

ASD Presentation For RTL
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Presentation by
Paulette Thompson and Peter Agnew

What is ASD?



- Autism Spectrum Disorder is a relatively new term
- A serious developmental disorder that impairs the ability to communicate and interact.
- There are overlaps between the currently defined subgroups.
- Defined in the tenth edition of the International Classification of Diseases (ICD-10 research criteria) and the American Diagnostic and Statistical Manual (DSM-IV)

Characteristics of ASD

DSM-1V:

- **Impairments with communication** - understanding and using verbal and non verbal communication
- **Impairments with social interactions** - understanding and using social behaviour which affects their ability to interact with others
- **Difficulty thinking and behaving flexibly** - leads to obsessive, restricted or repetitive behaviours or interests



People with ASD may also have different ways of learning, moving or paying attention.

DSM-IV

All people diagnosed with ASD share 3 Characteristics.

1. Understanding and using Verbal and non verbal communication.
2. Understanding Social Behaviour, which affects their ability to interact with others.
3. Thinking and behaving flexibly which may be shown in restricted, obsessional or repetitive activities or interests.

DSM-5

- Released in May 2013.
- The revised version.
- Latest manual does not include Aspergers Syndrome.
- It has been subsumed under the general heading of ASD.
- Categorisation has been reduced from the 'Triad' to the 'Diad' with "social" and "communication" being considered as one area of need.

ASD in The Classroom



What Might it look like in the Classroom?

Communication

- Difficulty understanding and following instructions
- Doesn't contribute to discussions
- has difficulty interpreting gestures
- Doesn't verbally express wants and needs and may revert to hitting to get attention
- Difficulty speaking and understanding
- Monotone speech that lacks expression



What Might it look like in the Classroom?

Social Interaction

- Plays on their own, has difficulty making and keeping friends
- Has difficulty taking turns and sharing equipment
- Has difficulty managing emotions and understanding how other children feel
- Has difficulty dealing with conflict and making decisions
- Does not make eye contact



What Might it look like in the Classroom?

Behaviours

- Is fixated on one activity, theme or object
- Rocking, banging, stimming
- Covers ears when noise is too loud
- Meltdowns when frustrated
- Makes loud noises



It is important to remember that just because a child displays some of these traits or behaviours, it does not necessarily mean the child has ASD; a professional diagnosis is needed.





DIAGNOSIS

Who Does the Diagnosis?

It is diagnosed by a team of at least two members of the following groups:

- Paediatrician
- Psychiatrist
- Psychologist
- Speech-Language Therapist
- Occupational Therapist



The Process

- Interviews with the person (at a level appropriate for their age), and their family/whanau.
- Observing the child or person.
- Medical evaluation.



Other Things That Might be Assessed



- Social and emotional abilities.
- Adaptive functioning (Life skills).
- Cognitive abilities.
- Neurological abilities.
- Vision and Hearing.
- Sensory and motor abilities.
- Occupational therapy and physiotherapy needs.
- Personal interests and activities



The Report

1. The diagnosis;
2. Specific information about how ASD affects this person.
3. The person's eligibility for various services and benefits.
4. Interventions and effective strategies.
5. Any medication.
6. Family/Whanau support needs, further assessment and referrals.
7. Sources of further information or support.

Understanding Behaviour

- Behaviour and its purpose from the perspective of the individual with ASD.
- Identification of challenging activities in the classroom and some possible solutions
- Understand the purpose of the behaviour from the perspective of the student
- Tantrums vs Meltdowns
- Regulating emotions



Interventions



Early Intervention



Pivotal Skills

1. Effective receptive and expressive communication.
2. Gaining and maintaining attention.
3. Finding and using motivation.
4. Teaching how to learn through observation of others.
5. Structured teaching to generalise new skills.

Types of Interventions

- Standard Therapies - **Speech and Language, applied behaviour analysis, Lego**
- Medications
- Behavioral interventions: **designing routines, assigning tasks, implementing silent signals, setting expectations**
- Alternative and Augmentative Communication: **hand signals or pictures to represent things and link them to spoken words**
- Manipulation:
- Sensory: **deep pressure, brushing, weighted vests, swinging, beads, fidget toys etc**



Types of Interventions cont

- Medical procedures
- Diets and supplements
- Technology: **ipads, social computer games, Smart Boards, sound cancelling headphones, electronic communication devices**
- Other (Animals, Environmental, Physical activities, Relaxation, Spiritual).
- Service-based interventions



Implementing Interventions

Planning, selecting, implementing, reviewing and evaluating strengths-based, ecologically, valid, culturally responsive, individualised interventions for specific children with ASD

Development of pivotal skills that underpin and support all their learning.

There is no **one** intervention that is recommended for educating **all** children with ASD.



The ASD- Ready Classroom

In an ASD- ready classroom:

- Children know what is happening and have strategies that support them to learn
- Verbal instructions complimented by visuals and demonstrations
- Children have successful ways of communicating and requesting breaks
- Children engage and participate - their interests are used for learning
- There are environmental adaptations (volume, boundaries around learning stations)
- There are visual supports (visual timetables)
- The teaching approaches are adapted - visual
- Classmates are understanding and supportive
- Consistent routines

