

Maryland School Mental Health Alliance*

Asperger Syndrome Information for School Clinicians

Definition

Autism is a developmental disorder that usually appears during the first years of a childhood (18 to 60 months). Although there is no known cause for autism, researchers believe that it is a neurological disorder brought on by genetic and biological factors.

Children with autism have difficulty communicating and interacting with others (no eye contact, limited or no language, low motivation for typical play). They often display repetitive behaviors that reflect their desire for extreme order. For instance, a child with autism may not want to go the bathroom until they first have their favorite book. Without the book, they refuse to use the bathroom. Children with autism have different sensitivities to the physical world. One child with autism may not hear high pitches; another may cry and moan when a siren goes by because it physically hurts them.

Unlike children with mental retardation, children with autism do not necessarily have low levels of intelligence. Some children with autism have a *splinter skill*, an ability to something very well (e.g., remembering names and dates).

Asperger's is related to autism. Asperger Syndrome is a pervasive developmental disorder caused by a combination of genetic and neurological factors during the early stages of life. Children diagnosed with Asperger Syndrome display a variety of "odd" behaviors that fall into two main categories: impairments in social interaction and repetitive/stereotyped activities. Impairments in social interaction include an inability to make eye contact with someone while talking, an apparent disinterest in parent praise, and difficulty initiating or participating in peer play. Repetitive and stereotyped activities performed by children with Asperger Syndrome include insistence on exact replication of previous experiences, sustained attention to functionally irrelevant aspects of objects, and continued movement of one or multiple limbs. Unlike children diagnosed with autism spectrum disorder, those with Asperger's do not exhibit speech delays and often have an I.Q. in the normal range.

Why do we care?

When compared to their developmental peers:

- Students with Asperger's have greater difficulty interacting with teachers and school staff.
- Students with Asperger's have greater difficulty developing friendships.
- Students with Asperger's have lower levels of academic performance.
- Students with Asperger's have greater difficulty regulating their reactions to fear.
- Students with Asperger's have greater difficulty altering their daily routines.

What can we do about it?

- Provide parents and school staff with for information about Asperger Syndrome and how it relates to autism spectrum disorders.
- Serve as a liaison for parents and special education specialists. Learn about the available sources of funding for in-home treatment and school-based services.
- Explain to parents their child's right to a free and public education (FAPE). Seek out a parent advocate at the school your child would likely attend.

- Review the basic treatment approaches for children with Asperger Syndrome. Focus your search on applied behavior analysis and verbal learning.
- Contact a local public university to see if they have any qualified students who want to work with a child with Asperger's. Establish contacts with the departments of psychology and education.

Helpful Forms and Handouts

- AACAP Practice Parameter Summary:
<http://www.aacap.org/galleries/PracticeParameters/Autism.pdf>
 - The Child with Autism:
http://aacap.org/cs/root/facts_for_families/the_child_with_autism
 - Asperger's: <http://www.aacap.org/publications/factsfam/69.htm>
- Questions from Parents (AACPS): <http://www.aacps.org/aacps/sssd/aut.pdf>.
- ABA Resources for Recovery from Autism/PDD/Hyperlexia: <http://rsaffran.tripod.com/aba.html>.
 - What is ABA? <http://rsaffran.tripod.com/whatisaba.html#top>.
 - ABA Consultants and Service Providers: <http://rsaffran.tripod.com/consultants.html>.
- Maryland State Department of Education Special Education Overview:
<http://www.marylandpublicschools.org/MSDE/divisions/earlyinterv/>.
 - Maryland Infant and Toddlers Program:
http://www.marylandpublicschools.org/MSDE/divisions/earlyinterv/infant_toddlers/message.htm.
- FirstSigns recommended screening tools: <http://www.firstsigns.org/screening/tools/rec.htm>
 - Communication and Symbolic Behavior Scales Developmental Profile (CSBS DP™):
http://www.brookespublishing.com/store/books/wetherby-csbsdp/CSBSDP_Checklist.pdf
 - Checklist for Autism in Toddlers (CHAT):
<http://www.nas.org.uk/nas/jsp/polopoly.jsp?d=128&a=2226>.

Additional Resources

Attwood, T. (1998). *Asperger's syndrome: A guide for parents and professionals*. New York: Jessica Kingsley Publishers. <http://www.tonyattwood.com.au/>.

Attwood, T. (2004). *High functioning autism and asperger syndrome*. Presented at Wales 1st International Autism Conference. http://www.awares.org/pkgs_files/librarydoc_433.ppt.

Berney, T. (2004). Asperger syndrome from childhood into adulthood. *Advances in Psychiatric Treatment*, 10, 341-351. <http://apt.rcpsych.org/cgi/reprint/10/5/341>

**Developed by the Center for School Mental Health (<http://csmh.umaryland.edu>) in collaboration with the Maryland School Mental Health Alliance.*