Resources for Teachers about Autism



Autism Society of America 7910 Woodmont Ave. Suite 300 Bethesda, MD 20814

1-800-3AUTISM
"The voice and resource of the

autism community"®

Autism Information

The Autism Society of America Web site www.autism-society.org

The Autism Society of America: Chapter Bookstores www.autismbookstore.com and www.autism-mi.org/bookstore

Autism Today, online magazine www.autismtoday.com

Online information, support and resources for families with autism and PDD

www.autism-pdd.net

Autism resources, including book lists, compiled by a parent www.autism-resources.com

The National Institutes of Mental Health http://www.nimh.nih.gov/publicat/autismmenu.cfm

The National Center on Birth Defects and Developmental Disabilities, part of the Centers for Disease Control and Prevention www.cdc.gov/ncbddd

Educating Children with Autism, 2001 National Acadamies Press, download for free:

http://www.nap.edu/books/0309072697/html/R1.html

Instructional Methods and Helpful Techniques

The Picture Exchange Communication System www.pecs.com

The TEACCH Method http://www.teacch.com/

The Lovaas Method, Applied Behavioral Analysis

www.lovaas.com

Sensory Integration International http://www.sensoryint.com/

Activities and Materials

Make picture cards, create stories with picture symbols, print out free tracing sheets and much, much more. www.dotolearn.com

The Learning page- chock full of more free resources and worksheets for teachers. www.thelearningpage.com

Learn more about Dr. Carol Gray's Social Stories technique.

www.thegraycenter.com

Pyramid Educational Products
The inventors of PECS and Pyramid Approach to Education
www.pecs.com

The Attainment Company sells books, videos, and educational materials and specializes in school-to-work transition.

www.attainmentcompany.com

Future Horizons, sells products and holds conferences around the country. www.futurehorizons-autism.com

Starfish Press, publisher of books on autism and families living with Autism. www.starfishpress.com

DIAGNOSTIC CRITERIA FROM DSM-IV AMERICAN PSYCHIATRIC ASSOCIATION PERVASIVE DEVELOPMENTAL DISORDERS

299.00 Autistic Disorder

- A. A total of six (or more) items from (1), (2), and (3), with at least two from (1), and one each from (2) and (3):
- (1) qualitative impairment in social interaction, as manifested by at least two of the following:
 - Marked impairment in the use of multiple nonverbal behaviors such as eye-to-eye gaze, facial expression, body postures, and gestures to regulate social interaction
 - Failure to develop peer relationships appropriate to developmental level
 - A lack of spontaneous seeking to share enjoyment, interests, or achievements with other people (e.g., by a lack of showing, bringing, or pointing out objects of interest)
 - Lack of social or emotional reciprocity
- (2) qualitative impairments in communication as manifested by at least one of the following:
 - Delay in, or total lack of, the development of spoken language (not accompanied by an attempt to compensate through alternative modes of communication such as gestures or mime)
 - In individuals with adequate speech, marked impairment in the ability to initiate or sustain a conversation with others
 - Stereotyped and repetitive use of language or idiosyncratic language
 - Lack of varied, spontaneous make-believe play or social imitative play appropriate to developmental level
- (3) restricted repetitive and stereotyped patterns of behavior, interests, and activities, as manifested by at least one of the following:
 - Encompassing preoccupation with one or more stereotyped patterns of interest that is abnormal either in intensity or focus
 - Apparently inflexible adherence to specific, nonfunctional routines or rituals
 - Stereotyped and repetitive motor mannerisms (e.g., hand or finger flapping or twisting, or complex whole-body movements)
 - Persistent preoccupation with parts of objects
- B. Delays or abnormal functioning in at least one of the following areas, with onset prior to age 3 years:
 - Social interaction
 - Language as used in social communication
 - Symbolic or imaginative play.
- C. The disturbance is not better accounted for by Rett's Disorder or Childhood Disintegrative Disorder.

299.80 Rett's Disorder

- A. All of the following:
 - Apparently normal prenatal and perinatal development
 - Apparently normal psychomotor development through the first 5 months after birth
 - Normal head circumference at birth
- B. Onset of all of the following after the period of normal development:
 - Deceleration of head growth between ages 5 and 48 months
 - Loss of previously acquired purposeful hand skills between ages 5 and 30 months with the subsequent development of stereotyped hand movements (e.g., hand-wringing or hand washing)
 - Loss of social engagement early in the course (although often social interaction develops later)
 - Appearance of poorly coordinated gait or trunk movements
 - Severely impaired expressive and receptive language development with severe psychomotor retardation

299.10 Childhood Disintegrative Disorder

A. Apparently normal development for at least the first 2 years after birth as manifested by the presence of age-appropriate verbal and nonverbal communication, social relationships, play, and adaptive behavior.

- B. Clinically significant loss of previously acquired skills (before age 10 years) in at least two of the following areas:
 - Expressive or receptive language
 - Social skills or adaptive behavior
 - Bowel or bladder control
 - Play
 - Motor skills
- C. Abnormalities of functioning in at least two of the following areas:
 - Qualitative impairment in social interaction (e.g., impairment in nonverbal behaviors, failure to develop peer relationships, lack of social or emotional reciprocity)
 - Qualitative impairments in communication (e.g., delay or lack of spoken language, inability to initiate or sustain a conversation, stereotyped and repetitive use of language, lack of varied make-believe play)
 - Restricted, repetitive, and stereotyped patterns of behavior, interests, and activities, including motor stereotypies and mannerisms
- D. The disturbance is not better accounted for by another specific Pervasive Developmental Disorder or by Schizophrenia.

299.80 Asperger's Disorder

- A. Qualitative impairment in social interaction, as manifested by at least two of the following:
 - Marked impairment in the use of multiple nonverbal behaviors such as eye-to-eye gaze, facial expression, body postures, and gestures to regulate social interaction
 - Failure to develop peer relationships appropriate to developmental level
 - A lack of spontaneous seeking to share enjoyment, interests, or achievements with other people (e.g., by a lack of showing, bringing, or pointing out objects of interest to other people)
 - Lack of social or emotional reciprocity
- A. Restricted repetitive and stereotyped patterns of behavior, interests, and activities, as manifested by at least one of the following:
 - Encompassing preoccupation with one or more stereotyped and restricted patterns of interest that is abnormal either in intensity or focus
 - Apparently inflexible adherence to specific, non-functional routines or rituals
 - Stereotyped and repetitive motor mannerisms (e.g., hand or finger flapping or twisting, or complex whole-body movements)
 - Persistent preoccupation with parts of objects
- C. The disturbance causes clinically significant impairment in social, occupational, or other important areas of functioning.
- D. There is no clinically significant general delay in language (e.g., single words used by age 2 years, communicative phrases used by age 3 years)
- E. There is no clinically significant delay in cognitive development or in the development of age-appropriate self-help skills, adaptive behavior (other than in social interaction), and curiosity about the environment in childhood.
- F. Criteria are not met for another specific Pervasive Developmental Disorder or Schizophrenia.

299.80 Pervasive Developmental Disorder Not Otherwise Specified (Including Atypical Autism)

This category should be used when there is a severe and pervasive impairment in the development of reciprocal social interaction or verbal and nonverbal communication skills, or when stereotyped behavior, interests, and activities are present, but the criteria are not met for a specific Pervasive Developmental Disorder, Schizophrenia, Schizotypical Personality Disorder, or Avoidant Personality Disorder. For example, this category includes "atypical autism"-- presentations that do not meet the criteria for Autistic Disorder because of late age of onset, atypical symptomatology, or subthreshold symptomatology, or all of these.

Your Tool Box



Professional Development

What works in regards to professional development.	What does not work?	How could professional development be improved in your work situation?

Staff Supports

What are the primary services your staff has when a student with ASD is enrolled in their class?	What supports could you offer the staff member?

The Resource . . . What strategies from the book could you implement . . .

tomorrow	next week?	next quarter?

The Future . . .

What strategies from the book would require more training for you or your staff?	How will you use this information in the future?