

What is ASD?

ASD stands for Autistic Spectrum Disorder/ Autism. This is a lifelong developmental disability that affects how people perceive the world and interact with others. Autistic people may see, hear and feel the world differently to other people. If you are autistic, you are autistic for life; autism is not an illness or disease and cannot be 'cured'. Autism is a spectrum condition. Every person with an Autism diagnosis is different and unique, however they may share some similar strengths and difficulties to others with the same diagnosis. Some people will also have learning disabilities, mental health issues or other conditions, meaning different levels of support are required.

An overview of Autistic Spectrum Disorder (ASD)



Possible difficulties:

ASD has a range of behavioural presentations. In addition to the core traits, individuals with ASD may have other characteristic cognitive, behavioural, emotional, motor and sensory issues. They are influenced by neurobiology, the environment and genetics.

Diagnosis:

There are two different classifications available to use when diagnosing Autism:

1. The International Classification of Diseases, tenth edition (ICD-10)
The ICD-10 is the most commonly-used diagnostic manual in the UK.
2. The Diagnostic and Statistical Manual, fifth edition (DSM-5)

This manual has recently been updated and is also used by diagnosticians.

The diagnostic criteria are clearer and simpler than in the previous version of the DSM, and sensory behaviours are now included. This is useful as many autistic people have sensory issues which affect them on a day-to-day basis.

- *Diagnostic criteria*

The manual defines autism spectrum disorder as “persistent difficulties with social communication and social interaction” and “restricted and repetitive patterns of behaviours, activities or interests” (this includes sensory behaviour), present since early childhood, to the extent that these “limit and impair everyday functioning”.

In DSM-5, the term ‘Asperger’s Syndrome’ no longer exists and has been replaced by ‘Autism Spectrum Disorder’.



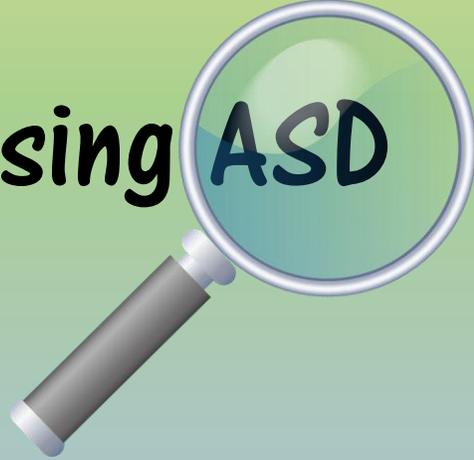
Social Interaction:

- Can struggle to understand another person's perspective
- Not always able to feel comfortable when making eye contact during interactions
- Can prefer to spend time alone rather than with other people
- May not initiate play with others or tends to play on their terms
- May correct adults when they are 'wrong' or haven't followed the correct routine regardless of their hierarchical status
- Can be very direct with comments to others

Communication:

- May repeat language heard (echolalia)
- May have delayed language development or speech
- Unusual pitch or tone of voice
- Can struggle to read non-verbal body language and gestures
- May have a literal understanding of language

Recognising ASD



Repetitive and Stereotyped behaviours

- Insistence on structure and routine with some inflexibility
- Ritualized patterns or verbal /nonverbal behaviour (e.g., extreme distress at small changes, difficulties with transitions, rigid thinking patterns, greeting rituals, need to take same route or eat the same food every day).
- Highly restricted
- Fixated interests that are abnormal in intensity or focus
- Can have a fixed mind set of following rules
- Stereotyped or repetitive motor movements, use of objects, or speech (e.g., simple motor stereotypies, lining up toys or flipping objects, echolalia, idiosyncratic phrases).
- Can have unusual attachments to objects

Sensory processing difficulties :

- Seems to have difficulties regulating own activity levels
- Seems to have difficulty regulating own emotions
- Hyper- or hypo reactivity to sensory input or unusual interests in sensory aspects of the environment (for example: apparent indifference to pain/temperature, adverse response to specific sounds or textures, excessive smelling or touching of objects, visual fascination with lights or movement).

Motor skills:

- Some difficulties with motor skills.
- Often difficulty with the ability to generate ideas within play, resulting in repetitive play activities
- Can find it challenging to organise self



Girls with Autism are often dis-diagnosed because their characteristics are not the same as the male population. This means that often assessments and screening tools used to identify children with this condition will not identify the female presentation. Intellectually able girls with Autism generally have better social skills than boys. Additionally the female population are more inclined towards sociability, emotionality and friendship. In every social situation, instead of socialising with little effort, they struggle to conform and to generate acceptable responses and behaviours. To manage this, they may have learnt strategies such as: rote-learning conversational phrases, imitating social behaviours (for example, from TV, internet or peers), following social scripts, and 'masking' or 'camouflaging' their innate ASD behaviours.

Recognising ASD in girls



Social Understanding:

- Follow and copy other girls
- Usually on the periphery of social interactions
- Females are generally more social
- Socially immature and passive
- Parents 'organising' their friendships
- Use non-ASD girls as a social prop
- Prefer 1:1 interactions over groups
- Mimic behaviour and language of those around them
- Tend to have one special friend whom they mother or are domineering towards.

Social Imagination:

- More pretend play and a better imagination
- Girls escape into another world
- Make believe play is often recreated from 'real' events

Social Communication:

- Lack of understanding for a social hierarchy
- Acquiring speech generally the same as males
- Do not 'do social chit chat'

Compensatory strategies often used by girls:

- Masking difficulties except when at home or 'comfortable'
- Internalising symptoms
- Impacts on mental health, often resulting in anxiety or eating disorders if mis-diagnosed

Special Interests and Routines:

- May hoard items
- Fashionable interests that are very intense and unusual in quality
- Perfectionism
- Model student and very well behaved outside of the family home



Helpful reading for children:

- Issue Tissue featuring Ricky Sticky by Maya Schwartz
- All cats have Asperger's by Kathy Loopman.
- "You're so clumsy Charley" by Jane Binnion.
- Alis Rowe 'The Girl with the Curly Hair' books.
- Meltdown kids series by Linda and Hugo Plowden

Celebrating differences

It is important for children to understand that everybody is unique. Build self identity and self esteem.

Helpful reading for adults:

- The Girl with the Curly Hair -Alis Rowe.
- Too loud, too bright, too fast, too tight by Sharon Heller.
- Sensational Kids by Lucy J Miller
- Asperger Syndrome and Sensory Issues: Practical Solutions for Making Sense of the World by Brenda Smith Myles, Katherine Tapscott Cook, Nancy E. Miller, Louann Rinner , Lisa A. Robbins
- Martian in the playground by Clare Sainsbury

Transitional objects

These can be useful to help with transitions, for example moving between home and school. Also visual timers can be helpful for transition periods or when something needs to come to an end.

Routine

Using routine charts, timetables and plans to provide a sense of structure and predictability. 'Orkids' items are a very good and portable source.

Comic strip conversations

To aid social understanding of scenarios and managing future situations differently.

Using basic visuals

Verbal children also process visual stimuli more easily and therefore using visuals is very helpful

Strategies for supporting children with ASD

Safe place/ Calm space

Somewhere to go to at home and school when feeling overwhelmed. Sensory items available and taught to student to aid regulation at these times. Also a key staff member whom has an identified bond with the child to be available and 'check in' with child daily. The child would likely benefit from a 'time out/ break' pass to leave the classroom when needed.

Informal social skills groups

These are necessary in schools to support children in understanding appropriate ways to participate in team activities and to support them with understanding what friendships should look like.

One page profile

These are really useful to raise staff awareness and provide key points on helpful strategies and also things that the child finds challenging.

Sensory circuits & sensory breaks

Make available sensory circuits and movement breaks in school daily to provide the child with time to transition more easily into school and also improve their regulation at the start of a school day.



Social stories

Social stories can be developed to support understanding of a new situation or an expected outcome for an event. How to develop them: <http://www.autism.org.uk/about/strategies/social-stories-comic-strips/uses-benefits.aspx>

