

Center for Family Development

Arthur Becker-Weidman, Ph.D.
Susan Becker-Weidman, LSCW-R
Emily Becker-Weidman, Ph.D.

2410 W. Azeele Street, Unit 213
Tampa, FL 33609

Office: 716 636 6243
Fax: 716 636 6243

aweidman@gmail.com
center4familydevelopment.com

New Jersey Office:
10 McKinley Street, Suite 12
Closter, NJ 07624

Office: 646 389 6550

emilybw@gmail.com
dremilybw.com

Mailing Address:
5692 Ferncrest Court, Unit D
Clarence Center, NY 14032

Suggestions for Teachers Asperger's Syndrome

The Asperger's (AS) child may have a powerful predisposition to *inertia* especially when he is stressed or tired. This profound lack of energy or ability to initiate action is seen in the child's school, home, and social life.

Inertia may prevent the AS child from being able to get out the door to school. If his parents do get him to school he freezes up when he has to make social contact with other kids sitting at a table in the lunchroom. He is stuck in the corner of the room and has to be gently guided out by a teacher. Feeling totally overwhelmed, he ends up staring straight ahead and cannot remember what he's supposed to do next. When his teacher addresses him he grunts out a reply but does not return to his work. He may have a very difficult time telling his teachers what he needs, and he tends to be passive in the face of their criticism. He cringes at his PE teacher's verbal abuse and does not report it. In a social setting, he is rarely the first one to initiate a social contact and needs to see someone else doing it first.

This lack of ability to initiate activity probably relates to the fact that Asperger's kids may be deeply *apraxic* when it comes to affective, cognitive, and behavioral tasks. That is they do not automatically visualize what movements look like, what conversation with others might sound like, or generally what will happen in the future. Having no way of seeing the potential future, the child cannot plan his present action and so does nothing. Normal people continually feed themselves flashes of images of the next movement a split second before the movement happens. The child with Asperger's Syndrome may lack this awareness. As a result, he is slowed in movement to the point of not moving at all.

Here are five survival strategies to help the Asperger's child realize his gifts and reduce the challenges posed by his attention differences.

1. *Consult* with him to find ways to reduce the stress that he experiences. Talk to him about what is going on at school or on the job. Asperger's children tend to be very proud. If they cannot follow along in a class (because of the wrong teaching methods), they may attempt to resolve the issue by just refusing to get on the bus in the morning. It's easier to say, "Hell no I won't go," then to say, "I feel stupid not being able to do the work. Help me!" If they cannot keep up the pace in a job that requires tight teamwork, they are apt to throw down their apron and leave in a fit of anger and frustration.
2. *Use a prearranged touch prompt.* In the example above of the boy who had the debilitating "space outs" while cooking, I suggested that his parents help him keep on track by touching him firmly on the shoulder (a place where he could tolerate strong touch) while suggesting the next step he needs to accomplish in the recipe. A good prompt should provide just the right amount of verbal and tactile stimulation along with a clear and concrete suggestion for the next step stated in visual terms: "O.K.

Stephen, looks like you need to open the recipe box and look up the card for oatmeal cookies."

3. *Lead from behind.* To reduce inertia, you have to get in the habit of following *behind* the child somewhat. You go at his speed. If he stops, you stop and get into a consulting role with him. "Jeremy, you're doing great work getting out the door. You looking for something right now?" Curb your own anger, take a breath, and bridge to his issue. Give him the time that he needs.
4. *Help him calm by pacing his breathing.* If he freezes up and can't get out the door to take the bus over to his friend's house for a birthday party, ask him what you can do to help. If he does not answer, assume that he is experiencing anxiety, and that though he seems serene and very still on the outside, his mind is racing at break-neck speed on the inside. Just sit next to him calmly and let your relaxed pace of breathing relax his. Tell him whatever you think he needs to hear to be more relaxed and then get back to helping him to the next step when he is in a better place to hear.

Teach him binary decision-making. One of the most powerful causes for inertia is the feeling of the Asperger's child that some task is so vast and complex that he can't possibly accomplish it. To overcome this barrier, teach him how to factor any problem into *two* decisions. He makes one of those decisions and then factors the next part of the issue into two more decisions, and makes one of these decisions until the job is done.

If you want to get him to clean up his room, have him first make two piles. One pile is for things that stay. One pile is for throwaways. When he's down to the pile for things that stay, divide it into one pile for clothes and one pile for electronic parts. When this is done, take each pile in turn. In the electronic parts pile, put all parts that pertain to current projects on one shelf and all parts from past projects on another, and so forth. He needs a very concrete way to work from the whole to the parts. It's easier to get going on things if he deliberately uses the "yes/no," "zero/one," language of binary code to break the problem into manageable chunks.

- The classroom routines should be kept as consistent, structured, and predictable as possible. Children with AS often don't like surprises. They should be prepared in advance, when possible, for changes and transitions, including things such as schedule breaks, vacation days, etc.
- Rules should be applied carefully. Many of these children can be fairly rigid about following "rules" quite literally. While clearly expressed rules and guidelines, preferably written down for the student, are helpful, they should be applied with some flexibility. The rules do not automatically have to be exactly the same for the child with AS as for the rest of the students--their needs and abilities are different.
- Staff should take full advantage of a child's areas of special interest when teaching. The child will learn best when an area of high personal interest is on the agenda. Teachers can creatively connect the child's interests to the teaching process. One can also use access to the special interests as a reward to the child for successful completion of other tasks or adherence to rules or behavioral expectations.
- Most students with AS respond well to the use of visuals: schedules, charts, lists, pictures, etc. In this way they are much like other children with PDD and autism.
- In general, try to keep teaching fairly concrete. Avoid language that may be misunderstood by the child with AS, such as sarcasm, confusing figurative speech, idioms, etc. Work to break down and simplify more abstract language and concepts.
- Explicit, didactic teaching of strategies can be very helpful, to assist the child gain proficiency in "executive function" areas such as organization and study skills.
- Ensure that school staff outside of the classroom, such as physical education teachers, bus drivers, cafeteria monitors, librarians, etc., are familiar with the child's style and needs and have been given

adequate training in management approaches. Those less structured settings where the routines and expectations are less clear tend to be difficult for the child with AS.

- Try to avoid escalating power struggles. These children often do not understand rigid displays of authority or anger and they will become more rigid and stubborn if forcefully confronted. Their behavior can then get rapidly out of control, and at that point it is often better for the staff person to back off and let things cool down. It is always preferable, when possible, to anticipate such situations and take preventative action to avoid the confrontation through calmness, negotiation, presentation of choices or diversion of attention elsewhere.
- A major area of concern as the child moves through school is promotion of more appropriate social interactions and helping the child fit in better socially. Formal, didactic social skills training can take place both in the classroom and in more individualized settings. Approaches that have been most successful utilize direct modeling and role playing at a concrete level.
- Teachers should be alert to the potential for mood problems such as anxiety or depression, particularly in the older child with AS. Medication with an antidepressant (e.g., imipramine or one of the newer serotonergic drugs such as fluoxetine) may be indicated if mood problems are significantly interfering with the child's functioning. Some children with significant compulsive symptoms or ritualistic behaviors can be helped with the same serotonergic drugs or clomipramine. Problems with inattention at school that are seen in certain children can sometimes be helped by stimulant medications such as methylphenidate or dextroamphetamine, much in the same way they are used to treat Attention Deficit Disorder. Occasionally, medication may be needed to address more severe behavior problems that have not responded to non-medical, behavioral interventions. Clonidine is one medication that has proven helpful in such situations and there are other options if necessary.