



# Teaching Students with Autism

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stereotyped movements to accumulating vast amounts of information on specific topics (Volkmar, Lord, Bailey, Schultz, & Klin, 2004). This article offers a brief history of autism, proposed causes, interventions, and indicators for identifying and diagnosing autism. This article introduces strategies for teaching students diagnosed with autism in a public education environment. Viewpoints from multiple theorists coupled with specific instructional strategies in a general education classroom are also offered. The overall purpose of this article is designed to promote advocacy and understanding for children with autism in general education environments.

## Overview

Autism spectrum disorders is an umbrella term for a family of neuro-developmental conditions characterized by early-onset social and communication disabilities, challenges with imagination, and restrictive behaviors that interests ranging from stereotyped movements to accumulating vast amounts of information on specific topics (Volkmar, Lord, Bailey, Schultz, & Klin, 2004). Impairments in social interaction is one of the main factors typical of autism disorders, and these disorders also cause multiple deficits in language, play, eye contact, and gestures (Kanner, 1943). Other characteristics of autism include irregularities in communication, repetitive movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences with the added restriction of the capacity for abstract thought, especially as the individual ages (Hardman, Drew, Egan, & Wolf, 1993). Autistic spectrum disorders have also been described as conditions characterized by strong heritability (Baron-Cohen, 2004, p. 73). Children characterized by disorders on the autistic spectrum range in severity of their cognitive functioning, but their behaviors seem to be underscored by their inability to function appropriately in social settings, including schools.

## Possible Causes

Multifactorial factors and a shortage of research due to the relative newness of the disorder make it difficult to identify one specific cause for autism, although multiple theories have been developed. Biological factors seemed to play some role in developing the disorder (Baron-Cohen, 2004, pp. 75-76). Wing and Potter (2002)

## Abstract

Autism spectrum disorders is an umbrella term for a family of neuro-developmental conditions characterized by early-onset social and communication disabilities, challenges with imagination, and restrictive behaviors that interests ranging from

## Keywords

**Asperger Syndrome**

**Autism Disorder**

**Early Intervention**

**Perseveration**

**Positive Behavior Support**

**Restricted Interests**

**Theory-of-Mind Deficits**

argued, “Genetic factors alone are very unlikely to account for a real rise in rates that appears to have occurred so rapidly and continuously year on year” (p. 158). Based on perspectives of these two researchers, genetics seems to play an important role in the disorder, but other factors seem to play a role as well.

Another explanation linked genetics, environmental factors, and biological factors together. Fuentes (2004) wrote, “Genetics may also play a role in susceptibility” (p. 41). Overall, strong and convincing evidence suggests a strong heritable propensity for developing an autism disorder. However, the identity and number of genes involved are not yet known (Muhle, Trentacoste, & Rapin, 2004, p. 475). Consistent with this theory, additional studies demonstrated a 30% to 50% increase in serotonin levels of individuals with autism disorders. Despite evidence supporting genetics, environmental factors, and biological factors, investigators have not found a physiological basis for this documented phenomenon (p. 479). Additionally, there is evidence for a genetic relationship because of the over-representation of males with both conditions (Macintosh & Dissanayake, 2004, p. 428).

Overall, present data suggests a dramatic increase in the numbers of individuals being diagnosed with the disorder. In fact, one recent statistic was reported that a minimum of 500,000 individuals between the ages of 0 to 21 presently have an autism disorder in the United States alone (Centers for Disease Control, 2005). This statistic does not account for the numbers of affected individuals in other countries, because autism disorders are rapidly occurring on multi-national levels and recent estimates from the 2001 United Kingdom census indicated that 535,000 individuals were impacted (NAS, 2006). The latest statistics indicate that 1 out of 150 children aged 8 in various regions of the United States have autism (CDC, 2007). Various advocacy groups attribute multiple impacts, increasing demands, and rising numbers of individuals as a social concern.

## Autism Spectrum Disorders

Many times when people first become aware of autism disorders, it is the result of media attention or the movies, such as *Rain Man*. The Raymond character was an autistic ‘savant.’ These

individuals possess strange mannerisms and stereotypes, still cut off from normal life, but with amazing powers of arithmetic facility, recall, or artwork (Grandin & Sacks, 1995, pp. 11-12). Other characteristics exhibited by savants include the ability to complete amazing calendar calculations, mathematics, art, and memorization of facts and information. The facility with which these abilities are carried out is highly unusual and amazing (Klin, Danovich, Merz, & Volkmar, 2007, p. 89). Research has indicated that 1 out of 200 individuals diagnosed with autism might be considered to have “genuine savant abilities” (NAS, 2006; Ginn, 2007). These characteristics are relatively rare and should not be confused with other types of autism behaviors which will be further described.

## Asperger Syndrome

Within these types of autism, other categories are included and should be noted. Asperger Syndrome is probably the second most known autism disorder and prevalent in public school settings. Grandin and Sacks (1995) indicated that individuals with Asperger Syndrome possess high intelligence, understanding, and education. Instead of suffering long-term negative effects these individuals might actually live eventful and accomplished lives filled with unique insights and courage (p. 12). Tammiet (2006) described autism, including Asperger Syndrome, as impairments that affected social interactions, communication, and imagination indicated by problems with abstract or flexible thought and empathy. He further indicated that individuals with Asperger Syndrome often have good language skills and possess high IQs and excel in areas that involve logical or visual thinking (p. 6).

Powers (2002) described Asperger Syndrome as a form of “high functioning autism.” However, research still had not clearly determined the connections between autistic disorder and Asperger Syndrome other than the two disorders share severe social impairments such as “mindblindness.” This means that individuals with Asperger Syndrome may have the inability to see concepts from another person’s perspective. Furthermore, individuals with Asperger Syndrome also possess an “innocence” that can be misunderstood by others. Their innocence often places them at risk for being misunderstood or victimized by others (p. 12). A lack of maturity plays a role in “mindblindness.” Ozonoff and Miller (1995) referred to the concept of “mindblindness” as a theory-of-mind deficit. A theory-of-mind deficit was defined as “the inability to infer the mental states of others, such as their knowledge, intentions, beliefs, and desires” (p. 417).

Myles and Southwick (as cited in Barnhill, 2001, p. 264) argued that theory-of-mind deficits often lead to difficulties for the afflicted individual. Difficulties can include:

- An inability to explain their own behaviors,
- Difficulty interpreting emotions,
- Challenges determining the behavior or emotions of others,
- Misunderstanding the perceptions of others,
- Challenges with interpreting the intentions of others,

- A misunderstanding of how behaviors impact how other individuals think or feel,
- Conflicts regarding joint attention and other social niceties, and
- Challenges with differentiating fiction from fact.

Moreover, individuals with Asperger Syndrome possess a level of maturity significantly below what is expected for their chronological age. For example, adolescents with Asperger Syndrome often possessed the maturity of someone two-thirds their age (Myles & Adreon, 2001, p. 8). Attwood (2003) noted that impairment of the brain's frontal lobes, which handle social reasoning, make it difficult for those with the disorder to understand social cues tied to human interaction (p. 88). Despite causes or symptoms, it is important to possess some understanding of these disorders, potential reasons for why they may occur, and behavioral characteristics attributed to the disorders. Other types of autism disorders possess varying and similar characteristics that impact individuals in multiple ways.

## Applications

### Students with Autism Disorders in School

Students with an autism diagnosis face an uncertain and many times daunting educational future. Several aspects of this experience are not only tied to the academic aspect of school, but most often to the social aspect of the school environment. Autism disorders are categorized as socio-communicative disorders. School is a place dependent upon social communications between peers and adults. A recent study revealed that many of the difficulties that students face are tied to bullying and harassment by other students. Link (2007) reported on the experiences of mothers of children with autism disorders. One participant described a situation in which her son was harassed by other students and had been bullied for several years. She reported that her son "had been dealing with a lot of stuff" and "harassment and bullying" were pervasive "throughout the school system" (p. 96). She recalled complaining about the incidents to school officials and being told that the situation would be handled; after she found out that her son was still being bullied, the mother complained to administrators saying, "If you don't take care of it then we are going to take some other steps. My son should not have to feel afraid to go to school" (p. 96). Another participant indicated that other children did not understand her son's behavior. As a result, other kids made fun of him. A third mother indicated, "When another child teases my son, I want to take the names of those children, and I want to call their parents to make them stop their children from teasing him" (p. 96).

These specific statements made by parents of autistic children in public education settings reveal a need for all educational staff to be aware of the special problems encountered by children with autism in order to improve planning for ways to handle these situations. Mothers also reported multiple problems in the school

system between their children and teachers or educational staff. One mother indicated that she maintains regular contact with her child's teacher, because of ongoing confusion and concern. She recounted one incident when her daughter's teacher called her on the telephone and asked, "Do you have anything that works with your daughter? Can you give me any suggestions whatsoever? Because I don't have anything that's working with your child" (Link, 2007, p. 97). Another mother stated, "I advocate for my son by actively participating as a parent in the school environment" (Link, 2007, p. 97). These statements imply that children with autism face confusion and concern both from their peers and at times from educational staff.

Studies have indicated that individuals with autism disorders commonly experience clinically significant behavioral and/or emotional disturbance, with as many as 85% experiencing some type of difficulty, including depression (Barnhill et al., 2000, Kim, Szatmari, Bryson, Streiner, & Wilson, 2000; Tongue, Brereton, Gray, & Einfield, 1999). Dunn, Myles, and Orr (2002) reported that 75% of individuals with autism disorders experience behavioral problems when their sensory issues are not dealt with adequately in a school environment. Also, behavioral issues and sensory issues can be exacerbated by bullying from peers and a lack of understanding from educational staff. These concerns directly relate to interventions that can be offered by teachers.

### General Education Teachers who Teach Autistic Students

Teachers working with children with autism disorders should understand these children often require academic and learning accommodations. Children with autism present their own unique characteristics that differ according to the severity of impact and range of diagnosis. While children with autism typically share specific symptoms in common, children diagnosed with the categories of High Functioning Autism or Asperger Syndrome typically function differently than a child with autism or other categories. The information presented in this section is purposed to help general education teachers design accommodations for children less severely impacted and enrolled in the general education classroom either attended by a paraeducator or receiving pull-out services with special education professionals.

From a general perspective, children with autism often have academic disabilities such as reading comprehension deficits and problem solving difficulties (Barnhill, G. P., Hagiwara, R., Myles, B. S., Simpson, R. L., Brick, M. L., & Griswold, D. E., 2000; Church, Alisanski, & Amanullah, 2000). General education teachers teaching students with autism disorders should consider opportunities for professional development in these academic areas. Utilizing guided reading and formulaic writing strategies or curricula based on well-planned transitions between stations or centers founded upon a diagnostic reading inventory has been found to be successful for children with autism and other developmental disabilities (Simpson, Spencer, Button, & Sylvia, 2007). Educators should consider training in teaching strategies that offer adherence to routine, pre-taught transitions,

and the allowance for diversity in classroom constructs. Open-communication is also a strong mandate for all professionals working with autistic children.

### **Behavior Management**

In addition to academic difficulties, autistic children present a myriad of different behaviors. The development of behavior management plans can be an important strategy in preventing problematic behaviors in individuals with autism disorders. Children with autism often experience stress and either generalized or situational anxiety as an underlying factor in their disorder. Understanding these attributes of the disorder is central to understanding children with autism disorders. If children with autism disorders learn to recognize behaviors that lead to emotional and behavioral problems before they begin to escalate, these could offer important coping skills for preventing future problems (Marks et al., 1999; Williams, 2001).

Children with autism often experience numerous sensory disorders. By observing the autistic child in an educational setting, teachers can sometimes predict potential problems by observing the onset of specific behaviors such as pacing or perseveration on a specific task. In response to these specific behaviors, teachers should work closely with the special education team like a physical therapist or occupational therapist who can then respond with a menu of cognitive and behavioral options to help the child bring his or her behavior under control (Dahle & Gargiulo, 2004, p. 202). These observations strongly emphasize the coordination and collaboration of the special education team in facilitating the Individualized Education Plan.

One specific learning situation that causes difficulties for children with autism disorders is physical education. Due to gross and fine motor difficulties combined with confusion in understanding how to participate as a member of a team, children with autism often fail not only at achieving the motoric requirements of the game but also in understanding their role as a team member (Adreon & Stella, 2001). The participation of students with autism disorders can be enhanced by integrating support from the special education team and utilizing strategies such as preteaching the rules and transitions of the game (Dahle & Gargiulo, 2004, p. 202). Teachers should be aware that children with autism experience difficulties with transitions and a myriad of other issues; these children require pre-teaching, help in coping with behaviors, patience, and a great deal of understanding.

### **Administrators**

School administrators are often left with the major responsibility of understanding and articulating the vision and mission of educational staff toward children with autism. First and foremost, all educational staff should recognize the roles and relationships of special education staff including school psychologists, occupational therapists, physical therapists, speech therapists, special education teachers, paraeducators, and parents, because administrators typically possess the responsibility for scheduling all of these staff and maintaining the lines of communication. For new

administrators especially, they may not possess full knowledge of how each of these roles work and the responsibilities attributed to each of them.

Aside from understanding these educational roles, administrators should be especially mindful of parents' interpretations of educational roles and their expectations. For parents struggling with raising a child with an autism disorder, their lives are punctuated by stress (Waggoner & Wilgosh, 1990, p. 97). Mothers in particular experience more stress than fathers and this stress may negatively impact family cohesion (Little, 2004, p. 566). The results of empirical investigations suggest that parents of autistic children do experience higher levels of stress than parents of typical children (Bouman & Schweitzer, 1990; Holroyd & McArthur, 1976; Waggoner & Wilgosh, 1990, p. 97). As a result of these stressors, a significant finding from Link's (2007) dissertation study was that mothers strongly advocated for their children in educational settings "going to almost any lengths" (p. 97). One of the manifestations of this advocacy is increased involvement in the school environment and conflict between educational professionals and parents. Communication and advocacy for parents are essential in providing parents with needed information while maintaining the integrity of the educational environment. The administrator's key role in the educational environment is in maintaining the balance for all of these supports in order that the needs of the child are met.

## **Issues**

### **Overcoming Barriers to Educating the Autistic Child**

The barriers to educating the child with autism are many fold. One of the main concerns is in understanding the multiple aspects of the disorder. Some children with autism can look like typically functioning children. They can easily fall through the cracks if educators are not attuned to the symptoms of autism disorder. Many mothers report that especially with higher functioning children, the child could be 8 years old before a diagnosis is made. In order to offer the best educational potential to these children, early diagnosis and early intervention are essential. Educational staff must be vigilant in their observations and interactions of all of their students.

Another significant barrier is parents that are unwilling to accept their child's differences. It becomes very difficult to serve children's educational needs if parents are unwilling to admit a problem exists. Parents' misinterpretations of a child's behavior can result in denial and grief. To best educate children with autism disorders, educational professionals must understand the stressful impact of these disorders on family systems and individual family members. Also, children with autism can behave unpredictably and educational professionals need to expect the unexpected when interacting with the autistic child. To overcome these barriers, teachers require training in both understanding the autistic child and in providing accommodations for children with diverse needs.

## Conclusion

With the increasing numbers of children in public education environments diagnosed with autism, educational professionals must be attuned to the specific developmental needs of these children and their learning requirements. Children with autism face many difficulties. These difficulties can be both academic and behavioral, but all are underscored by communication deficits. Educators must be attuned to the developmental levels of all of the children they teach. Occasionally, parents will request educator help in preparing diagnostic documentation and providing collaboration with outside professionals, like clinical and neuropsychologists and other mental health professionals. Teachers must be aware that their role may require flexibility and diversity in their thinking. Moreover, children with autism are very concrete in their thinking. Teachers must utilize a flexible and comprehensive approach in their planning and relationships with autistic children and parents. The adults must be more flexible in their thinking, because children with autism will not reshape their thinking to accommodate the needs of adults in relationship with them. Adults must accommodate them in order to promote social and emotional growth for the autistic child.

## Terms & Concepts

**Asperger Syndrome:** Asperger Syndrome is a socio-communicative impairment that affects social interactions, communication, and imagination indicated by problems with abstract or flexible thought and empathy. Individuals with Asperger Syndrome often have good language skills and possess high IQs and excel in areas that involve logical or visual thinking

**Autism Disorder:** Autism spectrum disorders is an umbrella term for a family of neuro-developmental conditions characterized by early-onset social and communication disabilities, challenges with imagination, and restrictive behaviors that interests ranging from stereotyped movements to accumulating vast amounts of information on specific topics

**Early Intervention:** Early intervention is typically characterized supports given to very young children newly diagnosed with an autism disorder. These supports include therapeutic, academic, and behavioral interventions. Research indicates that early interventions directly support long-term outcomes.

**Perseveration:** Perseveration can be described as an intensive and repetitive use of a particular thought or interest such as a word, phrase, or gesture.

**Positive Behavior Support:** Positive behavior support can be described as the varying models of reinforcements utilized by psychologists, interventionists, educators, and parents in home programs to alter negative or restrictive behaviors.

**Restricted Interests:** Restricted interests characterize the specific interests of the child with Asperger Syndrome. These interests typically can be identified as a perseverative fascina-

tion with sports' statistics, trains, aquarium fish, sharks, whales, and any number of other single objects of interests.

**Theory-of-Mind Deficits:** Theory-of-Mind Deficits can be described as "mindblindness" or "the inability to infer the mental states of others, such as their knowledge, intentions, beliefs, and desires."

## Bibliography

- Adreon, D., & Stella, J. (2001). Transition to middle and high school: Increasing the success of students with Asperger syndrome. *Intervention in School and Clinic, 36*, 266–271. Retrieved November 23, 2007 from EBSCO online database, Academic Search Premier. <http://search.ebscohost.com/login.aspx?direct=true&db=aph&AN=4390487&site=ehost-live>
- Attwood, T. (2003). What does Asperger's look like? *Biography Magazine, 88*.
- Barnhill, G. P., Hagiwara, R., Myles, B. S., Simpson, R. L., Brick, M. L., & Griswold, D. E. (2000). Parent, teacher, and self-report of problem and adaptive behaviors in children and adolescents with Asperger syndrome. *Diagnostique, 25*, 147–167.
- Barnhill, G. P. (2001). What is Asperger Syndrome? *Intervention in School and Clinic, 36*, (5), 258-265. Retrieved November 23, 2007 from EBSCO online database, Academic Search Premier. <http://search.ebscohost.com/login.aspx?direct=true&db=aph&AN=4390465&site=ehost-live>
- Baron-Cohen, S. (2003). Autism: Research into causes and intervention. *Pediatric Rehabilitation, 7*, 73-78. Retrieved November 23, 2007 from EBSCO online database Academic Search Premier. <http://search.ebscohost.com/login.aspx?direct=true&db=aph&AN=12628437&site=ehost-live>
- Bouman, R., & Schweitzer, R. (1990). The impact of chronic illness on family stress: A comparison between autism and cystic fibrosis. *Journal of Abnormal Child Psychology, 21*, 179-198.
- Centers for Disease Control. (2007). *Who is affected?* (Last accessed November 23, 2007). <http://www.cdc.gov/ncbddd/autism/overview.htm>
- Church, C., Alisanski, S., & Amanullah, S. (2000). The social, behavioral, and academic experiences of children with Asperger syndrome. *Focus on Autism and Other Developmental Disabilities, 15*, 12–20. Retrieved November 23, 2007 from EBSCO online database Academic Search Premier. <http://search.ebscohost.com/>

login.aspx?direct=true&db=aph&AN=2980912&site=ehost-live

- Dunn, W., Myles, B. S., & Orr, S. (2002). Sensory processing issues associated with Asperger syndrome: A preliminary investigation. *American Journal of Occupational Therapy, 56*, 97–102.
- Fuentes, A. (2004). Injecting Mercury: Is Thimerosal the missing link in autism and developmental problems? *E Magazine, 15*(3), 40-41. Retrieved November 23, 2007 from EBSCO online database Academic Search Premier. <http://search.ebscohost.com/login.aspx?direct=true&db=aph&AN=12815784&site=ehost-live>
- Ginn, M. (2007). A to z of autistic spectrum disorder. *Learning Disability Practice, 10*(6), 32-35. Retrieved November 23, 2007 from EBSCO online database Academic Search Premier. <http://search.ebscohost.com/login.aspx?direct=true&db=aph&AN=25892550&site=ehost-live>
- Grandin, T. & Sacks, O. (1995). *Thinking in pictures and other reports from my life with autism*. New York: Vintage Books.
- Hardman, M., Drew, C., Egan, M. W., & Wolf, B. (1993). *Human Exceptionality: Society, School, and Family*. (4th Ed.). Old Tappan, New Jersey: Allyn & Bacon Publishers.
- Holroyd, J., & McArthur, D. (1976). Mental retardation and stress on the parents: A contrast between Down's syndrome and childhood autism. *American Journal of Mental Deficiency, 80*, 431-436.
- Kanner, L. (1943). Autistic disturbances of affective contact. *Nervous Child, 2*, 217-253.
- Kim, J. A., Szatmari, P., Bryson, S. E., Streiner, D. L., & Wilson, F. J. (2000). The prevalence of anxiety and mood problems among children with autism and Asperger syndrome. *Autism, 4*, 117–132.
- Klin, A., Danovitch, J. H., Merz, A. B., Volkmar, F. R. (2007). Circumscribed interests in higher functioning individuals with autism spectrum disorders: An exploratory study. *Research & Practice for Persons with Severe Disabilities, 32*(2), 89 – 100. Retrieved November 23, 2007 from EBSCO online database Academic Search Premier. <http://search.ebscohost.com/login.aspx?direct=true&db=aph&AN=26703426&site=ehost-live>
- Link, S. (2007). *A heuristic exploration of mothers of children with Asperger Syndrome*. Unpublished doctoral dissertation, Gonzaga University, Spokane, WA.
- Little, L. (2003). Maternal perceptions of the importance of needs and resources for children with Asperger Syndrome and nonverbal learning disorders. *Focus on Autism and other Developmental Disabilities, 4*, 257-266. Retrieved November 23, 2007 from EBSCO online database Academic Search Premier. <http://search.ebscohost.com/login.aspx?direct=true&db=aph&AN=11488397&site=ehost-live>
- Marks, S. U., Schrader, C., Levine, M., Hagie, C., Longaker, T., Morales, M., & Peters, I. (1999). Social skills for social ills: Supporting the social skills development of adolescents with Asperger syndrome. *Teaching Exceptional Children, 32*, 56–61. Retrieved November 23, 2007 from EBSCO online database Academic Search Premier. <http://search.ebscohost.com/login.aspx?direct=true&db=aph&AN=3001644&site=ehost-live>
- Macintosh, K. & Dissanayake, C. (2004). Annotation: The similarities and differences between autistic disorder and Asperger's disorder: A review of the empirical evidence. *Journal of Child Psychology and Psychiatry, 45*(3), 421-434.
- Muhle, R., Trentacoste, S., & Rapin, I. (2004). The genetics of autism. *Pediatrics, 113*(5), 472-486. Retrieved November 23, 2007 from EBSCO online database Academic Search Premier. <http://search.ebscohost.com/login.aspx?direct=true&db=aph&AN=12858449&site=ehost-live>
- Myles, B. S. & Adreon, D. (2001). *Asperger Syndrome and adolescence: Practicons for school success*. Shawnee Mission, KS: Autism Asperger Building.
- National Autistic Society (2006) The National Autistic Society. <http://www.nas.org.uk/> [Last accessed: November 23, 2006].
- Ozonoff, S., & Miller, J. N. (1995). Teaching theory of the mind: A new approach to social skills training for individuals with autism. *Journal of Autism and Developmental Disorders, 25*, 415-433.
- Powers, M. (2002). *Asperger Syndrome and your child: A parent's guide*. New York: HarperCollins.
- Simpson, C. G., Spencer, V. G., Button, R. & Rendon, S. (2007). Using guided reading with students with autism spectrum disorders. *Teaching Exceptional Children Plus, 4*(1), 2 – 9. Retrieved November 23, 2007 from EBSCO online database Academic Search Premier. <http://search.ebscohost.com/login.aspx?direct=true&db=ehh&AN=27166449&site=ehost-live>
- Tammet, D. (2006). *Born on a blue day*. New York: Free Press.

- Tongue, B. J., Brereton, A. V., Gray, K. M., & Einfield, S. L. (1999). Behavioral and emotional disturbance in high-functioning autism and Asperger syndrome. *Journal of Learning Disabilities, 31*, 160–171.
- Volkmar, E R., Lord, C, Bailey, A., Schultz, R. T, & Klin, A. (2004). Autism and pervasive developmental disorders. *Journal of Child Psychology and Psychiatry, 45*, 135-170.
- Williams, K. (2001). Understanding the student with Asperger syndrome: Guidelines for teachers. *Intervention in School & Clinic, 36*, 287–292. Retrieved November 23, 2007 from EBSCO online database Academic Search Premier. <http://search.ebscohost.com/login.aspx?direct=true&db=aph&AN=4390607&site=ehost-live>
- Waggoner, K. & Wilgosh, L. (1990). Concerns of families of children with learning disabilities. *Journal of Learning Disabilities, 23*(2), 97-113. Retrieved November 23, 2007 from EBSCO online database Academic Search Premier. <http://search.ebscohost.com/login.aspx?direct=true&db=aph&AN=4729306&site=ehost-live>
- Wing, L., & Potter, D. (2002). The epidemiology of autistic spectrum disorders: Is the prevalence rising? *Mental Retardation and Developmental Disabilities Research Reviews, 8*, 151-161. Retrieved November 23, 2007 from EBSCO online database Academic Search Premier. <http://search.ebscohost.com/login.aspx?direct=true&db=aph&AN=11782133&site=ehost-live>

## Suggested Reading

- American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (4th ed., text revision, DSM-IV-TR). Washington, DC: Author.
- Attwood, T. (1998). *Asperger's Syndrome: A guide for parents and professionals*. London: Jessica Kingsley.
- Grandin, T. & Sacks, O. (1995). *Thinking in pictures and other reports from my life with autism*. New York: Vintage Books.
- Hermelin, B. (2001). *Bright splinters of the mind: A personal story of research with autistic savants*. London: Jessica Kingsley Publishers.
- Klin, A., & Volkmar, E R. (1997). Asperger's syndrome. In D. J. Cohen & E R. Volkmar (Eds.), *Handbook of autism and pervasive developmental disorders* (2nd ed., pp. 94-122). New York: Wiley.
- Klin, A., & Volkmar, F. R. (2000). Treatment and intervention guidelines for individuals with Asperger syndrome. In A. Klin, E R. Volkmar, & S. S. Sparrow (Eds.), *Asperger syndrome* (pp. 340-366). New York: Guilford Press.

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