

High Functioning Autism Spectrum Disorder (HFASD)

Always

Unique

Totally

Interesting

SOMETIMES

MYSTERIOUS



Definition of HFASD:

High Functioning Autism is also commonly known for being called Asperger Syndrome (AS) which is a condition when adversity affects academic performance on the autistic spectrum characterized by difficulties with flexibility of thought, social interaction and communication.

Characteristics:

Academic:

- Academic aspects of HFASD can be that maybe their speech is abnormally loud or quiet, difficulty whispering, makes verbal sounds while listening, high vocabulary, and repeats phrase sometimes or last word.

Social:

- Some social characteristics of children with HFASD may include difficulty reading facial expressions and body language, minimal acknowledgement of others, talking excessively about one or two topics, very little or no eye contact, makes honest but inappropriate observations, prefers to be alone, and generally does not like to share observations or experiences with others.

Behavioral:

- Children with HFASD also intend to have some behavioral issues such as obsessions with objects, idea, and desires as well as finding the need to fix or rearrange objects, perfection in certain areas, play tends to be repetitive, and even difficulty waiting in line.

Functional:

- Walk without swinging arms, walk on toes, irregular sleep patterns, difficulty walk through spaces around people, verbal outbursts, unexpected movements, transitioning from one thing to another may be hard as well when concerning functional ability of HFA children.

Strengths:

- Often highly skilled in a particular area
- Independent thinker
- Less concern for what others may think of him/her
- Average to above average intelligence.
- Nonjudgmental listening.
- Ability to develop out of most of the traits by adulthood.

Challenges:

- Hard to grasp the "big" picture
- Difficulty study areas not within interest.
- Difficulty perceiving emotional state of others.
- Difficulty understanding and summarizing important information in/for a conversation.
- 1 in 3 children have clinical depression.

Diagnosing: (look in three main areas) -

- Social interactions:** symptoms such as lack of eye contact or an inability to understand another person's feelings.
- Verbal and nonverbal communication:** symptoms such as not speaking or repeating a phrase over and over again.
- Interests in activities, objects, or specialized information:** symptoms such as playing with only a part of a toy or being obsessed with a particular topic.



Communicating with Parents:

- Specifically, the therapist teaches parents to follow the child's lead in play by using the PRIDE skills: **P**raising the child for a specific behavior, **R**epeating the child's statements, **I**mitating the child's play, **D**escribing their child's behavior, and using **E**nthusiasm throughout the play. They also learn to avoid asking questions, criticizing, and giving their child commands because these behaviors prevent the child from leading the play and create an unpleasant environment.
- Children with high functioning autism oftentimes have difficulty with a number of behaviors required to initiate social interaction such as making eye contact and appropriately beginning or ending conversations (i.e., saying "hello" or "goodbye"). By coaching parents to have their children make eye contact and say "hello" and "goodbye" at every opportunity for social interaction, social skills are over-trained and are likely to generalize to other contexts void of prompts or requests.

Common Classroom Accommodations:

- People with AS can find it hard to cope with change and unexpected events. Routines should be kept as consistent as possible and when changes are envisaged they should be announced as far in advance as possible.
- AS students may misinterpret your questions or instructions. Be clear in any verbal or written instructions and be prepared to rephrase a question if necessary.
- You may notice that AS students behave 'differently' to others in the group. They may come across as abrupt or even rude and have difficulties with conversations. Be prepared for managing interactions.
- Wherever possible give clear, step by step instructions and prompt and constructive feedback.
- AS students often have low self esteem – offer as much realistic encouragement as possible. Be reliable, consistent and offer help at a level that you can maintain. Try, where possible, to be flexible and adapt to the student's style of thinking and working, and to their patterns of behavior.
- People with AS do not learn manners indirectly and would generally prefer to be told (in private) if they are coming over as ill mannered or odd. They will be very different from each other and their range of experiences will vary considerably.

Sources:

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APRIL IS AUTISM AWARENESS MONTH

