

PROFILE OF THE TYPICAL DEVELOPING MIDDLE SCHOOL STUDENT WITH AUTISM/AS pdf

1: How to Explain Autism to Typical Kids and Lots of Others While You're At It | What to Expect

In middle school, kids meet developmental milestones at widely varied times. You just have to walk into a middle school to see the huge variation in physical maturity. But there are certain cognitive and social skills middle-schoolers are working on developing by the time high school rolls around.

Personal friends share their thoughts and feelings as well as experiences. Some people on the autism spectrum tend to be very open, honest and willing to share themselves with others – traits close personal friends will value. Most people, whether neurotypical or on the autism spectrum, only have a few friends who meet this definition of a close personal friend. They might not be as ready to be open and honest and share personal information about themselves with you, so they feel uncomfortable when you share too much about yourself too soon. Some neurotypicals like to develop friendships slowly. When someone asks you questions about yourself, such as where you were born or went to school or what things you like, they are indicating that they have a possible interest in becoming your friend. Making friends has less to do with whether people like you than it does with whether you have interests or experiences that are similar to theirs, and whether you are also willing to share in their interests that are different from yours. Many people with autism have particularly strong interests in certain areas. Unfortunately, it might be that very few other people share those interests. Clubs where people with your special interest are likely to gather are excellent places to find friends. You could find people who share your special interests at museum workshops on your favorite topic, while volunteering to take care of your favorite animal at the zoo or animal rescue, in classes in your field or subject of interest, or at local events centered on your special interest. For example, some universities open up their star observatories for special community nights. The type of people who attend such an event likely will be as interested in stars as you are. The Internet might also be a place where you can find people who share your special interests. One popular forum for people on the spectrum is Wrong Planet , and many others are out there. It is important to self-advocate, to let others know what makes you happy or uncomfortable. Most neurotypicals are willing to respect these differences if they know about them. If you struggle with verbal communication, you can carry a card in your wallet or purse that explains what you need and share it with others as you choose. Miscommunication can make it harder for people on the autism spectrum to make and keep friends, too. Getting social experience and discussing social rules are good ways to clarify the hidden curriculum and make socializing easier and more rewarding.

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2: FREE SOCIAL SKILLS DOWNLOADS | www.enganchecubano.com

Profile of the typical developing middle school student --Profile of the typical developing middle school student with autism/AS --Where do we find the middle school student with autism/ AS? -- Formation of an Individual Educational Plan (IEP).

I just want her to be happy and have some friends of her own. She is a wonderful kid, and I hope someday others can see that. They know that their child has many wonderful qualities to offer others, but the nature of their disability, or more precisely, their poor social skills, often preclude them from establishing meaningful social relationships. This frustration is amplified when parents know that their children want desperately to have friends, but fail miserably when trying to make friends. Often, their failure is a direct result of ineffectual programs and inadequate resources typically made available for social skills instruction. For most children, basic social skills e. For children with ASD, the process is much more difficult. Whereas, many children learn these basic skills simply by exposure to social situations, children with ASD often need to be taught skills explicitly, and as early as possible. The present article addresses social skill deficits in young children with ASD by providing a systematic five-step model for social skills instruction, with particular emphasis placed on an emerging intervention strategy, video self-modeling VSM. Typical social skill deficits include: The cause of these skill deficits varies, ranging from inherent neurological impairment to lack of opportunity to acquire skills e. Most important, these social skill deficits make it difficult for the individual to develop, and keep meaningful and fulfilling personal relationships. And the lack of social skills programming is particularly troubling given that fact that many social skill difficulties can be ameliorated via effective social skills instruction. The long held notion that children with autism spectrum disorders lack an interest in social interactions is often inaccurate. Many children with ASD do indeed desire social involvement, however, these children typically lack the necessary skills to interact effectively. One young man I worked with illustrates this point quite well. After spending the morning in a self-contained classroom, Zach was given the opportunity to eat lunch with the general school population a time and place that produced many of the problem behaviors. As he was eating lunch, a group of children to his right began a discussion about frogs. As soon as the conversation began, he immediately took notice. So too did I. As he was listening to the other children, he began to remove his shoes, followed by his socks. In this case, Zach was demonstrating a desire to enter and be a part of a social situation, but he was obviously lacking the necessary skills to do so in an appropriate and effective manner. Many parents and teachers report that social situations typically evoke a great deal of anxiety from their children. Children with ASD often describe an anxiety that resembles what many of us feel when we are forced to speak in public increased heart rate, sweaty palms, noticeable shaking, difficulties concentrating, etc. Not only is the speaking stressful, but just the thought of it is enough to produce stomach-gnawing butterflies. Imagine living a life where every social interaction you experience was as anxiety provoking as having to make a speech in front of a large group! The typical coping mechanism for most of us is to reduce the stress and anxiety by avoiding the stressful situation. For children with ASD, it often results in the avoidance of social situations, and subsequently, the development of social skill deficits. When a child continually avoids social encounters, she denies herself the opportunity to acquire social interaction skills. In some children, these social skill deficits lead to negative peer interactions, peer rejection, isolation, anxiety, depression, substance abuse, and even suicidal ideation. For others, it creates a pattern of absorption in solitary activities and hobbies; a pattern that is often difficult to change. Once the assessment is complete, the next step is to discern between skill acquisition deficits and performance deficits. Based on this information, the selection of intervention strategies takes place. Once intervention strategies are implemented, it is then imperative to evaluate and modify the intervention as needed. That is, in real-life applications social skills instruction will not follow a lock-step approach from step one to step five. For instance, it is not uncommon for me to identify additional social skill deficits step one while I am in the middle of the

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implementation process step four. In addition, I am continually assessing and modifying the intervention as additional information and data are accumulated. The purpose of the assessment is to answer one very basic, yet complicated, question: What is precluding the child from establishing and maintaining social relationships? For most children, the answer takes the form of specific social skill deficits. For others, the answer takes the form of cruel and rejecting peers. And for yet other children, the answer is both. The evaluation should detail both the strengths and weakness of the individual related to social functioning. The assessment should involve a combination of observation both naturalistic and structured, interview e. I have developed the Autism Social Skills Profile ASSP to assist in the identification of typical social skill deficits in children with ASD, and to measure the progress the child is making in the program. Kathleen Quill also provides an excellent social skills checklist for parents and professionals in her book, Do-Watch-Listen-Say. For instance, if the evaluation reveals that the child is unable to maintain simple one-on-one interactions with others, then the intervention should begin at this level and not at a more advanced group interaction level. Or, if the evaluation reveals that the child does not know how to play symbolically or even functionally with play items, then the intervention will probably begin by teaching play skills prior to teaching specific interaction skills. After a thorough assessment of social functioning is complete, the team should then determine whether the skill deficits identified are the result of skill acquisition deficits or performance deficits. A detailed description of social skills assessment is beyond the scope of this article. Simply put, the success of your social skills program hinges on your ability to distinguish between skill acquisition deficits and performance deficits! A skill acquisition deficit refers to the absence of a particular skill or behavior. If we want this child to join-in activities with peers, we need to teach her the necessary skills to do so. A performance deficit refers to a skill or behavior that is present, but not demonstrated or performed. To use the same example, a child may have the skill or ability to join-in an activity, but for some reason, fails to do so. In this case, if we want the child to participate we would not need to teach the child to do so since she already has the skill. Instead, we would need to address the factor that is impeding performance of the skill, such as lack of motivation, anxiety, or sensory sensitivities. Sometimes adult interactions with children with ASD are similar to throwing a child a soft, underhand pitch. Although they are positive and well intended, they do not adequately prepare the child for more difficult peer-to-peer interactions. Too often, social skill deficits and inappropriate behaviors are incorrectly conceptualized as performance deficits. That is, we tend to assume that when a child does not perform a behavior, it is the result of refusal or lack of motivation. In other words, we assume that the child who does not initiate interactions with peers has the ability to initiate, but does not want to initiate performance deficit. In many cases, this is a faulty assumption. In my experience, the vast majority of social skill deficits in young children with ASD can be attributed to skill acquisition deficits. That is, children with ASD are not performing socially because they lack the necessary skills to perform sociallyâ€”not because they do not want to be social or refuse to be social. If we want young children to be successful socially, then we have to TEACH them the skills to be successful! Therefore, it is essential to focus on skill development when implementing social skills instruction. Most intervention strategies are better suited for either skill acquisition or performance deficits. The intervention selected should match the type of deficit present. That is, you would not want to deliver an intervention designed for a performance deficit, if the child was mainly experiencing a skill acquisition deficit. For instance, in the example above, if Tommy has not mastered the skill of hitting skill acquisition deficit, all the reinforcement in the world including pizza! If we want him to be a skilled hitter, we need to provide Tommy additional instruction on the mechanics of hitting a baseball. The same is true for social skills. If we want a child to be socially fluent, then we need to deliver effective social skills instruction. Once a thorough social skill assessment is completed and the team is able to attribute the social difficulties to either skill acquisition or performance deficits, social skills instruction is ready to begin. There are a variety of strategies that can be delivered to young children with ASD. The most important thing is that the strategies being delivered are appropriate to the unique needs of the child and that a logical rationale can be provided for using the intervention. The following strategies provide a sampling of techniques that can be

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implemented to teach successful social interaction skills to children and adolescents with ASD. Other than peer mediated interventions PMI , the strategies listed below are designed to address skill acquisition deficits. However, some of the strategies in particular, video self-modeling and social stories work equally well in addressing performance deficits. In addition, it is imperative that the child be reinforced continually for his effort and participation in the program. Selecting Intervention Strategies Accommodation and Assimilation

When selecting intervention strategies, it is important to consider the notion of accommodation versus assimilation. Accommodation, as it relates to social skills instruction, refers to the act of modifying the physical or social environment of the child to promote positive social interactions. Examples of this include: Whereas accommodation addresses changes in the environment, assimilation focuses on changes in the child. Assimilation refers to instruction that facilitates skill development that allows the child to be more successful in social interactions. The key to a successful social skills training program is to address both accommodation and assimilation. Focusing on one and not the other sets the child up for failure. For instance, one family that I worked with did a wonderful job of structuring playgroups for their child, and keeping their child active in social activities. However, they were becoming increasingly frustrated with the fact that their son was not making friends and still having negative peer interactions. The problem was that they were putting the cart before the horse. Similarly, providing skill instruction assimilation without modifying the environment to be more accepting of the child with autism also sets the child up for failure. This happens the moment an eager child with autism tries out a newly learned skill on a group of non-accepting peers. The key is to teach skills and modify the environment. This ensures that the new skill is received by peers with both understanding and acceptance. Social Skills Strategies As stated previously, social skills often need to be taught explicitly to children and adolescents with ASD. Traditional social skills strategies such as board games about friendships and appropriate classroom behavior tend to be too subtle for many children with ASD. For instance, a school counselor was frustrated with the progress she was making with a student with autism. Experience tells me that the concept of friendship is much easier to understand once you have a friend or two!

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3: Making (and Keeping) Friends: A Model for Social Skills Instruction

Profile of the typical developing middle school student --Profile of the typical developing middle school student with autism/AS --Where do we find the middle school student with autism/ AS? -- Ch. 4.

Those more severely impacted exhibit autistic characteristics at a relatively young age with unusual behaviors such as repetitive behaviors, self stimulating movements, resistance to change, and atypical reactions to sensory input. A number of disorders are included within the umbrella category of Autism Spectrum Disorder. While individuals with this diagnosis have more spoken language, they can exhibit significant delays in the pragmatic aspects of social interaction that prevent them from being able to hold a job or live independently. However, social impairments can prove to require a lifetime of support. The most essential feature of Childhood Disintegrative Disorder is a marked regression in multiple areas of functioning following a period of at least 2 years of apparently typical development and before age 10 years. Prevalence The most accepted prevalence rate for autism is 10 per 10,000, a rate derived from analysis of 32 separate prevalence surveys conducted between 1980 and 1990. This rate is highly contested however, with some autism advocates and professionals who work with this population, claiming an incidence rate of approximately 1 in 100. Without question, the prevalence rate has been steadily rising in the past decade, but whether this is due to improved diagnostic procedures or an actual increase in incidence is unclear. Characteristics The characteristics of autism can vary widely from individual to individual dependent on both developmental age and etiology. However, there are key characteristics that are apparent in some form in this population across all of the spectrum disorders. Individuals with autism will always have developmental differences in communicative function, social interaction skills, and behavioral characteristics that will be present to varying degrees. Communicative functioning in individuals with autism is often delayed, both in verbal and in nonverbal communication abilities. When language does develop, the individual may be unable to sustain conversation unless it involves something of personal interest to them, and abstract topics, such as emotions, may be rarely expressed. Nonverbal abilities are also impacted in autism, and social skills, such as maintaining eye contact and appropriate personal space, can be particularly difficult for these individuals. These deficits in communication can negatively impact the ability of these individuals to successfully navigate the social world of friendship, academia and work. Socially, individuals with ASD can be as diverse as their typical peers - seeking constant attention at one end of the spectrum, all the way to avoiding all contact at the other end of the spectrum. Their inability to express their desire for social contact in socially acceptable ways is a common issue. Students with ASD may lack the pragmatic, language, observation and imitation skills to participate in a majority of social situations. Additionally, people with ASD may also have difficulty with personal hygiene, conforming to dress codes, and auditory processing. They may have restricted interests and self-stimulating behavior which can negatively impact their ability to socialize easily or effectively. Some children can display self-injurious behavior such as biting, scratching, pinching, or hitting their own faces or bodies. These extreme behaviors often seem to have an underlying communicative function, such as expressing pain or hunger. Individuals with autism can also be drawn to ingest nonedible items, a condition called pica, which they share with a number of other disability categories. These individuals can often be alternately extremely sensitive or nonreactive to both sounds and touch. Impact on Learning There are several key characteristics of autism that must be taken into consideration when planning an instructional program for a student with autism. One primary issue with students with autism is the communication deficit that is inherent to this condition. A student with autism generally may not be able to communicate effectively with either peers or adults and will sometimes give the impression of understanding an instruction when such comprehension is not actually taking place. Verbal instruction should be short, simple and direct and supplemented with a visual cue if it is a new or unique instruction. Visual processing is quite good in most children with autism, and thus, they are highly motivated by visual information. An effective instructional program for a student with autism combines auditory

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instruction with some type of visual support. Personnel who work with individuals with autism will need to be careful and pay attention to training about the types of prompts used with this population as the students frequently become prompt dependent. Some children with autism will wait for an adult-directed verbal or physical prompt even when they know what is expected of them. Once this dependency on cues develops, this habit is very difficult to break. An effective instructional program for individuals on the autism spectrum needs to also address the difficulties with generalization of topics and information learned and experienced by these students. Students with autism will sometimes focus on irrelevant aspects of an activity rather than the important points, making the design of instructional programs very challenging for teachers. Instruction works best when the teacher isolates or highlights key points of what is being taught in order to insure that students are focusing on and learning the intended lesson objectives. Students with autism also typically respond poorly to changes in routine, sometimes resulting in problem behaviors or self injurious behaviors. These problem behaviors can impact the teacher-student, peer-student, or the parent-child relationship, and that perhaps is the greatest challenge facing an effective instructional program for students with autism. Children with autism can prove very challenging to teach, and they often need far more instruction than other students in order to grasp concepts. In the face of problem behavior and no emotional connection with the student, the teacher may find it particularly challenging to continue working towards social and instructional interactions that may require intensive repetition and practice. Managing Student Behavior For decades, behavior management has been guided by two basic tenets. One, behavior can be analyzed and understood, and two, behavior is determined and caused by the environment in which it takes place. Each behavior serves some specific purpose for the student displaying the behavior. Typically, this type of maladaptive behavior in students with autism is communicative, as the individual has not yet developed a more effective way of communicating to others. It often is the only way the child has learned to ask for preferred objects or activities or alternately escape painful or unwanted tasks or environments. When the student receives the desired result, this maladaptive behavior is, of course, reinforced in the perspective of that student and is likely to be used again. Particular attention must be paid by a third party observer to specific details of the environment in which the challenging behavior takes place. A third party can often better observe the environment and resulting behaviors more objectively than individuals involved in the situation. The particular behavior may serve different functions in different environments; for example, the same act of aggression may be used either to receive attention from a preferred caregiver or to escape an unwanted task or sensory stimuli. If the specific purpose of the behavior is not determined, any intervention employed will meet with little success and may even compound or escalate the behavior. Once the teacher can determine what the behavior is communicating, a more appropriate method of communication can be introduced and taught to the student. Building on the pre-existing skills of the student, teachers can devise an effective communication strategy that will lead to better outcomes for both the student and those around him. Teaching Strategies Children with autism pose a challenge because their unique set of strengths and challenges requires individualized interventions that are not typically a part of teacher preparation programs unless teachers are trained in applied behavior analysis or positive behavior supports. Teachers of students with autism must be aware of the characteristics of autism in order to develop an effective instructional program that best serves the needs of this unique population. The classroom setting and all instructional materials must be organized to best reflect the learning styles of these students, and the delivery of instruction must also follow suit. However, making these accommodations in setting and style is not difficult for teachers who follow established best practices for all students. In fact, when teachers adapt instructional organization and delivery for students with autism, the likely result will be a higher degree of learning for the entire class. First, the teacher must design the classroom and all instructional materials to contain visual supports and cues. Students with autism typically have far better visual processing skills than auditory processing skills and respond well to picture symbols and other visual information. Picture symbols can be used to create a personal visual schedule for the student and can be instrumental in minimizing many problem behaviors. Being able to anticipate transitions and changes in routine ahead of time can be a powerful

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emotional support for these students. Picture symbol cues may be posted in readable areas. The classroom environment itself should have clearly marked delineations between work and leisure areas. Second, the teacher should use instructional goals in the daily routines of the student. This allows for multiple opportunities to practice newly acquired skills throughout the day. This is a technique that is often used in general education, especially with reading instruction. Often targeted goals can be infused in a variety of lessons by using thematic teaching, a teaching style that utilizes extended teaching units based on one central idea or theme. Some additional classroom planning may need to take place, but most effective teachers probably are using some form of integrated curriculum in their classroom even before they have a student with autism in their class. Third, forming strong connections with the parents of children with autism can be a very effective instructional support. These students typically need a great deal of extra practice to master many academic and social skills, and the parents can be very useful as tutors in the home setting. The teacher should collaborate with the parents at every step, and the parents should be instrumental in choosing the goals and skills they would like to work on with their child. Support systems and activities should be as simple as possible to ensure their ready application.

Assistive Technology Due to the inherent difficulties with communication experienced by individuals with autism, an alternate communicative support system can be designed to help support productive social interaction. Individuals with autism typically respond best to visual information that is support to written or verbal labels. A communication system can incorporate items as simple as specific short verbal phrases, written notes, or any number of augmentative communication devices. This visual information can be presented in the form of simple line drawings or in photographs of actual people and objects. Once the student has learned the significance of these pictures i. While communication systems can be helpful for many children in general, for children with autism, these augmentative communication techniques are absolutely essential. For many of these children, this is the only way that they are able to communicate their own needs and desires. Communication systems for children with autism can include sign language, picture symbols, electronic communication devices, and even computer programs and video modeling. Using these strategies can enable the child to hold conversations with others, request items, escape from undesirable situations, and make choices for himself. Assessment to determine the best medium to use must be performed prior to the introduction of the new communication system, and an extensive training period may be necessary before the student learns to use the system appropriately.

Organizations There are a number of excellent organizations that can help support classroom instruction for students with autism spectrum disorder ASD. The information presented in this module is intended as just a very brief description of ASD and its impact on learning. Much more in-depth information and instructional strategies can be accessed through the following organizations: They do this by increasing public awareness about the day-to-day issues faced by people on the spectrum, advocating for appropriate services for individuals across the lifespan, and providing the latest information regarding treatment, education, research and advocacy. They are also committed to raising the funds necessary to support these goals. It provides a variety of resources in the areas of adult transitions, technical assistance in implementing evidence-based interventions for children, and community outreach services.

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4: Adolescent Language Development: Students in Secondary School

Teachers of students with Autism Spectrum 1. _____ will develop social understanding skills as measured by the benchmarks listed students who have a profile.

April 29, By Leigh Merryday Autism awareness and acceptance are good things. The more the average person knows about autism, the better it will be for the community – especially our autistic members. Autistic people vary greatly in how they are impacted by their differences – from highly articulate individuals living full lives and advocating for themselves and others to severely disabled autistics unable to communicate in any way. How do we explain it to the unaffected kids who will inevitably encounter other children on the spectrum at school, church, and birthday parties? How do we help them to become not merely tolerant, but to welcome their spectrum peers and interact with them? I am now beginning to be asked questions by children and adults, curious about my son and his needs. I now have to learn how to explain important things about my child without having to deliver a dissertation. And I have been a teacher and seen the discomfort typical kids have around those who are different – as well as the devastating effects that social ostracism has on the kids who are different. We need to do better. Here are some guidelines and ideas to help typical kids better understand their peers on the autism spectrum as well as for autistic kids to find understanding for themselves. Honest questions are not rude. How else will children learn? There is no need to shame a child for an innocent question. She knows we have to watch out for him just a little bit more and that we like him just as he is. Right now, that is good enough. She loves him and is learning to make accommodations for him in order for them to have fun together. The Gaming System Analogy. This is an explanation tailor-made for elementary-aged kids. She asked them what would happen if they took a game meant for one game system and put it in another. It led to lots of good questions from the class, and her son got an opportunity to share his unique experience with his friends who are now better able to understand him. You might also want them to check out *Auti-Sim*, an online game that navigates a playground through the eyes of an autistic child with auditory hypersensitivity. When discussing an autistic child, keep the conversation focused on what he or she can do. Perhaps he may not speak, but he loves playing in the sprinkler or dancing to music. Make suggestions for how to include everyone and solicit suggestions from the other kids. Autism is not an intellectual disability. A child may understand perfectly well without speaking and may have ways to communicate his wishes. Include them in local autism events. Many cities have chapter of CARD or similar organizations. They often offer family days, fundraising fun days, etc. Better yet, help bring such events to your community and involve typical kids. Sports such as "Buddy Ball," in which typical kids join in the fun with special needs friends, can be a great day of fun. If you are a parent, ask movie theaters to offer "sensory friendly" movie show times. Ask whoever organizes local Santa events to add a couple of hours on the end for special needs children and offer to help organize it. Talk to your local library about offering autism-friendly story times. Ask the fire and police departments to hold special hours during "Touch the Truck" events for children with sensory issues. Talk to your school district. Ask whether your district offers programs to educate children about differences. This is often done in elementary, but not so much at the middle school level. Take autism out of the closet. Older children and middle schoolers are often cited for being cruel. Yet, after teaching 15 years of middle school, I can tell you that they are quite capable of empathy and altruism. The key to getting older kids to understand is to be open and honest. Remember that, developmentally, older kids still process the world through a self-filter. They will move mountains when they see it as necessary. If the school has enough siblings for such a group, then they just might have enough autistic kids for their own support group as well. If you attend religious services, then you may view your church to be an extended part of your family. In that event, ask your faith leader if you could speak to them. Talk to them about your child so that they can better understand him. A friend of mine is fortunate enough to attend a church whose members make their special needs kids an integral part of their church community. What a wonderful experience for all involved. Read books about autism and

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autistic characters. There are wonderful books for all ages – both geared for typical as well as autistic kids. As a teacher and a school librarian, I cannot emphasize enough the power of a book to change hearts and minds. When else do we have the opportunity to experience the mind and life of another? Check out this list. Encourage older kids and teens to reach out to the autism community. If you live in a metropolitan area, there are probably some existing groups. But, if not, there are many online forums, groups, pages, etc. The opportunity to connect to kids and young adults like themselves could be both life affirming and changing. We all need people we feel we can talk to. So, this April for Autism Awareness Month, why not do just that and spread some awareness? Not only will you be helping to make the world just a little bit more welcoming for those on the autism spectrum, you will help to grow the worlds of those not touched by autism. With a collective effort, we could actually help turn autism awareness into autism acceptance.

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5: Social/Relationships - Autism Society

2 3 INTRODUCTION Refer to Module 1: Characteristics Middle and high school students with Autism Spectrum Disorder (ASD) are increasingly being taught in general education settings.

The purpose of this article is to assist others in recognizing and understanding the subtle and not so subtle problems that do occur. The presence or intensity of the following social communication and language characteristics of high-functioning individuals with autism spectrum disorders may vary by age and by individual. Some of these characteristics are found in others who do not have an autism spectrum disorder, for example, in individuals with language or learning disabilities. With increasing age and increasing communication competency, most of these characteristics lessen or disappear for those who do not have an autism spectrum disorder. It is the frequency and persistence of some of these characteristics from childhood into adulthood that exemplifies the syndrome of autism.

Language Characteristics Although the ability to exchange meaningful messages is the heart of communication, it is important to look at the characteristics of the language used to convey the messages. Individuals with autism spectrum disorder may:

- Appear to have a good vocabulary and a sophisticated command of the language system based on their verbal utterances. In some instances sophisticated language may reflect repetition of bits of dialogue heard on television or in the conversation of others. This mitigated echolalia may or may not be used in appropriate contexts. Of course, some individuals may have an excellent verbal repertoire.
- Appear to have difficulty with figurative language such as idioms, metaphors, similes, and irony.
- Appear to have difficulty recognizing in contextual conversational or text print situations that certain vocabulary words may have alternative meanings.
- Appear to respond to suggestions, directions, or information in a very literal manner.
- Appear to have some difficulty grasping the main idea, drawing conclusions and making other inferences from conversation, text, TV programs, and movies.
- Appear to have difficulty understanding humor in television programs, movies, cartoons animated and static , and everyday interactions.
- Appear to understand basic sentence structure but may have more difficulty with more complex sentences that contain embedded and subordinate clauses. May primarily attend to key words rather than to the message conveyed by the grammar; may also have difficulty understanding the grammar and thus resort to the key word strategy.
- Will experience difficulties in reading comprehension if comprehension of oral language is poor. May not be connecting idea to idea from conversation or text, e.

Communication within a social situation can be more challenging than just understanding the words of others. There are unwritten rules that govern interactions and these may change depending on the circumstances and whom one is talking to. The individual with an autism spectrum disorder may:

- This impacts social interaction and the understanding of perspective in narratives whether in text, movies, or TV format.
- Have difficulty understanding that other people have unique thoughts, ideas, and personal motivation.
- Give no or minimal eye contact during an interaction; eye contact may be distracting or provide more sensory information than can be useful or processed by the person with ASD.
- Speak too loudly or too fast unless taught about the needs of his or her communication partner.
- Have difficulty staying on topic; may be distracted by associations cued by his or her own words or the dialogue of others.
- Talk aloud to self in public situations and be unaware that others can hear the content of the self talk and will make judgments about them based on what was heard.
- Have difficulty attending to an auditory message if stressed, agitated, or highly stimulated.
- Make statements that are factually true but socially inappropriate because of lack of awareness of the impact of his or her statement on others.
- Not know strategies to initiate, terminate, or facilitate a conversation.
- Have difficulty knowing that he or she has the responsibility to give the communication partner sufficient information to understand the message. In addition, he or she may have difficulty surmising what information the partner already has and what new information is needed.
- Not monitor his or her own comprehension of incoming messages and therefore does not seek clarification, when needed.
- Seek to promote an inflated or positive self image by using pseudo-sophisticated language; sometimes

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this strategy is used to mask the degree of underlying comprehension problems that the person really experiences during daily living situations or within school activities. Lie with the intent of getting people to leave him or her alone rather than with an intent to deceive or manipulate. In general, is not effective at deception. Utilize, on occasion, old behavior or communication patterns for more appropriate verbal social communication. This might include nonverbal means of communication such as aggression, passivity, pacing, self stimulation, self abusive behavior, or echolalia. Talk about unusual topics such as fans and The Weather Channel because he or she finds the topic fascinating; the display of knowledge may take place irrespective of the interest of the communication partner in the topic. Be nonselective about appropriateness of time, place, and person with whom to discuss certain topics. Be perseverative or bothersome on limited topics. May ask repetitive questions. Desire social interaction, but has difficulty knowing how to initiate and maintain a friendship. Experience difficulty recognizing the lies, deceptions and mischief of others. Miss nonverbal cues of others and nuances in social situations; may be taught to recognize some instances. Recognizes and identifies basic emotions of others and self mad, happy, sad but has more difficulty with recognizing more subtle expressions of these feelings or emotions. Have difficulty recognizing, identifying and understanding various other states of emotion expressed by others and knowing what to say in that situation. Have difficulty making predictions about the consequences of a situation and understanding the motivation of others; will usually be very concrete and socially naive. Have difficulty multi-tasking, i. Other Characteristics of Autism Spectrum Disorder that May Be Present Characteristics other than language difficulties may also be evident during interaction opportunities and impact the communicative exchange in an indirect way. Sometimes actions or comments during an interaction may provide clues regarding the need for additional support in other life areas of the person with ASD. Sometimes knowing about other characteristics promotes more patience and understanding in the communication partner. Appear very egocentric in terms of concern for others, their feelings, their needs, and their ideas. Prefer that experiences or events be interpreted in black and white or very concrete terms; this expectation is at odds with the complexity of most situations. Have difficulty getting the gestalt or big picture of a situation rather than just the details. Can obsessively persist in mulling over past, present, or future events or ideas. Be resistive in varying degrees to changes in routine or environment. Have splinter skills e. Exhibit clinical anxiety, varying degrees of depression, or other mood disorders. Express thoughts about suicide; may not have a clear understanding of the finality of death. Exhibit clinical obsessive-compulsive disorder. Act like a perfectionist- does not like to make mistakes. May have sensory issues; be under responsive or sensory seeking; can get overwhelmed by sensory overload. Experience encounters with law enforcement and the judicial system as a consequence of social challenges and emotional regulation. Be physically as well as socially awkward. Have difficulty with fine motor skills, especially handwriting. Not perform well when under pressure or stress. Have difficulty utilizing relaxations strategies to reduce stress. Have difficulty with executive function skills- planning, organization, flexibility, monitoring, etc. Have difficulty with reading comprehension but be able to decode and fluently read aloud. May have excellent memory for detail but not working memory, i. For insights into the language and social communication problems of children and adults with autism spectrum disorder, consider reading some of their biographies, autobiographies or novels. Thinking in pictures and other reports from my life with autism. The curious incident of the dog in the night-time. Pretending to be normal: Other relevant books include: Thinking about you thinking about me. Indiana Resource Center for Autism. Bloomington, IN irca indiana.

6: Autism - Project IDEAL

These problem behaviors can impact the teacher-student, peer-student, or the parent-child relationship, and that perhaps is the greatest challenge facing an effective instructional program for students with autism.

7: Developing a Student Learning Profile

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Its 96 students in grades six through eight are a nearly equal mix of children with and without autism, a ratio rarely if ever achieved in a typical public middle school.

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