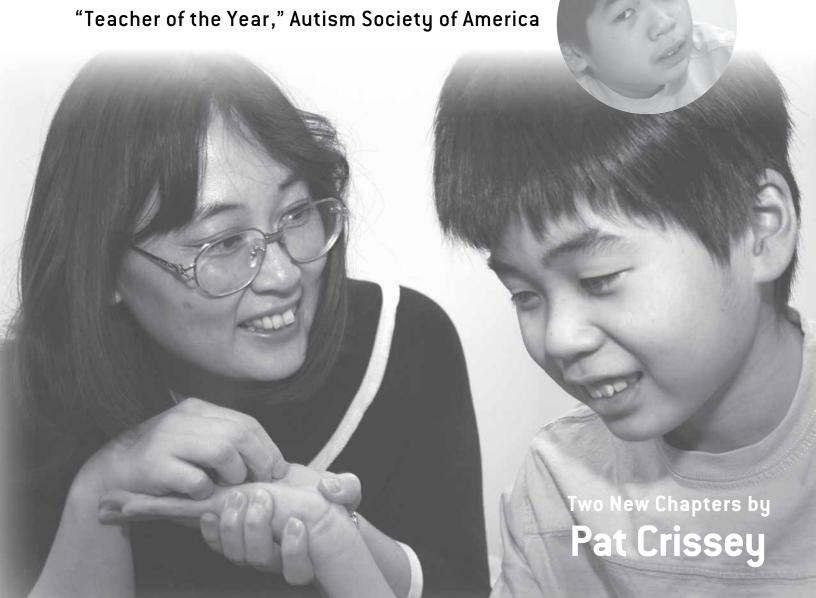


New Instructional Approaches to Autism

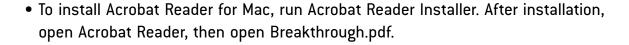
Karen Sewell



Breakthrough CD for Windows or Macintosh

Also included with this book is a CD containing this complete book in PDF form for you to review and print out pages from your computer. This PDF (portable document format) requires Acrobat Reader to access.

- If you have Acrobat Reader software already on your computer, open Acrobat Reader, then open the Breakthrough.pdf on the CD.
- To install Acrobat Reader for Windows, run ARINSTALL.EXE. After installation, open Acrobat Reader, then open Breakthrough.pdf.





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Introduction

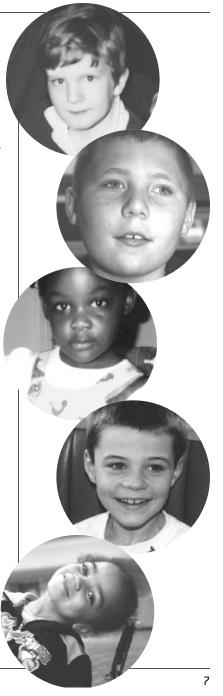
Changes in Teaching Children with Autism Over the Past Two Decades

Over 25 years ago, I was a newly graduated, enthusiastic, special education teacher. I recall clearly hearing about "autism" in only one college class and then the only reference to it was in a single paragraph. I also remember being intrigued and fascinated by the description of autism as given in that paragraph. The brief reference ended with the suggestion that it was highly unlikely that a special education teacher would ever see a child with autism in his or her entire career!

Little did I realize then that my career would quickly evolve to encompass teaching ONLY children with autism. It has become my life work and passion. So much progress has been made in this field, particularly in the educational realm. We still have so far to go.

Looking back to when I first entered the field of special education, no one spoke of autism as a diagnosis; in fact, no one spoke of autism at all. Most professionals in the field of education had never even heard the term. Children with severe special needs were placed in self-contained classrooms for mild, moderate, severe, or profoundly mentally retarded, severe language impaired, emotionally disturbed, or other health impaired. If the impairment was not severe, children were placed in resource rooms for learning disabilities, attention deficit disorder or dyslexia. There were no autism-specific resources.

As autism awareness has grown along with the apparent dramatic increase in the incidence, specific services for autism have slowly become available. University courses in teaching children with autism started appearing in teacher training curricula. They were, however, too few and much later than they should have been. Special education teachers began seeing children with autism in their classrooms but they had no specific training to help them. As a result, they did the best thing they knew to do — teach them using the same strategies as they were using to teach other special needs children. Since children with autism generally require a unique approach to teaching and often present with behavioral, communication



and social issues, teachers were desperate and felt inadequately prepared while thousands of children languished academically and lost precious learning time. At the local administrative, state, and federal levels precious few recognized or even seemed to care that a crisis of epic proportions was about to explode.

In the relatively small rural school district where I was teaching, the number of children being diagnosed grew alarmingly. Everyone discovered later that it was happening everywhere! When I heard the first statistics on the incidence of autism, it was 4 to 5 in every 15,000 births. Ten years later it was 4 to 5 in every 10,000 births.

Then it was 1 in every 500 births. Three years ago it was 1 in 166 and presently the newest statistics say 1 in 150 births. It has become an epidemic.

Over the past 20–25 years, progress has been slow but steady. We now have a few universities actually offering undergraduate and graduate degrees in autism. Most teacher training courses include several required classes in recognizing autism, in teaching strategies for students with autism, and in providing information about available resources within the school system and community. Assessment tools are better and more widely available and used. Administrative support for teacher training, smaller class size, more paraprofessionals, and appropriate curriculum is apparent. Some of this came about as a result of the DSM-3, DSM-3R and DSM-4 diagnostic criteria which was broadened to establish "autism" as a separate diagnosis.

All photos from Karen Sewell with the exception of Chapters 1 and 7.

Chapter 1

Working with Students with High Functioning Autism and Asperger's Syndrome

By Pat Crissey

Currently more and more students are being identified with high functioning autism (HFA) and Asperger's Syndrome (AS). While these students, like those with Autistic Disorder, are affected in the areas of social interaction and stereotyped behavior, they function at a much higher level and have different educational needs. This chapter will look at typical characteristics of these students and the challenges they face, along with a menu of problem-solving ideas to try and a listing of helpful resources.

Typical Characteristics

While experts disagree on whether there are substantial differences between HFA and AS, these terms are often used interchangeably to refer to individuals with average or above intelligence who display impaired social interactions and unusual patterns of behavior. The following are typical characteristics of individuals with HFA or AS.

- ► Delayed social maturity— often functions socially as a younger child
- ▶ Difficulty understanding emotions and regulating their emotional state
- ▶ Difficulty understanding another person's perspective
- ► Difficulty making and keeping friends
- ► Adequate language, but poor conversational skills
- ▶ Difficulty understanding non-verbal communication
- ► Repetitive speech will "parrot" back information with little comprehension
- ► Literal interpretation of language





- ► Unusual sensory responses to sounds, textures, temperatures, light, aromas, or pain
- ▶ Difficulty with transitions and changes in routines
- ► Excessive interest in particular objects or topic
- ► Poor organizational skills
- ► Inconsistent ability to pay attention
- ▶ Difficulty with handwriting and/or gross motor skills

Laying the Groundwork

There are numerous factors to consider when deciding a placement and planning a program for a student with HFA or AS. Key considerations include the following.

Services and Placement

Students with HFA present a wide range of abilities and needs, and there is no single set of criteria for deciding placement or services. While some students with HFA may benefit from a self-contained classroom designed specifically to meet their needs, the majority of these students function well in the mainstream with some support services. Services to be considered might include the following.

- ► Speech and language therapy to address communication needs, such as pragmatic language and conversational skills
- ► Social skills training
- ► Individualized help with academics, organization and study skills
- ► Someone with an understanding of HFA to provide emotional support a designated person who will check in with the student on a regular basis and to whom the student can go for encouragement and clarification.
- ► Classroom support from an instructional assistant to increase the student's independence by providing structure, clarifying directions, and modifying assignments.
- ► Consultation from an occupational therapist to address sensory issues and/or difficulties with handwriting.
- ► Adaptive or modified physical education activities.
- ► Classroom accommodations to address student's specific needs, such as a visual schedule, shortened assignments, a buddy system, etc.

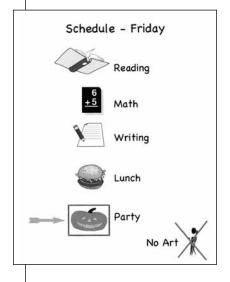
Providing Structure and Predictability

The problem...

When setting up a classroom and routines for a child with HFA, it's important to keep in mind the child's need for predictability. While some students with HFA may be able to go with the flow, most will become anxious or confused with changes in the schedule or when they're uncertain about what will happen next.

The solutions...

- ► See the tips for setting up a classroom, Chapter Three, pages 56-62. These are important for the student with HFA as well.
- ► Establish consistent classroom routines with pre-warnings when changes are going to occur. For example, if there is an assembly scheduled in the afternoon, take time to talk with the student in the morning, explaining how the schedule will be changed, including what activities won't happen and what will occur during the assembly.
- ➤ As part of the daily routine, provide consistent, predictable transitions from one activity to another. Mini-routines can be built around these transitions, such as always putting away materials in a specific order or giving the same verbal cues each time. It's often helpful to give a pre-warning, such as, "In three minutes it will be time to put your book in your desk." Using a kitchen timer or a visual timer, such as a Time Timer can also prove helpful. (See Resources, pages 39 and 40.)
- ► Provide consistent routines and locations for everyday tasks, such as always starting the day with the same set of activities and having a designated box where completed assignments are placed.
- ▶ Provide the student with a visual schedule of her day, noting any changes in routine on the schedule. Using a visual schedule helps the student to deal with unexpected events, to function more independently, and will carry over and lead to increased independence in adulthood. To be effective, the schedule needs to be readily understood by the student, which often requires using photos or drawing in addition to words. It's important to review the schedule with the student at the beginning of each day and to discuss any changes in the usual routine. See examples of visual schedules provided in Chapter 7, pages 96–115.



Good Morning!

- 1. Turn in homework.
- 2. Place lunch order.
- 3. Sharpen pencils.
- Copy and correct sentences on the board.

Chapter 2

On the Job Training

Getting Underway

This manual's instructional techniques, materials, and strategies are designed to be easily accessed, understood, and put into practice. It's a ready reference tool, a hands-on survival kit full of positive and effective suggestions upon which you can improvise as your confidence and competency grow.

While these techniques and ideas were successful with my students, they won't necessarily work for everyone. They're just meant to get you going: to give you some guidance and direction. Once off and running, you will find the way to best use your strengths in harmony with the specific needs of your school and students.

Because of the spectrum disorder nature of autism, and its implied range of functionality, you will need to be highly adaptable with materials and instructional approaches. Begin with the ideas in this manual and individualize and expand them as you see fit. You may find it necessary to modify suggested materials and procedures within each basic skill area until you find one that works with each student. Any effective educational program must be based upon flexibility and a variety of interventions.

It's necessary to conduct student observations and do data collection to determine the level at which each student functions. This will help you find out which behaviors get in the way of learning, and decide what reinforcements seem to work for each case. However, it doesn't have to come at the expense of instructional time. As someone once said, "there is paralysis in analysis."

In fact, this has become a controversial issue. Some professionals advocate spending long periods of time observing, collecting data, tallying behavior, assessing the data, producing a baseline, forming charts and graphs, and designing individualized programs from that information.

You can get so caught up in data collection that weeks go by before your game plan becomes clear. When that happens, the student loses valuable teaching time; a structured, smoothly running classroom may have already become a distant dream.

If you implement the critical planning strategies laid out here, your class should have a functional structure, even at the very beginning stages. You



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distant dream.

don't have to feel like a "babysitter" until you can "get organized." This will allow you to actively start teaching from the first day, buying time to begin assessing short- and long-term needs.

Start by selecting skills at the level at which the child is functioning, and putting together some initial, operative lesson plans. To whatever degree is possible, follow instructions for setting up your classroom for optimum efficiency.

In turn, without the pressure of needing to observe and collect data immediately, rather than as instruction is occurring, your short- and long-term goals and objectives are much more likely to be accurate and realistic. And they will be Breakthroughs big and small

If you have felt compelled, as I have, to reach out to students with autism, yet didn't know where to begin, I hope this manual will help you. Conquering deficits and acquiring new skills encourages self-esteem and independence. People with autism deserve the same opportunities as everyone else to achieve autonomy and self-reliance. Most are capable of learning far more than they are given credit for. The problem is that dedicated and caring parents, teachers, and professionals often lack the techniques and skills necessary to enter a child with autism's lonely and isolated world.

Equipped with a few practical tips, a teacher or caretaker can open a door on the world of learning for a child with autism. And, as learning occurs, there is a ripple of collateral benefits. Problem behaviors recede, social barriers diminish, communication (in whatever form) improves, and the student begins to acquire necessary functional living skills.

Let me stress again that for students with autism, social interaction, communication, and acquisition of life skills are as important as academic abilities. Consequently, these areas are strongly emphasized throughout this manual.

Remember—everything you teach children with autism to do for themselves will be one more skill they will not have to depend on someone else to do for them the rest of their lives!

Start Early, Move Fast!

There's a direct correlation between age of initial intervention and rapid progress. The earlier it begins, the sooner skill acquisition takes place. That has been my experience, and recent research backs it up. The findings in a study by McEachin, Smith, and Lovaas on three-year-olds who received intensive early intervention, are promising: 47% of the experimental group were successfully placed in regular classes (after two years intervention), and 42% "may be judged to have made major and enduring gains . . ."

Earlier and better screening and assessments have resulted in greater and greater success rates in identifying children with autism. Once identified, we now have to learn how to reach and teach them.

While supervisors, teachers, and parents have repeatedly requested that I write this manual, I approached the project with no small amount of trepidation. Although I have taught special education for 16 years, seven years strictly with students with autism, and with significant success, I do not consider myself an expert. When it comes to teaching students with autism, I'm not sure anyone is!

Nonetheless, many visitors to my classroom have been surprised to see students (classified moderate to severe) performing skills no one thought they could master. It should be added that most of these students came to me virtually noncompliant, focusing less than five seconds on task, exhibiting severe behavior problems, engaging in little or no interaction with others, and lacking a functional communication system. It has been a long, hard, and very gratifying experience to see my pupils make such progress.

At the time of the writing of this book, the students were ages 11–13, each with differing degrees of autism. However, individual lesson plans for all of them included reading, spelling, math, science, home-living, and community-based skills. Nonverbal students have essentially the same curricula as the others (though they are approached differently). For everyone, fine–motor, social, self–help, adaptive, behavioral, and communication skills are continuous and ongoing.

My educational philosophy includes teaching students to prepare for life. While that may be true for all teachers, it's especially true for special educators, who must consider students' individual disabilities when determining short- and long-term objectives. With autism, we must have some grasp of what it is, and what barriers it creates before we can devise strategies to circumvent the hurdles and allow learning to take place. Teachers must keep in mind that their students will, one day, have a life beyond public school. Thus, we have the responsibility to prepare these students for that life, ensuring that it will be as full and productive as possible. Teachers need to evaluate the success of their programs regularly because skill acquisition is so unpredictable for students with autism.

Remember — everything you teach children with autism to do for themselves will be one more skill they will not have to depend on someone else to do for them the rest of their lives!

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Ten Top Priorities

- 1. Pursue early behavioral and educational intervention, including a timely and accurate diagnosis.
- 2. Take a tough love approach with the student, stressing both firmness and affection. In this context, establish an absolute consistency of expectations.
- 3. Extend the instructional domain to everywhere the student goes: cafeteria, bathroom, playground, music room, classroom, etc. (Because of chronic deficits, learning generalizes better when it's location-specific.)
- 4. Make sure the student attends to task in all areas, if only for short periods at first. It's the basis for all future instruction.
- Speak clearly and concisely at all times to guarantee comprehension. Monitor and adjust your verbal presentation if you're not connecting.
- 6. Ignore counterproductive attention-getting behaviors, but reward compliance with simple praise.
- 7. Be firm but fair in making sure the student carries out directives, even if it requires, at first, providing assistance. Don't begin a task you can't complete.
- 8. Delegate authority to more than one caregiver, all of whom must be clear on designated behavioral interventions.
- Constantly challenge the student to learn new skills, while continuing to address lingering deficits.
- 10. Exercise at all times the three P's: planning, patience, and perseverance.

Lesson Plan—Cognitive/Academic Math Skills

Student Name For	r Week of
------------------	-----------

Objectives	Monday	Tuesday	Wednesday	Thursday	Friday
CA-1 Match numbers 1–20					
CA-2 Rote count and sequence numerals 1–20					
CA-3 Recognize numerals 1–20					
CA-4 Count objects with one-to-one correspondence					
CA-5 Recognize ordinal positions, first, middle, last, second, third, etc.					
CA-6 Point to objects that are "big" or "little"					
CA-7 Point to sets of "less" or "more"					
CA-8 Add objects and numerals with sums of 10 or less					
CA-9 Recognize and name 4 types of coins					
CA-10 Recognize coin values and compute simple addition of coins when making a purchase					

Chapter 11

Let's Teach: Communication/ Language Development Skills

Introduction

Profound difficulties communicating with others pose the most significant obstacle for people with autism. It's perhaps the characteristic that most sets them apart from the general population. The extent to which each individual is communication impaired depends on the severity and type of autism. But usually, they will have diverse communicative needs and often will require the aid of augmentative systems. These include manual signing, picture vocabularies, computerized devices, and others.

The exact nature of their communication shortcomings varies greatly from one person with autism to the next. One individual might not react at all to an auditory stimuli, like a loud noise. Or the calling of one's name, to which most people would respond. On the other hand, many people with autism are so sensitive to sound that a noise barely audible to most, can be overwhelming.

In addition, people with autism have an aversion to eye contact. This has a severely negative impact on communication, because so much of our learning comes from the observation and imitation of those closest to us. Eye contact helps babies and young children "read" the facial expressions that accompany certain tones of voice. Very young nonhandicapped children routinely watch and listen to others, imitating and learning, without thinking about it.

Without these early observations, children with autism lack the ability to learn by imitation, resulting in extreme deficits in these basic developmental skills. This is especially noticeable in the area of social skills, where their inability to interpret the more subtle expressions of human communication is obvious in its absence. Instead, they often engage in immediate and delayed echolalia—i.e., the repetition of something heard by or addressed to the person with autism. (Long thought to be a meaningless parroting of random speech, many researchers now believe echolalia to be a language learning strategy.)



Encouraging eye contact and speech by placing your hand under student's chin and raising her head. In her remarkable book, Emergence: Labeled Autistic Temple Grandin, PhD says of her own experience, "sometimes I heard and understood and other times sounds or speech reached my brain like the unbearable noise of an onrushing freight train. Noise and confusion at large gatherings of people overwhelmed my senses."

Thanks to Anna Arena of Arena Press for permission to use selected quotes from Temple Grandin's exceptional book, which is required reading for anyone interested in the subject of autism.

Early remediation is important for language development, because the longer you go without significant intervention, the more severe the communication barrier becomes. Sometimes intervention is intrusive. It may even seem extreme. But if you persist with the student, she will benefit for a lifetime. Every language development skill she learns liberates her from the frustration of not being able to make her needs known. Language and communication training must be ongoing and continuous all day, every day.

Recently, as we have come closer to understanding their communication problems, a number of high-functioning adult individuals with autism have spoken out on the complex and often painful emotions and feelings they experience. We have learned that many over-react to stimuli because their nervous system is underdeveloped, damaged, or super sensitive. Some barely react at all in situations when a response is expected. And finally we have come to realize that their communication shortcomings stem from these innate deficits and not an unwillingness to relate to others.

In her remarkable book, *Emergence: Labeled Autistic*, Temple Grandin, PhD says of her own experience, "sometimes I heard and understood and other times sounds or speech reached my brain like the unbearable noise of an onrushing freight train. Noise and confusion at large gatherings of people overwhelmed my senses."

Anecdotal evidence as well as experience and research bear out the fact that children with autism understand much of what is said to them, but have difficulty responding. Again, Temple Grandin confirms this when she says, "Up to this time, communication had been a one-way street for me. I could understand what was being said, but I was unable to respond. Screaming and flapping my hands was my only way to communicate."

Taking Control of the Situation

Has the student trained you to anticipate his needs so you are left repeating, "is this what you want?" over and over until you luck on the right answer? If so, now is the time to stop!

If you know the student so well you always discern what he's asking for and give it to him without requiring appropriate communication, now is the time to change!

It's easy to understand why teachers and parents try to maintain peace by avoiding conflict when possible. However, in the long run it's a grave disservice to the student when you allow pulling, screaming, pinching, and throwing tantrums to successfully get the desired response. In fact, you're reinforcing the behaviors you should be eradicating. In essence, you're telling the student, "keep asking for things the way you are and I'll keep trying to figure out what you want and give it to you to avoid your acting-out behavior."

Many students with autism will use any disruptive behavior that works before they will choose to communicate meaningfully with signs, verbal responses, or assistive technology (computer, writing, typing, communication boards). In fact, many never feel comfortable interacting with others. And yet like everyone, people with autism feel the need to connect. A recent article talked at length about the appeal of the Internet to adults with autism. According to a growing number of users, it's precisely the need to communicate paired with the desirability of being able to do so without face-to-face contact. "Ordinarily," one communicated via Independent Living, an E-mail forum largely by and for people with autism, "the giving of support involves being with someone, and that's always draining for me. If someone does give me support in person, I will have to spend some time recovering from the experience of receiving that support."

But while the need to communicate is there, young students with autism often resist language development skills. Unfortunately, communication hasn't traditionally been a strong part of the college special education curriculum until recently.

Progress is Slowly Coming

As in many professional fields, there is a serious inefficiency in the sharing of new research advances between educational specialties. Speech therapists go to their conferences and workshops, come back with new ideas, information, and technology, and do their own thing with the student. In the past, adapted physical education teachers, occupational therapists, physical therapists, regular and special education teachers, assessment personnel, and even parents tended to do the same thing. Related others, like the medical professions, have had little, if any, contact with educators. Collaboration and cooperation among professionals is now improving and will speed up our timetable considerably.

The first Defeat Autism Now conference held in Dallas, in 1995 was a big step in the right direction. It was sponsored by the Autism Research Institute in San Diego. Twenty-seven physicians and scientists from diverse professional fields, with a desire to develop effective treatments for autism, met and shared ideas, research, and experience. As a result, a game plan was set to move quickly forward in researching, funding, understanding, and treating people with autism in a more effective way than we have been doing to date. The influx of huge amounts of funding for autism in recent years reflects the sincerity of this pledge.



Requiring a nonverbal student to sign for "juice."

Augmentative or Alternative Communication

Sometimes, we as parents and professionals do not think through what we do to help students communicate. We give them "communication boards" with an unrelated array of pictures that are useless to the student. Pictures used on communication boards must be activity based for the specific task you have targeted. For example, you are about to make a sandwich: first think through the steps required, the ingredients needed, and then get appropriate pictures for the communication board. In addition, you need pictures of the following relevant phrases: "I want to do it, I want to eat, I'm ready to eat, I'm all done," and so on.

Linda Burkhart is a specialist in the field of simplified technology for children with severe disabilities. She creates practical tools for assessing student needs and adapts everyday toys and other items for easy communication. She advocates a "complete communication immersion environment," both in the classroom and at home. She suggests using their communication devices when you interact with them. If the device uses pictures, words, or symbols use it yourself and let the student see you using it. This gives you a chance to see if the augmentative device works for specific activities. Ask yourself as you use it: do the pictures or words allow you to successfully interact with others? If not, change them so they do. A communication system must be workable across all environments, including the home.

Burkhart's books and CDs go into detail on augmentative communication and include instructions for adapting toys, and much more. I recommend them for use with nonverbal or inappropriately verbal children with autism.

Two Channels to Communication

In communication we use receptive and expressive channels. Receptive refers to how we process what we hear (or receive) into meaningful and understandable language. Expressive refers to how we vocalize (or express) so others understand what we're saying. Expressive also covers assistive communication, like signing.

Students with autism often have mild to severe deficits in one or both of these channels. Although the auditory mechanisms seem to be perfectly normal and intact when tested, they often act as if they are deaf and don't always react when spoken to or when they should be startled by a loud noise. At other times, they will jump at a noise as quiet as a pin hitting the floor.

By Linda J. Burkhart:

Total Augmentative Communication in the Early Childhood Classroom

Order from Linda J. Burkhart 6201 Candle Ct., Eldersburg, MD 21784, call 410-795-4561, or fax 410.795.8834. Possibly, the internal receptors and transmitters within the brain are damaged and therefore function intermittently (something like a radio station without a clear signal, as Temple Grandin has expressed in several talks I have heard her give). Or perhaps, the child gets so immersed in his own world through self-stimulating behavior that all outside sound is blocked. Consequently, the lack of response to auditory stimuli would not be a deliberate and willful attempt to ignore, but rather an involuntary inability to hear at that moment. This is a simplified explanation of an intensely complex problem. Nor is it a new theory. I mention it only as a reasonable explanation for why students with autism often don't seem to hear when we know that the student has average or above hearing. Understanding possible reasons for the behavior gives us more patience and tolerance for it. It also helps us intervene with more zeal when we realize that receptors and transmitters can be retrained and self-stimulatory behavior needs to be intercepted and redirected.

When we examine expressive language in the child with autism, we are confronted with more unanswered questions: if all the physical mechanics of speech are normal and intact (tongue, palate, lips) why doesn't the child speak? If his inability to communicate vital needs is so frustrating it causes him to act out violently, why won't he just tell us what he wants?

The paradoxes keep piling up. If she is intelligent enough to learn to read without formal instruction, sometimes as young as three, why doesn't she readily take a communication board when it's offered? Why does she resist so vehemently, even things that would clearly improve her life?

If he has the fine motor ability to meticulously stack tiny blocks, string small beads, line up dinky matchbox cars in perfect order, and a hundred other fastidious tasks, then why does he refuse to hold a pencil and write the very words that would set him free to communicate?

The answers to these and other questions are being sought after by researchers all over the world as they meet to coordinate findings. As they share information with one another, there's the hope that the cause of autism may be discovered, and a cure forthcoming. It is past due.



Using pictures and signing with a nonverbal student.

CL-1 Objective

Student imitates gestures.

Materials

- Rhythm band instruments
- ✓ CDs or cassettes which encourage imitation

Narrative

The following language and communication skills don't cover every area, but the procedure will serve as a model for similar tasks of your own design. And you can use it as an outline to extend each skill while increasing the difficulty level. There is some overlap in skills from previous sections. For example, pointing to, or naming pictures, numerals and letters are communication skills which appeared under the cognitive academic and math areas. Refer to those skill areas for teaching suggestions.

The following techniques and materials help the student acquire language and communication skills quickly. Using them in a systematically planned session increases the likelihood of acquisition and allows caregivers to implement selected teaching strategies across environments.

In the following outlined skills, I'm assuming your student is nonverbal or inappropriately verbal. Children with autism who are inappropriately verbal have verbal ability but do not use it consistently to communicate. They do not initiate spontaneous interaction with others. They may appear isolated in their own world much of the time and seem to prefer being left alone. This seeming unwillingness to associate and interact with other people is one of the major characteristics that sets autism apart from other severe disabilities.

Most children with autism enjoy music and are intrigued enough with it to interact in some way, particularly with a little encouragement. For this reason, music is an excellent way to engage the student's attention in learning imitation skills.

Procedure

With students in front of you, use rhythm band instruments in individual or group sessions.

Begin by asking students to imitate the number of times you ring a bell, hit a symbol, triangle, or drum. Practice, starting with a single strike—i.e., hit the symbol once—and gradually increase the number of times you hit it. Once, twice, three times, and so on. After lots of practice, tap out a simple

Note: There are many CDs and cassettes available that range from preschool to upper elementary. They have fun and engaging fingerplays, gross motor activities, songs to imitate, and exercises set to music.

rhythmic sequence and see if your student can imitate it. (Just tapping a table with a drum stick or pencil is an adequate substitute.)

For preschool children, imitating teacher movements while listening to music is a great way to learn. However, if the student watches the other children instead of the teacher, have an adult stand behind him to gently turn his head in the direction to which he must attend. If the student is motionless and won't imitate teacher actions, have another adult get behind the child and move his arms, legs, and fingers through the appropriate movements.

CL-2 Objective

Student points to named body parts.

Materials

None required

Narrative

This is a fun skill to work on if you can make a game out of it. When you first begin working on body parts identification, work in short sessions many times a day.

Consider that she may understand what you are requesting, yet not comply. Physically intervening and walking them through tasks they are reluctant to do on their own speeds up the learning process considerably. If you're consistent in your approach and persistent in tackling this skill several times daily, the student will soon point to her body parts independently when asked. If she tries to point to your eyes, discourage her. Ask her to look in a mirror when pointing so she understands her body is separate from yours.

Procedure

Begin with eyes and mouth. With the student standing or seated in front of you (knees to knees, chair to chair), say "eye." Use exaggerated movements to point to your eye. Say the word over and over as you point, making sure the student is looking at your face. If she isn't, take her head gently in your hands and turn it in the right direction while you say "look." You might need another adult to help the student look at you when you begin this task. Have an aide get behind the student take her head in her hands and gently hold it while the student looks in the right direction.



Music motivates students and is a good way to teach imitation skills.