hours washing themselves or cleaning their surroundings in order to reduce their fear that germs, dirt or chemicals will infect them. Others repeat behaviors or say names or phrases over and over hoping to guard against some unknown harm. To reduce the fear of harming oneself or others by, for example, forgetting to lock the door or turn off the gas stove, some people develop checking rituals. Still others silently pray or say phrases to reduce anxiety or prevent a dreaded future event while others will put objects in a certain order or arrange things perfectly in order to reduce discomfort. Individuals with both conditions engage in repetitive behaviors and resist the thought of changing them. Indeed, they are usually enjoyed. Social Anxiety Disorder Social Anxiety Disorder, also called social phobia, occurs when a person has a fear of social situations that is excessive and unreasonable. The dominant fear associated with social situations is of being closely watched, judged and criticized by others. The person is afraid that he or she will make mistakes, look bad and be embarrassed or humiliated in front of others. This can reach a point where social situations are avoided completely. Typically, along with this discomfort is lack of eye contact and difficulty communicating effectively. The difference between these two conditions is that people with Social Anxiety Disorder lack self-confidence and expect rejection if and when they engage with others. They have a very restricted range of emotions, especially when communicating with others and appear to lack a desire for intimacy. Their lives seem directionless and they appear to drift along in life. They have few friends, date infrequently if at all, and often have trouble in work settings where involvement with other people is necessary. They tend to react passively to difficult circumstances, as if they are directionless and are drifting along in life. They are withdrawn because it makes life easier. Often this gives others the impression that they lack emotion. In addition, people with SPD typically do not show these features until late adolescence or adulthood. They are frequently deceitful and manipulative so as to obtain money, sex, power or some other form of personal profit or pleasure. They tend to be irritable and aggressive and to get into physical fights or commit acts of physical assault including spousal or child beating. They are consistently and extremely irresponsible financially, in their employment, and with

regard to their own safety and the safety of others. They show little remorse for the consequence of their actions and tend to be indifferent to the hurt they have caused others. Instead, they blame victims of their aggression, irresponsibility and exploitation. They frequently lack empathy and tend to be callous, cynical and contemptuous of the feelings, rights and suffering of others. They often have an inflated and arrogant view of themselves, and are described as excessively opinionated and cocky. They can appear charming and talk with superficial ease, attempting to impress others and appear experts on numerous topics.

## 3: How To Deal With Aspergers Anger | Lamoureph Blog

*Highly Effective Research-Based Parenting Strategies for Children with Asperger's and HFA Become an expert in helping your child cope with his or her "out-of-control" emotions, inability to make and keep friends, stress, anger, thinking errors, and resistance to change.*

What we know to date is largely based on experience and relies heavily on generalizing strategies from the applied behavior analysis arena. However, what appears most evident given the heterogeneity even among these individuals is that a primarily categorical approach will be unsuccessful for most, and that effective behavior support will require highly individualized practices which address primary areas of difficulty in social understanding and interactions, pragmatic communication, managing anxiety, preferences for sameness and rules, and ritualistic behaviors. Impairment in social interactions: Restricted range of social competence: A functional analytic approach to developing effective positive behavioral supports rests on the use of a process commonly and most recently known as functional behavioral assessment. Functional behavioral assessment involves employing a diverse array of strategies e. In order to effectively adopt a functional behavioral assessment approach, several assumptions about behavior must be regarded as valid: Behavior is functional - it serves a specific purpose s. Behavior has communicative value if not specific intent. Inappropriate behavior may be the only available communicative response to difficult situations until other options are systematically taught. Behavior is context related. All individuals demonstrate some level of variability in behavior across different settings. In fact, understanding how setting specific features impact an individual either positively or negatively is one of the chief outcomes of a functional behavioral assessment. This information has particular value for adopting preventive efforts or to set the stage for teaching alternative skills. Effective behavioral support is contingent on understanding the student, the context in which he operates, and the reason s for behavior. Though there is often disagreement about the best means to conduct a comprehensive functional behavioral assessment, most researchers and clinicians are in agreement about the key outcomes of such an assessment. A clear and unambiguous description of the problematic behavior s ; A description of situations most commonly, and least commonly associated with the occurrence of problematic behavior; and Identification of the consequences that maintain behavior. In other words, once a behavior starts, what keeps it going over time? What is reinforcing the behavior so that it continues? Conducting a functional behavioral assessment is a hollow exercise unless it provides information that: Once general understanding of problem behaviors is achieved, it is useful to adopt a positive behavioral support framework to systematically delineate interventions. Positive behavioral supports are often difficult to define given the diversity of strategies and supports that encompass this term. However, it is important to remember a few hallmarks of positive behavioral supports, including: Bambara and Knoster proposed a comprehensive format for outlining "multi-component" supports which addresses the following issues: Each of these areas will be addressed in turn: The primary goals of this type of strategy are to prevent or reduce the likelihood of problem behavior and to set the stage for learning more adaptive skills over time. Therefore, the newly arrived high school freshman who becomes physically aggressive in the hallway during passing periods may need an accommodation of leaving class a minute or two early to avoid the congestion which provokes this behavior. Over time, the student may learn to negotiate the hallways simply by being more accustomed to the situation, or by being given specific instruction or support. Key issues to address when discussing this type of strategy are: What can be done to eliminate the problem i. What can be done to modify the situation if it cannot be eliminated entirely? Will the antecedent strategy need to be permanent, or is it a temporary "fix" which allows the student with support to increase skills needed to manage the situation in the future? The importance of using antecedent strategies should not be underestimated among the constellation of support strategies. Striking a balance of short and long term accommodations through manipulating antecedents to problem behavior is often critical in setting the stage for later skill development. The primary purpose of this type of strategy is to teach skills that replace problem behavior by serving the same purpose as the challenging behavior. Instead, the child can be coached on how and when to ask to enter into the game. Again, Knoster

and Bambara provide a particularly useful framework for guiding efforts towards teaching alternative skills by examining the following three categories: Equivalence training requires support persons to ask the following sequential questions: What is the function of the problem behavior? What alternative skills will be taught which serves the same function as the problem behavior? How will the alternative skills be taught? General skills training requires asking the following sequential questions: What skill deficits are contributing to the problem behavior? What other academic, social, or communication skills will be taught that will prevent the problem behavior from occurring? How will these alternative skills be taught? Self-regulation training requires asking the following sequential questions: How will these skills be taught? One particularly relevant means to teach alternative skills is through the use of self-management strategies. Self-management is a particularly useful technique to assist individuals to achieve greater levels of independent or even inter-dependent functioning across many settings and situations. By learning self-management techniques, individuals can become more self-directed and less dependent on continuous supervision and control. Instead of teaching situation specific behaviors, self-management teaches a more general skill that can be applied in an unlimited number of settings. The basic steps for teaching self-management, as outlined by Koegel, Koegel and Parks are: Readers are encouraged to access this article for further instructions in this process. One way to reframe the use of consequences is to develop them as planned responses to instructional situations. This shifting of the type and use of consequences does not mean that negative consequences can or should be eliminated, especially in moments of crisis, but that a predominance of negative consequences is likely to heighten anxiety levels for the student and compete with teaching alternative skills. However, it is imperative that plans for supporting a student over the long term be outlined right from the start. These are not crisis management strategies but the very things that can decrease crisis situations from arising. Once these questions are addressed, behavior support plans can be established. One issue to consider is how a student responds to practices such as response costs, penalties, or fines which are often built into such frameworks. This is especially true if threats over losing highly preferred items or activities are used. Another issue relates to school-wide discipline procedures. As a result, school staff are forced to adopt intrusive practices which would be unnecessary in more effective systems. There are many false assumptions about this population. Finally, those involved with the student will need to collaborate on a behavior support plan which is clear and easily implemented. Once developed, the plan will need to be monitored across settings. Strategies for initiating positive interactions and improving learning opportunities pp. Understanding the student with Asperger Syndrome: Focus on Autistic Behavior, 10, Bloomington, IN *Irca Indiana*.

### 4: Helping Asperger's™s Teens To Survive and Thrive: 15 Key Steps

*Truthfully, frustration is the root of anxiety in children with Asperger's Syndrome. In children with Asperger's, anxiety builds as frustration builds. Something as simple as being forced to make eye contact and explain your reasons for choosing a certain book to read can cause frustration.*

Aspergers Mental Health " posted by admin on October 12, 1: What causes this anxiety? Just about anything can cause anxiety. The stress of social situations when you have weak social skills, changes in your normal routine or in the order of things, depression due to the loneliness that can come with lacking social abilities, and frustration. Something as simple as being forced to make eye contact and explain your reasons for choosing a certain book to read can cause frustration. Imagine trying to find the words you need and learning that some of those words are missing. Imagine having to look someone in the eye and feeling actual physical discomfort when doing so. Imagine eating in a noisy, crowded cafeteria when the sights, sounds, and smells are painfully overwhelming. Imagine having a deep desire to make and keep friends, but not having the social skills needed to accomplish this desire. Frustration is around every corner and with that frustration comes anxiety. This chart allows the child to use a visual aid to categorize his levels of anxiety. Read more about this chart at <http://> There are several choices of treatments for parents to choose. Cognitive-behavioral therapy, as well as psychological counseling can help. Search the Internet for published resources that can make the job easier and more effective. Finding the right combination of stress management and treatments will help your family deal with the frustration that leads to anxiety. The truth is the suggested coping and teaching skills are not always an effective means for behavior control. It can be difficult to stand in the midst of misbehavior and remain calm-faced, with a controlled voice, and mildly redirect your errant child! Many a parent of children with Autism have questioned and wondered about the possibility of their children getting away with too much. Disciplining a child with Autism is not easy. To read the full article go to: Police interaction is one such situation. While police officers and first responders are trained to deal with unusual characters and situations, not many states have recognized the need for Autism-specific practices and training. Donnie is a little boy who was not supposed to ever talk, interact with others, or show emotion. The video shows Donnie singing loud and clear during a church service. The message is for families to not give up on their children with Autism.

## 5: Asperger's Syndrome and Meltdowns | Interactive Autism Network

*Meltdowns can be very tough on children and parents. You are not alone and AANE is here to help. You are not alone and AANE is here to help. You can always call or email or schedule a parent coaching session to get individualized strategies to help you and your family.*

Why does he over-react to certain things? The world can be a confusing, isolating and daunting place for your youngster, and it is his fundamental difficulties with communication and social interaction that are often the root cause of difficult behavior. There are some other possible reasons, too. You are not the only parent in this situation, although sometimes it can feel that way. Bullying – Unfortunately, kids with Aspergers and High-Functioning Autism can be at more risk of being bullied than their peers. Your youngster may find it difficult to tell you if they have been bullied not all kids with Aspergers and High-Functioning Autism even recognize what bullying is so you might need to play detective. Change – Children with Aspergers and High-Functioning Autism can find it difficult to cope with change, whether a temporary change to their timetable at school, or a more permanent change such as moving house. Communication – Kids with Aspergers and High-Functioning Autism can experience a number of difficulties with communication: Because of these difficulties, Aspergers kids can find it hard to communicate their needs or to understand what other people are saying to them, or asking them to do. Some kids have seizures that can cause irritability and confusion, or gastrointestinal problems which may be painful. Alternatively, some moms and dads use symbols to help their youngster indicate where the pain is. Sensory processing difficulties – Many kids with Aspergers and High-Functioning Autism have difficulties processing sensory information. For example, kids may not be able to manage some tastes or food textures, or find that someone touching them - even lightly - is painful. Certain smells, lights or sounds can be distressing. Some kids may find it difficult to block-out background noise and what they experience as excessive visual information. Instead, sounds, lights and other sights are all processed at the same level of intensity and lead to sensory overload. You may find that your youngster starts a repetitive behavior in stressful environments. Children with Aspergers and High-Functioning Autism can be very sensitive to subtle changes in their environment. Social situations – Communication difficulties can impact on how Aspergers kids deal with social situations. They may find social situations very demanding or stressful because they have to work hard to communicate with other people. Not all kids with Aspergers and High-Functioning Autism will understand that other people hold different views from theirs. This may also make social situations difficult. This is especially true if kids find themselves in a new, unfamiliar situation. Therefore, social situations can be daunting and unpredictable. Some kids may engage in a particular behavior to try and avoid social contact. Many kids have timetables so they can see what is going to happen, when, and plan for it. However, unstructured time. You may find that behavioral difficulties occur more in transition times between lessons or activities. It helps if you can be clear about why and for how long you are waiting. This is because the doctor can see us at Your child behaves the way he does for a particular reason. In other words, he is trying to accomplish something or avoid something. What is the function of this behavior? What is my youngster trying to tell me by his behavior? Instead, they may be expressed through other behaviors. Your youngster might be trying to tell you she is tired, stressed, annoyed by something that happened earlier, or in need of some time alone. It can be useful to use a behavior diary to try and find out what triggers a particular behavior. This helps you to monitor the behavior over time and see what the possible causes are. One way of recording behavior is an ABC chart. On this, you record the Antecedent. By identifying potential triggers for the behavior, it can be easier to come up with ways of preventing it from happening in the future. Interventions are more likely to be successful if they address either the cause or the function of the behavior. When trying to tackle behavioral difficulties, select at the most two behaviors to focus on at a time. Using too many new strategies with your youngster at once may result in none of them working. Your youngster might at first resist change. This is a normal reaction when kids want things to stay the same and try hard to see that they do. Ways to deal with behavior problems: Check that skills have not been forgotten. If you have used strategies successfully in the past, it might help to revisit them from time

to time so that your youngster remembers how to use them. You may also need to use them at periods of stress, illness or change when old behaviors can return. Visual supports can help with this. Consistency is of the utmost importance. Whatever strategies you decide to use to help your youngster should be used by everyone involved with him, including other family members, teachers, babysitters, etc. Inconsistent reactions to behavior by different adults can cause confusion, stress and frustration for a child with Aspergers and High-Functioning Autism, and can make the behavior more difficult to tackle. Exercise can help to relieve stress and frustration. Some studies have shown that regular exercise throughout the day can have a positive effect on general behavior. Many kids with Aspergers and High-Functioning Autism enjoy exercise like jumping on a trampoline. Give praise where praise is due. Some kids like verbal praise. Others might prefer to get another kind of reward, like sticker on a star chart, or five minutes with their favorite activity or DVD. Try to give your youngster praise in a way that is meaningful. Try also to offer praise immediately after your youngster has demonstrated a skill. Your youngster will hopefully learn to make an association between the skill and the reward and start to use the skill more often. Learn to identify emotions. Many children with Aspergers and High-Functioning Autism find it difficult not only to understand how others are feeling, but also how they feel themselves. You can use a traffic light system, visual thermometer, or a scale of to present emotions as colors or numbers. One way to do this is to refer to physical changes in the body e. If your youngster sees that he is getting angry, he can try to do something to calm himself down, or he can remove himself from the situation. Alternatively, other adults can see what is happening and take action. It can be very difficult for kids with Aspergers and High-Functioning Autism to relax. Some have a particular interest or activity they like to do because it helps them to relax. It is, of course, worth being aware of these. Can time doing their favorite activity be built into their daily routine? Other ways to relax include having time alone for short periods of the day to unwind, playing soothing music, or using homeopathic remedies. Some children may find lights soothing, especially things like spinning lights or bubble tubes which are repetitive. Kids with Aspergers and High-Functioning Autism can have difficulties processing sensory information. Some things in their environment can act as severe irritants. If this is the case, it can be easier to remove the thing that might be irritating your youngster rather than trying to change a behavior pattern. Flickering fluorescent lights, humming noises, certain smells, etc. It may be something you have hardly noticed at all, while your youngster experiences it much more intensely. Encourage your youngster to use new skills or coping strategies in different situations e. Speak clearly and precisely. Some kids with Aspergers and High-Functioning Autism have a good grasp of language and speak quite fluently. However, they may struggle to tell you something when they are anxious or upset, or find it difficult to understand what you are saying to them. If your youngster finds spoken communication difficult, consider using alternative ways of communicating e. Whatever location your youngster goes to should be a calm, safe environment where she can be observed. This should only last a few minutes, and your youngster should then be directed to an activity she finds relaxing. Some kids have time-out at home, perhaps time alone in their bedroom, or the chance to do a favorite activity. Children with Aspergers and High-Functioning Autism often find it easier to process visual information. Some kids use picture symbols or photos to communicate what they want, while others use sign language. It also gives a sense of routine, which kids with Aspergers and High-Functioning Autism usually like, and removes feelings of uncertainty. When tackling any behavior, be realistic and set achievable goals. Write a social story. Social stories are short descriptions of situations, events or activities, often with pictures, which include information about what to expect in that situation and why. They can give a youngster with Aspergers and High-Functioning Autism some idea of how others might behave, and therefore be a guide for appropriate behavior.

### 6: My Aspergers Child: How to Deal with an Aspergers Child Who Also Suffers with Anxiety

*In my experience, children with Asperger Syndrome get bored around boring kids, so you may need to encourage relationships with other children who are bright and interesting. Remember, your goal is to help him enjoy the company of other children, and he needs to enjoy socializing in order to do it appropriately.*

Using discipline techniques that may be popular with parents of neurotypical children can make a situation with your child more complicated, confusing, and volatile. The most important part of establishing effective discipline is to create an environment with very clear rules. It is important to define the rule precisely and specifically, considering the possible exceptions to the rule that could be a problem. You must first consider why you have the rules or chores and what your ultimate goal is. If your child is able to discuss rules with you, it is a good idea to include them in the conversation. If not, be sure that your rules are clear and include any possible exceptions. It is important to have rules and expectations posted in a high traffic area in the home. If your child cannot read yet, you can work together to draw pictures that represent the rules with specific consequences. Involving your child in rule making allows them a sense of control and creates an opportunity to understand how your child interprets your rules. No electronic devices powered on between the hours of 6: After creating iron clad rules it is time to determine consequences for breaking the household rules. Finding a disciplinary plan that works for your child and family is important for any household. The opportunity to be left alone, in their room, with their favorite books and toys is usually preferable to other activities. It might take a lot of creativity to find consequences that are effective. Missing a favorite show for a day or losing computer time are also ways to enact effective consequences. How you enforce the consequences is also important. Often, the child will not maintain eye contact and may not realize that the tone of your voice or facial expression is indicative of your disappointment in their actions. Staying calm and using concise verbal or non-verbal cues works best. If your response is consistent, the likelihood of extended discourse is greatly reduced. Self soothing behavior, repetitive vocalizations, or not responding verbally are all part of the disorder and not due to disrespect. Certain behaviors can be annoying or agitating to family members but discipline will not stop these behaviors and may only serve to increase them. You must carefully determine when behavior is a purposeful disregard of expectations, as opposed to which behaviors are from the disorder. In the case that behaviors become violent, hurtful, or disruptive, an intervention has to occur but this can be in the form of distraction or redirection. Asking the child to explain, draw a picture, or write about why the behavior is bad and then discussing it allows the child to develop empathy. Often the child does not understand how their behavior affects others and needs help relating their actions to social consequences. Remember that the disorder creates unique challenges for your child so keeping your cool will pay off. The concept of right and wrong has to be consistently taught and reinforced in new situations because the child may not generalize expectations to new environments. Discipline still needs to occur in public and when your child is being cared for by others. Younger children might need a physical reminder of expectations in the form of an index card with the rules written on it. Once your child is older, a conversation about expectations could be sufficient before entering new situations, but each child is different. Bear in mind that even the best disciplinary plan will not offer complete success. The best result happens when a child is rewarded for the behaviors you want. Be sure to notice when your child is doing the right thing, without prompts, and immediately acknowledge and reward their actions. Article reviewed by Dr. Tali Shenfield on May. She earned her PhD in Psychology from the University of Toronto and completed a post-doc internship at our centre. Anna now works as a care coordinator at the The Hincks-Dellcrest Centre. You can follow Anna on Twitter at AnnaKaminsky1.

### 7: Getting Inside the Heads of Students With Asperger Syndrome by Dan Coulter â€” YES! Magazine

*Teens with Asperger's and HFA crave structure and predictability, just as children on the autism spectrum do, so try to keep these schedules as consistent as possible. Consider employing role play when teaching your teen how to approach and manage social situations.*

Hormonal fluctuations, the quest for self-identity, and the pressure of trying to be socially acceptable, all come together to make the world a complex, disorienting, and often highly troubling place. He or she likely has trouble with verbal expression, shutting down the voicing of these painful emotions. The world of the average teen is all about his or her peer circle; social skills as an adolescent are developed through shared experiences and frequent, lengthy conversations think of the stereotype of the teen one just cannot keep off of the phone; such social over-attentiveness is all part of the learning process. Naturally, then, a teen with poor social skills , or one who struggles to communicate, can feel barred from this world, and the idea of interacting in it is therefore unappealing and even frightening. In order to help your teen navigate these turbulent waters and equip him or her with the tools needed to cope, try to employ the 15 crucial strategies outlined below: To combat this, try to make them feel like they have a role of importance in matters that involve them. Give them choices and a sense of autonomy, while also making them aware of potential consequences. Employ an activity-based reward system. This avoids nagging, frustration, and other negative social stimuli. By involving the teen, you show him or her that no challenge presented by his or her needs is insurmountable, and that control over the self and environment is attainable. Remember that teens on the autism spectrum may not always make eye contact when you are giving directions, even when they are paying attention, and that this is not a sign of disrespect. Look for other cues that the teen is listening to you, such as alert posture, gestures e. Make sure your directions are clear and concise, describing when the teen should do the work, why, how, and how much work there is to be done. Create a plan to teach your teen basic social skills and how to apply them across multiple situations, such as how to start a conversation, how to ask for help, etc. Make sure he or she understands how to move those skills from one environment to the next; from school to church, for example. Do not try to teach too many of these skills at one time; instead, break them down into manageable lessons. Make sure to have the teen apply these skills in real-world situations and reward him or her for a job well done. Be sure to allow your teen to bring home friends for pizza parties, gaming nights, etc. Encourage your teen to store these lists and look at them when feeling down or discouraged. Expect mood swings, meltdowns and periods of hyperactivity, and remember that often the best thing you can do for your teen is to keep a grip on your own emotions. Reactivity only makes these outbursts harder to get through, and magnifies the stress of the situation. Begin to grant the teen some control over his or her schedule; allow the teen to select the order in which chores are done, the time he or she prefers to do homework, etc. Once the daily schedule is decided on, be sure to post it somewhere clearly visible. Consider employing role play when teaching your teen how to approach and manage social situations. Look for support groups for autistic teens that will help enhance these skills in a controlled environment. Keep verbal prompts simple and positive; emphasize what you want your teen to do more than what you want your teen to stop doing. For example, ask the teen to complete his or her homework before dinner, rather than asking him or her to stop playing video games and get to work because dinner will be ready soon. It will also prevent tense situations from becoming full-on arguments or outbursts. Likewise, they are often emotionally immature and too trusting, which may lead to bullying. Many teens on the autism spectrum have special gifts and unique perspectives which will, with the right encouragement and preparation, delight and enrich their peer circle. Anna Kaminsky Article reviewed by Dr. She earned her PhD in Psychology from the University of Toronto and completed a post-doc internship at our centre. Anna now works as a care coordinator at the The Hincks-Dellcrest Centre. You can follow Anna on Twitter at AnnaKaminsky1.

### 8: How To Deal With Angry Aspergers | Lamoureph Blog

## HOW TO HANDLE STUDENTS WITH ASPERGERS SYNDROME pdf

*Reading about Asperger's in a book or articles generally makes it seem that Asperger's is a clear cut, well defined and easily identifiable condition. In truth, people with Asperger's behave in many different ways and not always exactly how it is defined.*

### 9: Supporting Students with Asperger's Syndrome

*I'm going to ignore the fact that the DSM no longer includes Asperger's as a [www.enganchecubano.com](http://www.enganchecubano.com)'s remains a useful way to categorize people with very low social skills and very high IQ " and a high rate of manic-depression and suicide.*

## HOW TO HANDLE STUDENTS WITH ASPERGERS SYNDROME pdf

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