



Asperger Syndrome

Asperger Syndrome (AS) is one of the disabilities on the autism spectrum. Determining if a child has AS is complicated in part because AS can be confused with a number of other disabilities such as speech or language disorder, ADHD, or emotional challenges. Sometimes the term “quirky” is used to describe behaviors. Research on Asperger Syndrome continues and understanding of AS is evolving.

Children with AS typically experience difficulties with social skills and pragmatic language, which means using language appropriately in different social situations. Social relationships are usually a struggle and, as a result, children with AS can experience emotional difficulties such as depression and anxiety. They may also have difficulty with motor skills, flexible thinking and sensory sensitivities. Areas or topics of intense interest are often present along with strong skills in specific academic areas.

In school, some of these students may qualify for special education, while others may not need these services. One saying is: “If you have seen one child with Asperger Syndrome, you have seen *one* child with Asperger Syndrome,” meaning that each child with Asperger Syndrome has unique characteristics.

As with all disabilities it is important for parents to be informed and involved in decisions about their child’s education while assisting their child with challenges and utilizing their strengths.

Other Packets and HELP sheets are available on topics related to:

- Advocacy and Communication
- ADHD/ADD
- Assessment
- Behavior
- Bullying
- School Discipline
- Individual Education Plans (IEP)
- Learning Disabilities
- Resolving Disagreements
- 504 Plans
- Regional Centers
- Speech and Language Difficulties
- Transition to Adulthood

Our Novato and Fairfield libraries have articles, books, DVD’s/videos and other materials. We also offer special needs related workshops, support groups, and one-on-one consulting with Parents Advisors. Visit our website for more information at www.matrixparents.org or call our toll free Help Line at 1 (800) 578-2592.

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Asperger Syndrome Resources

Websites

Autism Society of America www.autism-society.org
MAAP Services for Autism & Asperger Syndrome www.asperger.org
Michelle Garcia Winner's Center for Social Thinking www.socialthinking.com
Nat'l Institute of Neurological Disorders and Stroke www.ninds.nih.gov/disorders/asperger
O.A.S.I.S. Online Asperger Syndrome Information and Support www.udel.edu/bkirby/asperger/
University of Southern CA www.aspergerssyndrome.org

Books*

Asperger Syndrome in Adolescence: Living With the Ups, the Downs and Things in Between (2003), Willey, editor, and Jackson
Asperger Syndrome and Sensory Issues: Practical Solutions for Making Sense of the World (2000), Myles, Cook, Miller, Rinner, and Robbins
Asperger... Que Significa Para Mi? (2000), Faherty, Sicoli, Gilpin and Simmons
The Complete Guide to Asperger's Syndrome (2007), Attwood.
Freaks, Geeks & Asperger Syndrome: A User Guide to Adolescence (2002), Jackson
Navigating the Social World: A Curriculum for Individuals with Asperger's Syndrome, High Functioning Autism and Related Disorders (2002), McAfee and Attwood
No More Meltdowns: Positive Strategies for Managing and Preventing Out-of Control Behavior (2008), Baker
The OASIS Guide to Asperger Syndrome: Advice, Support, Insight, and Inspiration (2001), Bashe and Kirby and Attwood
The Out-of-Sync Child: Recognizing and Coping with Sensory Processing Disorder (2006), Kranowitz
Perfect Targets: Asperger Syndrome and Bullying, Practical Solutions for Surviving the Social World (2003), Heinrichs and Smith Myles
Quirky Kids: Understanding and Helping Your Child Who Doesn't Fit In—When to Worry and When Not to Worry (2003), Klass and Costello
The Social Success Workbook for Teens: Skill Building Activities for Teens with Non-verbal Learning Disorder, Asperger's Disorder & Other Social-Skill Problems (2008), Cooper
A Parent's Guide to Asperger Syndrome & High Functioning Autism: How to Meet the Challenges and Help Your Child (2002), Ozonoff, Dawson, and McPartland,

Books for Children and Siblings*

Adam's Alternative Sports Day: An Asperger Story (2008), Welton
All Cats Have Asperger Syndrome (2006), Hoopmann
Bullies Are a Pain in the Brain (1997), Romain
Relax (1993), O'Neill

*all of these books are available for checkout in one of the Matrix Libraries, as well as other titles on Asperger related topics

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Asperger Syndrome – An Overview

Asperger Syndrome is considered by most to be an autism spectrum disorder (ASD). Other ASDs include: classic autism, Rett syndrome, childhood disintegrative disorder, and pervasive developmental disorder not otherwise specified (usually referred to as PDD-NOS). Below we provide information on key characteristics of children and adults with Asperger Syndrome. On the following pages you will find information on how these areas of challenge relate to assessment, social skills, behavior at home and at school, sensory needs, and the educational implications for a child with AS.

Language/Communication

Parents usually sense there is something unusual about a child with AS by the time of his or her third birthday, and some children may exhibit symptoms as early as infancy. Unlike children with autism, children with AS have typical speech development during their toddler and preschool years and retain those early language skills. Language differences include unusual language use and difficulty with pragmatics (use of language):

- Use of a large vocabulary and excellent grammar, at a level higher than peers
- Sounding like a “little professor” when they speak
- Literal interpretation of what others say
- One-sided conversations with an abnormal and/or intense interest in one or two narrow areas of interest such as train schedules, dinosaurs, Pokémon, the Revolutionary War, certain electronic devices, etc.
- Difficulty “getting” jokes and understanding idioms such as “raining cats and dogs”

Social Skills

Children with AS have difficulty with friendship skills due to:

- Difficulty participating in age appropriate social language
- Unable to understand and respond to the emotions of others
- Responding inappropriately to peers and adults
- Poor reciprocal conversational skills
- Difficulty reading facial expressions or other non-verbal cues.

Motor and Sensory

Other areas of concern can include:

- Delays in motor development. Examples: crawling or walking late, awkward running, clumsiness
- Sensory sensitivities. Examples: adverse responses to foods or textures, as well as hyper-sensitivity to touch, sound and temperature.

Restricted Interests/Rigidity

Restricted interests and insistence on sameness and routines are frequently observed in children with Asperger Syndrome including:

- Pre-occupations with single topics which may limit development in other areas
- Resistance to changes in a schedule
- Insistence on completing a task even if time has run out
- Insistence on strict adherence to rules

Difficulties with School

Children with Asperger Syndrome frequently are not identified until they are school age. Their social skill and communication difficulties become more apparent at that time as they are in daily contact with children their same age. They have a tendency to have uneven or scattered academic skills often having exceptional ability in one area and struggling in other areas. Difficulty with transitions, varying from routines, other children who do not adhere to classroom/playground rules, and their social awkwardness can mean that for children with Asperger Syndrome school is challenging even when they are of average or above average intelligence.

Teens and Adulthood

Although diagnosed mainly in children, AS continues into adulthood. It is important to determine if your child has Asperger Syndrome as early as possible so that interventions can be provided. The teen years are challenging for every child and for children with Asperger Syndrome their difficulties with social interactions can be deeply troubling for them. This can result in emotional problems such as anxiety and depression. Adults should be aware of this possibility and work to support these children during this time. It is important to provide opportunities for them to develop better social skills in structured group settings or in counseling. It is also important to provide them with emotional breaks from social pressures. This might mean ensuring that they have a “home base” at school where they can escape the stress of school and the social demands. Provide students with appropriate choices and options to address their feelings of discomfort, fears, or building rages.

Assessment and Diagnosis

The diagnosis of AS is complicated because there is not agreement on which tests or assessments are most accurate. In fact, because there are several assessments in current use, each with different criteria, the same child could receive different diagnoses, depending on the assessment tool used. A diagnosis would be done by a medical or mental health professional. Assessments or evaluations done by schools determine eligibility for special education services under one of the qualifying categories of eligibility.

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Assessment of Asperger Syndrome

The diagnosis of Asperger Syndrome (AS) is complicated by disagreement over which assessment tools or tests are the most reliable. The same child could receive different diagnoses depending on the assessment tool or test and the professional. Also, a number of other disabilities have similarities to Asperger Syndrome and/or children may have more than one condition. Some disabilities with similar traits include high functioning autism, nonverbal learning disorder, ADD/ADHD, and obsessive-compulsive disorder.

If you have concerns about your child's development, speak with your pediatrician who will do a developmental screening. If this screening or other professionals raise concerns, it may indicate a need for further assessment or a comprehensive team evaluation to either rule in or rule out AS. This team generally includes a psychologist, speech therapist, educator, and additional professionals **who have expertise in diagnosing children with AS**. If you are requesting an assessment from the school, their objective is to determine if your child has a disability which qualifies them for specialized education services. A child determined by the school to have Asperger Syndrome could qualify for services under the category of autism. See Matrix Assessment packet of information.

A number of assessment tools may be used to determine Asperger Syndrome. Checklists and rating scales should not be used in isolation. Some current assessments specific to AS:

- Pervasive Developmental Disorders Screening Test – 2nd edition (PDDST-II)
- Social Communication Questionnaire (SCQ)
- Autism Diagnostic Observation Schedule (ADOS)
- NEPSY Neuropsychological Assessment

When your child is assessed by a specialist, a psycho-social evaluation should include a thorough history addressing motor and language development as well as personality and behavior differences and your child's current abilities in the following areas:

- **social/emotional abilities** – including problems in social interactions and friendships
- **cognitive abilities** (intelligence)
- **language and communication skills**
- **adaptive (daily living) skills** appropriate for your child's age
- **academics** (achievement levels in school)
- **sensory-motor** – including heightened sensitivities to sight, sound, smell, taste, touch, and perception of movement and position and the ability to modulate this input

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Asperger Syndrome & Behavior

Behavior problems can occur from misreading social situations, depression, anxiety, sensory overload, and other stressors. Some common behaviors include rages or meltdowns, withdrawing, and argumentativeness. Depression or anxiety can result from lack of friends and feeling left out of social interactions. Anxiety or “overload” from school problems might result in school refusal. Argumentativeness can come from rigidity, when the child feels things need to happen by a schedule or a certain rule isn’t being followed.

Understanding Behavior

All behavior serves a function or has a purpose: to escape, protest or to gain something. Identifying the function of a behavior is not always easy. To change behavior, the purpose of the behavior needs to be understood. A behavior may be to:

- protest a request or task
- gain an activity that is interesting or desired
- escape external stimulation i.e. noise, people, lighting

Example: if a child rages when given a math paper to escape the work, and then doesn’t have to do the math paper, the child may rage again about math papers as the rage met the function to escape the undesired activity.

Once the purpose of a behavior is understood, an acceptable behavior that serves the same purpose as the undesirable behavior should be taught. In the math example, the child is taught to ask for a short break and then seek help. Positive approaches are not based on punishment but on prevention: anticipating what may set off or trigger the behavior, changing the environment to minimize triggers and teaching and reinforcing new behaviors.

If your child is in **special education** and if behavior is getting in the way of his/her learning or the learning of other students, a behavior goal or behavior plan should be added to the IEP. See our packet, **Behavior Issues and Special Education**, for more information. A behavior plan can also be part of a 504 plan, or you can develop your own home plan!

A few tips

- Give advance warnings and describe changes that may be upcoming
- Use neutral words that give a specific rule for the future “that was unexpected when you touched the girl’s hair, people expect others to ask before you touch their hair” instead of “that was bad, don’t do that again.”
- Rehearse expected behavior before going into a specific situation
- Explain to others that there may be unexpected behavior and how they might talk with your child about what is expected.
- Think about environments your child goes into and ways to remove major triggers.

Difficult behaviors can take a toll on parents, school staff, friends and family. Seek help. Often when close to difficult situations, being objective is hard yet needed for change!

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Sensory Sensitivities and Asperger Syndrome

Many parents of children and youth with Asperger Syndrome (AS) describe their children as having a variety of sensitivities related to touch, taste, sound, smell and sight. What causes this is not well understood. Several other disabilities also result in extreme reactions to sensory stimulation and many books are now available on this subject. Normal levels of input may be too little or too much and children may have both hypo (low) and hyper (high) reactions. Sensitivity can include:

- Picky eating, avoiding foods with certain textures or smells, or even food that touches another food on a plate
- Avoidance of bright or fluorescent lighting
- Bothered by scratchy fabrics, labels or tight fitting clothes – tactile sensitivity
- Avoiding others' touch or touching others too much
- Difficulty with noise - such as school lunch room, P.E. or assembly noise
- Avoiding messy items such as paint or glue
- Unusual reactions to temperature resulting in not wearing coats when cold or wearing winter coats when outside temperatures are warm
- Overwhelmed by too many stimuli at once

Hypersensitivity and Hyposensitivity – A function of the brain

Living with either hypo- or hyper-sensitivity to sensations creates challenges, especially when the environment—such as school—is in large part beyond one's control! The brain is what determines how we respond to sensory input. If the brain does a poor job of integrating and regulating sensations, this will create many difficulties in a child's daily life.

A child with **hypersensitivity** to sensations can be easily overwhelmed by the stimulation around him. Children with these challenges may have a hard time filtering out some external stimulation. This hypersensitivity, also known as sensory defensiveness, may cause a child to:

- hear voices two rooms away as loudly as words spoken directly in front of them.
- be uncomfortable with the seam in the inside of their socks the way someone else would feel a sharp rock in their shoe.
- become extremely anxious in a brightly lit classroom because the flickering of the fluorescent lights is bothersome.
- become nauseous at the sight of certain foods and textures without even eating or touching them.

Like a mother with morning sickness, these feelings are very real for the hypersensitive child. They cannot simply get over their aversions on sheer willpower.

A child with **hyposensitivity** requires more than average stimulation in order to regulate oneself. For example, a child with low sensitivity to sensations, or **hyposensitivity**, may:

- be likely to stand too close to others or bump into people frequently. This behavior may occur because the child cannot feel his body in space the way a typical child can. Like having a foot that falls asleep, the child's whole body may have reduced feeling as he moves from place to place.
- not realize he needs to wear a coat on a chilly day, because he doesn't feel the cold
- be more likely to get burns because his body does not register that something is hot as quickly as other people would
- appear to be clumsy when there may actually be a lack of connection between what happens in the body and the sensations that register in the brain.

Some students may benefit from occupational therapy (OT) which can help them regulate how they respond to sensory stimulation. This may involve a "sensory diet" which means that throughout the day a student will be given opportunities to participate in activities that will help integrate or regulate their sensory experiences. Examples would be: lying between two bean bag pillows, sitting on a move-and-sit cushion, sucking on a lollipop during reading, swinging on a swing, etc. The Occupational Therapist can evaluate a child's sensory needs and recommend activities throughout the day. Occupational Therapy may be included in a student's Individual Education Plan. If your child is not receiving special education services, you can ask the school to consider some reasonable adjustments to the general education classroom.

Here are some suggestions to make school more tolerable for students with sensitivities:

- Allow student to go to the cafeteria early to eat and offer jobs to do after lunch in another location
- If P.E. is too noisy, allow student to do another physical activity in another area
- Provide gradual exposure to messy art activities or use a peer buddy for messy work
- Provide a locker at the end of the row to decrease the chance of unintentional student contact or bumping
- Allow student to touch an object that that gives positive sensory feedback (furry, velvet) and consider attaching it under the desk so it is available but out of sight
- Provide ear-plugs for certain activities
- Allow student to go to back of the room for quiet talking or humming
- Provide visual task card showing what to do under certain stressful situations

The Matrix libraries have a variety of books available on Asperger Syndrome and sensory sensitivities. Check the Resources section of this packet for titles of books as well as website suggestions.

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Social Skills and Asperger Syndrome

Difficulties with Social Interactions

Children with Asperger Syndrome usually want friends. This can be difficult as they can appear to others to be naïve and self-absorbed. Standing too close to others, not looking at someone while they speak or speaking too close to their face is not what others expect. Making blunt statements that are regarded as rude and not understanding what they have done affects friendships. This can result in social isolation and feelings of sadness or anxiety.

Researchers believe the reason social interactions are so challenging is because people with AS lack *Theory of Mind*. This is the ability to step into another person's shoes and see the world from their eyes. A typically developing child would see someone fall down and scrape a knee and automatically recognize that person was in pain. This happens because the typically developing child remembers what it feels like to scrape a knee, and can empathize with the pain of the other child. This thought process does not come as naturally to someone with AS.

Problems with Pragmatic Language

One key trait of Asperger Syndrome is difficulty with pragmatic speech (the use of language in social interactions). When young, children with AS do not have delayed development of their speech. Rather their speech is often peculiar, speaking at length and in depth about topics that are of strong interest to them. This could be civil war battles, or the makes and models of cars, or any topic that others do not find so absorbing.

Children with AS have difficulty taking turns in a conversation, taking into account the interests of others or answering questions that are asked of them. They may have difficulty with school assignments because they don't understand the complex emotions or situations of characters in literature or the subtleties found in comprehension questions. Additionally, their tone and volume may not be what is expected in a particular setting.

Social Cues and Appropriate Interactions

Children with Asperger Syndrome have great difficulty understanding social cues. In the social world, much of what happens is non-verbal (body language, facial expressions, tone, and pauses). We read other people; we can tell when they are bored with our conversation, when they need to leave, when they want to add to the conversation.

Social Implications

Because of their difficulty with social rules, children and teens with Asperger Syndrome can be bullied or used as scapegoats. Other people, including relatives, can be put off when a child/teen with AS responds in ways others don't expect by blurting out answers, speaking too loudly, making comments that are simply honest but not necessarily polite. Sometimes these children will be regarded as willfully doing this; however, they typically are not aware of what they do or how others view them.

Teens and Adulthood

Asperger Syndrome continues into adulthood. The teen social years are particularly challenging. This can result in anxiety and depression. Adults should be aware of this possibility and work to support teens during this time. Providing ways to develop social skills in structured group

settings or in counseling can be invaluable, as are emotional breaks from social pressures. This might mean asking the school for a place/person that is a safe harbor where they can briefly escape the stress of school and social demands. This can help with making choices and options to address their feelings of discomfort, fears, or building rages.

Practical Tips for How to Help Children with Social Skills

- Directly teach social rules using scripts: how to greet someone, how to begin and end a conversation, taking turns, and maintaining suitable eye contact.
- Model appropriate social skills, and include the use of role-plays and videos.
- Use social stories and games to help children plan for and practice appropriate skills.
- Provide clear and explicit rules of social behavior.
- Explain the meaning of idioms such as “raining cats and dogs”.
- Help children learn to read faces. There are materials available to develop this skill.
- Help children learn when and where they can speak about their special subjects and when they should limit those conversations, setting clear limits.
- If obsessive talking might mask an emotion such as anxiety, help address it through relaxation techniques or breaks from their social environment.
- Suggest ways for academic skills to be used in a positive way in group situations so that other children see their abilities as a plus, increasing peer acceptance.
- Protect children from bullying. If it occurs, address it promptly.

Direct instruction in social skills will help. Interventions may include brief exercises, social groups, social stories and social skills curriculum with social skills practice in group settings that are supervised and structured. An effective way to teach these skills is through Social Stories. Developed by Carol Gray, these short stories illustrate step by step in simple language what to do in a given situation. The more a child can prepare and practice how to respond the more likely he or she will have success in behaving appropriately. At first, learning these skills might seem unnecessary to the child with AS, but once they understand that it will help them fit in and make friends, they are usually happy to work on them.

Monitor your child’s emotional well being as they navigate the social world. If you sense anxiety, depression or that your child has to work too hard socially seek professional help.

And always let your child’s teacher know the many positive qualities and skills that your child has so that these can be built upon and your child can receive praise and acknowledgement of these other personal traits.

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Students with Asperger Syndrome: Educational Implications

Children with Asperger Syndrome vary in their needs for educational support. Some students may need Special Education to help them with challenges at school. Others may need some accommodations that can be offered through a 504 Accommodation Plan. Still another group can be successful at school with just a little informal help from parents and teachers. Please see **Matrix packets on IEPs and 504s** for more information on these options.

The IEP If a student is in Special Education and has an IEP it is not uncommon to have goals to address social skills, writing, organization or behavior. Some students may need occupational therapy (OT) to work on fine motor skills including handwriting. Speech therapy could also be part of the IEP for those with language pragmatic challenges.

A 504 Plan lists ways of accommodating a student so that they can more easily access their school environment including learning and non-academic activities. Accommodations could allow a student access to a quiet area if he or she is over stimulated. Tests may be taken in a smaller setting and/or quieter environment. Accommodations could allow the use of a keyboard for students who have trouble with handwriting.

Self Advocacy Some students have few problems at school, especially academically. With some training on self-advocacy from parents and teachers, children with Asperger Syndrome can learn to speak up for themselves when they need a little extra support. With younger students, a brief parent-teacher conference could be a helpful way to come up with strategies for a specific student. In high school, a counselor or other trusted adult could maintain a relationship with the student and support self advocacy as well as provide a safe place where a student can take a break from demands.

Hyper Focus One common challenge for students with Asperger Syndrome is their hyper focus on a specific area. If a young child will only respond to assignments about trains, or an older child wants to spend all of his or her time on astronomy, it can be very difficult for a teacher to gain the attention needed to teach other subjects. This problem could be dealt with through adaptations to curriculum, behavior goals, positive behavior support plans, or a combination of any of these. Especially in children who are extremely rigid, it is probably best to begin work within their specific area of interest and branch out from there a little bit at a time.

Written Expression Children with Asperger Syndrome sometimes have problems with written expression, or dysgraphia. Handwriting can be part of this challenge. Because written expression requires the coordination of several sections of the brain, there are many opportunities for problems to occur. Children with delays in written expression should be carefully assessed by the school to determine exactly which areas the problems occur in. If written expression is still a problem as the student matures, assistive technology such as a keyboard or special writing software may be necessary.

Executive Functioning can be another challenge for the student with Asperger Syndrome. This is the ability to prepare for and complete multiple or sequential tasks. Problems in this area can be seen in children who have a “one track mind” – who can only focus on one thing at

a time. Executive functioning affects mental flexibility and can also be referred to as a processing deficit. A child with significant problems in this area is likely to require an IEP with goals focused on prioritizing, completing multiple tasks, or organizing materials.

Social Challenges There are a variety of social challenges at school for children with Asperger syndrome. Early reports that these children do not notice that they are lacking friendships has been proven untrue. Children with Asperger Syndrome care deeply about relationships; they just don't know how to manage them. This can cause a child to become the target of bullying when he or she does something outside the norm of his or her classmates. Adults should pay attention to indications or reports of bullying and address these incidents promptly. It should not be tolerated as "something that all kids do." Social skills groups and lesson plans can help students learn what comes naturally to most typically developing children – how to be a friend. See Social Skills and Asperger's Syndrome.

Home – School Communication As others may have difficulty understanding the traits of students with Asperger Syndrome, some parents have found it helpful to provide teachers with a short summary of their child's strengths and areas that might be misunderstood, along with a few key tips and strategies. Sometimes that can change the impression that certain behaviors may be on purpose and easy for the student to change. Staying in touch with teachers so that problems or misunderstandings are handled early can prevent more serious difficulties later on.

Key Areas of Academic Difficulties

- Attention difficulties may interfere with learning
- Poor problem solving skills
- Their own internal agenda drives interest/focus
- Difficulty understanding abstract concepts
- Literal understanding may interfere with reading comprehension
- Fine motor deficits may interfere with written expression
- May experience "meltdowns" or outbursts due to areas of academic difficulty
- May hold it together at school but "lose it" when arrives home

Suggested Academic Supports

- Develop organizational strategies with the student
- Avoid verbal overload
- Be as concrete as possible – use visual cues to assist in understanding abstract ideas
- Explain non-literal speech for a student who doesn't understand sarcasm, idioms, jokes
- Break down learning tasks and/or present tasks several ways (visually, verbally, physically)
- Adjust written tasks so that student can be successful
- Redirect students to write down comments or questions if they persist overly long
- Structure in-class peer interaction instead of pairing off or choosing partners

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