Autism: A Guide for Mainstream Primary Schools

www.ASDinfoWales.co.uk
Autism: A Guide for Mainstream Primary Schools
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Foreword

I am pleased to provide a foreword address to Autism: A Guide for Mainstream Primary Schools, and hope that along with other resources within the ‘Learning with Autism’ programme it will provide practical knowledge and advice for staff and pupils within schools.

Creating an Autism-Aware School can only be achieved by everyone in a school working together and the Learning with Autism programme will develop understanding across the whole school.

As individuals within the school community, come to understand more about ASD, their actions influence those around them, and being an Autism-Aware School becomes a reality.

The programme has been developed with support and advice from a range of professionals, parents and carers. We are very grateful for the commitment shown, and hope that this resource helps to improve the lives of children with ASD and their families.

Councillor Ali Thomas OBE
Introduction to Autistic Spectrum Disorders

Estimates tell us that around 1 in 100 children have an Autism Spectrum Disorder - or ASD - which means there are children with an ASD in most schools, whether diagnosed or not.

Children with ASD present with a variety of strengths, difficulties and sometimes behaviour issues. For these children the cause of behavioural difficulties usually relates to the core symptoms of autism not being appreciated, and suitable support and adaptations not being put into place.

By adapting your practice, a child with ASD will feel safer, less anxious and have an increased understanding of what is expected of them. This in turn will mean that the child is more likely to have increased attainment, improved behaviour and therefore is at a reduced risk of exclusion.

It is widely recognised that the methods used to support children with ASD can also benefit other children in the classroom.

All children with ASD have impairments in social communication, social interaction, social imagination and a preference for routines. Many have sensory issues and a restricted pattern of behaviours. It is important to remember that the way in which this affects a child varies, and strengths or weaknesses in one area are not necessarily accompanied by strengths or weaknesses in other areas.

For example, many children with higher functioning ASD have good or above average use of language. Having a complex vocabulary does not mean that the child will understand the same level of vocabulary, nor that the child understand the vocabulary that he or she is using.

We shouldn’t forget the many positive attributes of children with an ASD. They often bring skills and knowledge that come from following a special interest, maybe showing close attention to detail, often picking up on things that others have missed. These abilities can be used to encourage engagement in school work, and enable them to make their own, unique contribution to school life.

Many children with ASD (especially when diagnosed in later childhood) have had negative experiences in relation to school. These experiences will have decreased confidence, and self-esteem. Rebuilding self-esteem is an important step in addressing behaviours. Often children with ASD have a fear of failure, and so negative responses from staff within the school setting can increase the anxiety and subsequent negative behaviour.

Due to the issues children with ASD experience, many have difficulties in accessing the curriculum and will need differentiation in teaching styles and approaches.

The learning with autism programme has been developed to equip schools with enhanced understanding of ASD and how to meet the needs of children with the condition.
Learning With Autism 
Programme Overview

Learning with Autism is a programme that has been developed by the Welsh Local Government Association to raise awareness of ASD in schools, and is open to head teachers, teachers, learning support staff, governors and other school staff, and all Key Stage 2 pupils. The programme can be accessed at www.ASDinfoWales.co.uk/primary-school.

Learning with Autism is an invitation to become an ‘Autism Aware School’, and in addition to this guide there’s a package of resources available to support the process:

**Introduction**
- a short introductory film, introducing the ‘learning with autism’ programme and highlighting the benefits of making adjustments for pupils with ASD, including decreasing challenging behaviours and increasing attainment
- a self-evaluation tool based on the Estyn inspection framework for schools, which will help schools to identify their current provision and practice, and plan and monitor improvement

**For Teaching Staff**
- a training film, showing some of the challenges faced by children with an ASD during a normal school day, designed to develop awareness, and stimulate discussion about the steps we can take to improve their experience and attainment levels
- an online questionnaire leading to a Teachers’ Certificate in ASD Awareness

**For Learning Support Staff**
- a training film looking at how the right support and guidance at school can help children with an ASD. It examines areas of practical relevance, including sensory issues, the importance of routines, effective communication, play and friendships
- an online questionnaire leading to a Learning Support Staff Certificate in ASD Awareness

**Governors and other school staff**
are encouraged to take part in a nation-wide ASD awareness programme aimed at all adults. It includes;
- a Power Point presentation about the issues involved in autism
- an online questionnaire leading to a Certificate in ASD Awareness

**For Key Stage 2 Pupils**
- there’s an adventure comic-strip, available digitally and as a printed book, featuring positive role models for children
- an online pledge, leading to an Autism Superhero Certificate
With everyone on board, the whole school gets a certificate showing it's completed the Learning with Autism programme.

There are also additional resources to help support children with ASD in school, including:

- an online Child Profile, available to teaching staff, parents, carers and other professionals. With everyone working together, it can build into an effective resource, making sure there's consistency and continuity of care for a child with an ASD
- children's picture cards, a simple, interactive resource, where you can search, select, download and print from a series of bilingual picture cards, to create a structure chart for a child with autism
- an ASD Planner App, designed to help organise and sequence activities. Teachers, parents and carers can input relevant information, giving a school day the clear structure that children with an ASD need, in an accessible format

Everyone needs to be on board to create an ‘Autism-Aware Schools’, and the Learning with Autism programme includes all sections of the school. As individuals come to understand more about ASD, their actions influence those around them, and being an Autism-Aware School becomes a reality.

Raising awareness about autism has the power to change lives: the lives of children with an ASD, and the lives of those around them. It encourages understanding, tolerance and respect, so that together we can all reach our full potential.
Understanding Autistic Spectrum Disorder
Recognising the Signs of ASD in those without a Diagnosis

Autistic Spectrum Disorder can be diagnosed from around the age of 2. However, for many, the symptoms are missed during the early years and many are not diagnosed until much later on. For some individuals, the symptoms are missed in childhood and they are subsequently not diagnosed until adulthood – usually after a long period of struggling to manage day to day.

Early recognition and intervention ensures that children can receive the most appropriate support and in turn benefit from the best outcomes.

NICE Guidelines CG128, Autism in under 19s: recognition, referral and diagnosis (www.nice.org.uk/guidance/cg128/chapter/1-Guidance#recognising-children-and-young-people-with-possible-autism) advise that professionals should use their judgement as to whether a child should be referred for assessment or not. The guidelines recognise that scores obtained from ‘symptom recognition tools’ (sometimes inaccurately referred to as ‘screening tools’) should not be relied upon. It is recommended that the decision to refer should be considered on the basis of;

• signs or symptoms
• range
• number
• severity
• duration
• pervasiveness
• impact

They also recommend that special attention should be paid to the level of parental concern about the child or young person.

Common signs of ASD are highlighted in the following pictures and more information about referring a child can be found at www.ASDinfoWales.co.uk/recognise-ASD-child
Autism – do you know the signs?

Social Interaction and verbal communication are impaired

Imagination, ideas and creativity are reduced

Gestures and non verbal communication are limited

Narrow range of interests, routines and repetitive behaviours

Sensory responses are unusual

www.asdinfowales.co.uk/recognise-ASD-child  I  www.asdinfowales.co.uk/recognise-ASD-adult
Autism – do you know the signs?

Children and Younger Adolescents

Social Interaction and Verbal Communication

Repeating certain words or phrases over and over again ("echolalia")

Does not follow simple commands relating to objects not in view (such as fetch your toothbrush)

Talks excessively about topics of own interest

Limited use of language

Takes things literally, struggles with sarcasm and metaphor

Does not respond by looking when name is called. Talks 'at' others rather than sharing a two-way conversation

Does not seek comfort when in pain or distress

Indifferent to, or no interest in age peers

Does not offer comfort to others

Approaches others in one sided or own terms

Does not respond to greetings and farewells

Emotional responses to others are inappropriate, rude and unsympathetic

Does not 'share' interests or enjoyment with others

Does not spontaneously join in or interact with others of same age

Problems with turn-taking or team activities

Does not enjoy social situations that most children like (e.g. birthday parties)

Imagination, ideas and creativity

Lack of imaginative pretend play (pretending that dolls and toys are real and enacting out scenarios with them or role play)

Imaginative pretend play or role play is repetitive

Imaginative pretend play is over-focused or obsessive or copied (not invented)

Imaginative pretend play is solitary or plays near but not with other children

Plays imaginative pretend play with others but not equally shared - may passively copy another's imaginative game, or insist that others follows his/her own themes and rules

Struggles to predict reactions of others

Gestures and non verbal communication

Lack of spontaneous gesture that expresses emotion (e.g. putting arm around someone)

Does not 'show' objects by holding them up or giving them to someone

Lack of pointing to show objects and share interest

Reduced or unusual eye contact

Does not follow a pointing gesture to where someone is looking

Lack of social smile

Narrow range of interests, routines and repetitive behaviours

Displays repetitive behaviours or rituals that negatively affect daily activities

Repetitive 'stereotypical' movements such as hand flapping, body rocking while standing, spinning, finger flicking

Arranges objects in patterns or lines and dislikes these to be disturbed

Self-chosen activities are limited and unchanging

Dislike of change, which can lead to anxiety or aggression

Over-focused, unusual or highly specific interests and hobbies

Insists on following own agenda

Prefers familiar routines, likes things to be 'just right'

Has strong adherence to rules or fairness that leads to arguments

Sensory responses

Unusual sensory responses to sound, sight, touch, taste, smell, movement and/or pain


Unaware of other's feelings

Can be over-formal or over-familiar

Finds making and keeping friendships difficult

Empathy reduced or absent

Poorly integrated gestures, facial expressions, or body language or eye contact when having conversations

Odd or flat/monotonous tone of voice

Children and Younger Adolescents

Social interaction and Verbal communication

Autism – do you know the signs?
What is an Autistic Spectrum Disorder (ASD)?

An Autistic Spectrum Disorder (ASD) is a developmental disorder which affects the way a person communicates with and relates to other people and the world around them. The way in which people are affected varies from one individual to another and by age and intellectual functioning.

Children with ASD are affected in a variety of ways and to very different degrees. This is why it’s called ‘the autistic spectrum’. Autism can affect children with any level of intellectual ability, from those who are profoundly learning disabled, to those with average or high intelligence. So, having an ASD doesn’t necessarily mean that you have learning difficulties.

The more seriously affected children at one end of the spectrum have learning difficulties as well and require high levels of support. At the other end of the spectrum, some people with ‘high-functioning autism’ are very intelligent academically. They may go on to be successful in their chosen field. However, they still experience significant social and communication difficulties.

What are the core characteristics of autistic spectrum disorders?

Children with ASD have significant difficulties relating to other people in a meaningful way. It is very common for ASD children to have profound sensory issues. This, combined with the triad of impairments, means that children with autism experience the world very differently. The ‘triad of impairments’, or ‘the three impairments’ are issues with:

- social interaction
- social communication
- rigidity of thinking and difficulties with social imagination

Children with an ASD frequently also experience:

- repetitive behaviours/stimming
- special interests
- sensory issues

*It is important to remember that the autism spectrum is broad and therefore different individuals with ASD may display all or only some of the characteristics described.* In this guide we will aim to help you understand the characteristics of autistic spectrum disorders, the impact of school on the child with ASD and support strategies in more detail.

Social Interaction

From birth, most children display signs of wanting to engage with others. They enjoy interacting, and look to others to learn from. As these children grow, they appear motivated by and develop more skills in engaging with others, seeking praise and sharing pleasure and interests. Children with an ASD find social interaction difficult, and often appear less motivated to
socialise. They may seem less interested in people, find it hard to understand what others expect of them - they often seem trapped in a world of their own. Try to find common ground (engaging in special interests is often useful) to begin to build trust and rapport with the child.

In school, the child with ASD may not like to be approached, or only be receptive to approaches from people they know well. They may show preference for individual activities, or prefer to engage with adults over peers. Do not force the child to engage with you, be understanding and take your time. The more familiar the child is with you, the more likely he will engage with you.

Some children with an ASD may like being sociable, but struggle to do this appropriately or may want social contact on their terms only. They may appear ‘awkward’, not liking anyone in their personal space or entering others personal space inappropriately. They may make errors in their interaction with others, be over – formal or over – familiar, makes personal remarks without realising they are offending. They may struggle to start, end or take turns in conversation and may appear to talk ‘at’ rather than ‘to’ someone. They may talk excessively about their own interests, and not recognise when someone is bored or disinterested.

This lack of social awareness can also mean that the child has difficulty in understanding and following social rules such as taking turns, not interrupting or waiting in line.

Do not punish the child for making social mistakes, instead teach the child more appropriate behaviour by creating simple rules around appropriate behaviour and rewarding the child for adhering to them.

Older children can be easily confused by the untruths associated with social niceties. It is often hard for them to differentiate between when it is socially appropriate to lie (e.g. by saying someone’s hair looks nice when they don’t really think it does) and when it is wrong to lie (e.g. by saying a peer stole something when they didn’t). Getting this right will require a lot of support, reinforcement and practice.

There are many negative impacts associated with impairments in social interaction. The child can often experience low self – esteem from ‘getting it wrong’ frequently. Friendships with peers can suffer, many children with ASD want friends but find it difficult to make and sustain friendships.

Not understanding the purpose of social interaction (along with other issues) can make the child choose to avoid social occasions such as Birthday parties or sleepovers. At times, adults who do not understand ASD may assume that the behaviours are caused by ‘rudeness’ or ‘naughtiness’ which results in the child being punished or ‘labelled’ for something they have very little control of.

**Social Communication**

Children with ASD may not be eager to communicate. They may not be ready to learn things that other children learn naturally and therefore don’t have the chance to tune into language in the same way. They find it very hard to make sense of the things that happen around them. Words may mean very little to them and they may be unable to link what they see with the things being said to them. Social communication and interaction are issues that all children
with an ASD struggle with and not understanding or misunderstanding can often be a cause of anxiety and subsequent anxiety, withdrawal or aggression in the classroom.

**Verbal Communication**

From birth, most children display signs of wanting to engage with others. They enjoy interacting, and look to others to learn from. As these children grow, they appear motivated by and develop more skills in engaging with others, seeking praise and sharing pleasure and interests.

Many higher functioning children have a higher level of expressive language (what they say) than receptive language (what they understand). When language is at an average or an above average level, it is often assumed that level of understanding is equal but this is often not the case.

Even with higher level verbal skills, children with an ASD still find non-verbal communication difficult and struggle to use, and understand, non-verbal communication methods. These communication difficulties can cause problems in giving information to and gaining information from pupils with an ASD. Being aware of these difficulties and adapting your own communication style is essential when working with pupils with an ASD.

**Long questions and explanations can cause confusion for someone with ASD, so try to avoid using them. Break down long instructions into smaller stages, and/or support the instruction with pictures or lists.**

Children with ASD will often have a very literal understanding of language. Idioms, metaphors and similes may be very confusing or create misunderstandings.

<table>
<thead>
<tr>
<th>Idioms:</th>
<th>Metaphors:</th>
<th>Similes:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Make up your mind</td>
<td>She’s an old flame</td>
<td>He is as rich as a king</td>
</tr>
<tr>
<td>You’re barking up the wrong tree</td>
<td>Dad is a rock</td>
<td>She is as cool as a cucumber</td>
</tr>
<tr>
<td>Pull your socks up</td>
<td>You are an angel</td>
<td>You are as cold as ice</td>
</tr>
<tr>
<td>Put your thinking cap on</td>
<td>Bill is a snake</td>
<td>As bright as a button</td>
</tr>
<tr>
<td>That’s the pot calling the kettle black</td>
<td>My head was spinning</td>
<td></td>
</tr>
</tbody>
</table>
When interpreted literally, these phrases are very confusing. You should avoid using figurative language when interacting with a child with an ASD. Don’t be misled by the child using some metaphors, it does not necessarily mean they will understand yours, especially if they are not familiar with them.

Often we will use phrases which literally interpreted mean one thing, when actually we are implying something else. For example we may say “well done for listening” when actually we mean “well done for stopping when I asked you to”, or “wait a second” when we mean “I’ll help you after I have finished this task”. Make sure you say what you mean when talking to a child with autism, otherwise it can lead to much confusion and anxiety.

We often use analogies to try and explain things to children in simpler terms. For example, if we are trying to explain why a child needs to eat his dinner, we might talk about it being like putting fuel in a car and explain that if the car doesn’t have enough fuel it will break down. It is difficult for a child with ASD to link this sort of an explanation with the original problem you are trying to explain. Try and use facts to explain things instead of analogies.

Because children with autism have difficulty understanding figurative language and struggle to ‘read between the lines’ you should always – SAY WHAT YOU MEAN AND MEAN WHAT YOU SAY.

Due to issues with social interaction, many children with an ASD will not offer any more information than they are asked for. For example, if asked “can you reach the milk out of the fridge?” they may answer “yes”, but may not offer additional information such as “but only if I stand on tip toes on top of a box”.

For the same reasons, using generalised questions may produce misleading answers, eg “How are you feeling?” may get a learned response of “very well, thank you”, but asking “have you got a sore tummy?” may get a “yes”, because it is a specific question.

Be clear and specific when questioning a pupil with autism. Try and avoid open ended questions, and choose specific over non-specific terms such as ‘often’, ‘usually’ or ‘normally’.

Children with ASD may need more time to process and understand what you are saying. Pausing frequently and allowing them to think, and allowing a longer time for a response can help.

When giving information or teaching someone with ASD, it is often helpful to use pictures or photographs or to use ‘to do’ style lists to reinforce and remind the child of what you have asked them to do.

Always check that the child has understood what you have told them by asking them to explain it to you.

**Non Verbal Communication**

Regardless of level of verbal communication, children with an ASD struggle to use and understand non verbal methods of communication.
Do not rely on non-verbal methods to communicate, emphasise or contradict your point as the child with ASD may not be able to understand these subtle ways of communicating.

Many, but not all, children with autism have an ‘unusual’ eye contact. This may be noticed as the child avoiding eye contact, giving too much eye contact or a more subtle difference such as not using eye contact when showing or requesting something.

We often assume that a lack of eye contact implies that someone is not listening or not paying attention. For children with ASD the opposite is often true, they may find it easier to focus on listening to you when they are not concentrating on looking at you.

For those with ASD, eye contact is often uncomfortable and has even been described as painful. You should not force a pupil with autism to give you eye contact, nor punish them for avoiding eye contact with you.

Because children with ASD may have problems interpreting non-verbal communication such as eye contact and body language, they may not realise that you are addressing them, especially when in a group of other children. Start by saying their name and making sure you are in their view before speaking so they are aware you are talking to them.

Children with ASD have difficulty in interpreting the communicative intention of changes in pitch and tone of voice and indeed often present with an unusual pitch, accent or tone themselves. Indeed, for some children find variations in tone and pitch confusing or distressing. When interacting with a child with ASD, use a relaxed consistent tone of voice. Don’t shout, it will not help to the child with autism to learn and will more than likely teach the child to shout instead.

Complex humour and sarcasm are often conveyed through contradicting verbal and non-verbal communication. A spoken phrase is compared with tone of voice, facial expression and used to work out whether someone is being serious or not. Children with ASD will often be unable to do this, and will assume the words used are accurate. Avoid using sarcasm and complex humour, it can be very confusing for the child with an ASD, if you are using humour or sarcasm with other pupils, make sure you let the child with ASD know.

A child with ASD may not support their verbal communication with body language, facial expression or changes in tone of voice. If they do, they may not accurately reflect how the child is feeling or what the child means so be careful not to make assumptions based on non-verbal cues.

If a child has sensory problems, environmental issues such as loud noises or bright lights may affect their ability to communicate. Minimise sensory distractions - please refer to the section on sensory issues.
Social Imagination, Rigidity of Thought and Routines

Imagination helps us understand the world and predict and see the perspective of other people. Children with an ASD are unable to do this to any great extent. In children with an ASD the development of pretend play may occur very slowly, in unusual ways, or not at all.

Problems with imagination make the world a very uncertain place, it makes it difficult to plan, cope with changes, predict other’s responses, empathise and problem solve. Children with ASD often find reassurance in setting up routines and patterns that they can control and prefer predictability to uncertainty.

This means that children with an ASD:

• cannot easily make sense of sequences and events
• engage in repetitive activities
• may become distressed if a familiar routine changes
• may impose routines on others
• prefer sameness, and will often resist new experiences
• find it hard to work out what other people are going to do, and cannot make sense of why other people do what they do
• struggle to understand how their behaviour may affect others, may not understand social hierarchy
• have no, or reduced empathy
• struggle with imaginative play, pretending and creativity
• find it hard to make ‘free choices’
• will often pay particular attention to details and struggle to see the bigger picture

Within the school environment, it is essential that staff recognise that children with an ASD:

• need regular routines that are communicated to them in visual format
• must have changes kept to a minimum and to be prepared for unavoidable changes in advance
• require additional structure across many social and learning activities
• have difficulties with imaginative play and creative activities
• struggle to empathise with, and predict the behaviour of, other people and characters

Routines and Coping with Changes

Many children with an ASD find it difficult to cope with changes, they prefer the predictability of a routine and cope better with structured activities.

Children with an ASD often work better within predictable routines. By ensuring consistent routines during the day, within lessons and in the way in which you interact, you will help to alleviate worry and anxiety.

Because of the difficulties that children with ASD often have around predicting events, it is essential that the day’s activities are planned ahead and communicated to the child.
Many children will need visual aids to help them. These ‘planners’ can help to decrease anxiety and ensure the child understands the order of activities – preventing confusion and distress.

Different children will need planners presented in different ways, depending on their age and level of functioning. Some children will need planners that use photographs others can manage with graphical representations. (for a selection of picture cards for use in planners at school and at home visit www.ASDinfoWales.co.uk/picture-cards.

As children get older and are able to read, they may prefer written planners. For those children and young people who enjoy using technology there are apps available on the iPad, tablets and mobile phones that can be used. There is a free ASD planner app available for this purpose, please visit www.ASDinfoWales.co.uk/ASDplanner for details.

Changes to the school routine can cause a child with an ASD to become very anxious. Often this is purely because the child feels more comfortable with predictability, at times the anxiety can be caused by the child not recognising that key events will still happen. For example, if story time usually takes place before home time, and ‘story time’ is substituted for another activity, the child may not be able to predict that home time will still follow the substituted activity. This may lead to the child worrying that they will not being going home, or that there is an extra period in school.

**Some common changes in schools that can cause children with ASD distress are:**

- christmas concert/special assembly practices
- substitute teachers
- additional assemblies
- term time – school holiday changes
- transitions to new schools/classes
- school trips
- indoor play times caused by weather conditions
- parties, discos and school fayres

Again, it will help if you prepare the child by providing a visual plan ahead of the anticipated changes, which the child can access regularly. Being able to see clearly what’s going to happen can make a child with an ASD less anxious and confused.

You can also prepare a child with ASD for changes by providing countdowns to the change. Depending on the child, this may involve counting down from 5 minutes ahead of a change in activity or using a calendar count down over a week to prepare for a bigger change in routine such as school holidays.

It is not only changes to the daily/weekly routine that can cause anxiety for children with ASD, changes to the environment can also cause difficulties. These may include:

- changes to classroom displays
- rearranging of furniture
- peers being away from school
- new pupil joining the class
• visitors to the class room
• changes in other’s appearances such as haircuts, glasses or growing a beard
• non uniform or dressing up days

Again, the most useful way of avoiding distress around these times of environmental change is to prepare the child in advance, and explain the impact of the change on the child.

For many, the structure of the school day is useful, and parent/carers may report more troublesome behaviours being displayed at home than are seen in school.

**Providing Additional Structure**

Because of the difficulties that children with an ASD have around planning and predicting, as well as their preference for routines they will need additional structure within activities.

Some children with an ASD struggle to breakdown an overarching task into its components, especially when ‘grouped task’ terms are used. For example, a child might not be able to break down ‘get changed for PE’ into the sub tasks of ‘collect your PE kit, remove your shoes, remove your trouser, put on your shorts’ etc. *If this is the case, break down the task into its components and communicate to them using lists or picture planners to help the child to work out what is expected of them. This also applies to learning tasks.*

Children with an ASD will also need to be provided with additional structure for less formal learning activities in the class room. This particularly applies to research activities such as topic work, group work, free play time, ‘pretend play’, team games and creative writing activities.

When asking a child to choose an activity or option they may find it difficult to make a free choice. *Provide additional structure by offering 2 or 3 alternatives for the child to select from.*
**Imaginative Play and Creative Activities**

Issues with social imagination mean that activities that rely on social imagination or require the child to ‘pretend’ can be very difficult, and sometimes impossible for a child with ASD.

The most obvious activity that is affected is play. Some children never seem interested in what a toy is or what it represents. Some children seem to act out stories or take on particular characters, but the story turns out to be an imitation of a video or book. Most children with an ASD struggle to understand and engage in imaginative play. Games involving role play and sometimes symbolic play (using toy cars, dolls) can be affected. This doesn’t mean that children with autistic spectrum disorders don’t have any imagination, it just means they tend to have less ability in this area. This deficit is of particular significance in the early years, when the focus on learning through play puts children with an ASD at a disadvantage. Choose activities that have rules or structure and do not rely on ‘pretending’ to help the child to engage and learn.

Difficulties with engaging in imaginative play can also have an impact on play times and the child’s ability to develop friendships and engage with peers. During play, encourage other children to play structured games with rules so that the child with an ASD can join in. e.g. tag, hopscotch, races.

In the same way that children with an ASD may struggle to recognise that a toy is a ‘symbolic representation’ of an object (i.e. that a doll is a symbolic representation of a baby), they may also struggle to recognise the visual representations that are the aim of many creative activities. This can have an impact in many activities such as drawing, modelling or building. The child may either struggle to do this, and end up with a creation that is a representation of small parts rather than the whole object, or not be able to create with perspective (e.g. eyes are drawn outside of the body) or may not want to engage in the activity at all. It can help to **breakdown the activity into smaller, more structured steps** (e.g. make a ball shape for the head). For some who have severe difficulties in this area, even breaking the activity down into smaller steps may not help, as they will not see the significance of the finished item and in the case it may be better to provide an alternative activity.

**Empathy and Predicting Others**

Children with ASD have difficulties with predicting how others feel, or how they will react. This is a core impairment of the autism spectrum, and allowances should always be made.

The child with ASD may not recognise when their behaviour has upset someone and have no concept that somebody else feels differently to them. Many will have difficulties in naming or explaining their own feelings and emotions. In fact discussions around this can be very distressing for the child who genuinely does not understand the concept of others emotions. **With this in mind, you should avoid problem solving activities that involve questioning the child with ASD about how they think they have made others feel, as this can lead to much anxiety and distress.**

This lack of empathy, inability to ‘read between the lines’ or to recognise social differences may result in the child not able to respect social hierarchy, and may argue with a teacher as if he is a peer. The child may also appear ‘blunt’ or ‘rude’ by saying what he is thinking, without recognising that this may offend. **It is important to recognise that these social errors are not made to**
deliberately offend. This can also cause problems with friendships and peer relationships. *Children with an ASD can learn to modify this behaviour, but will need to be taught to do so. Use rules rather than complex discussions about others feelings to help with this.*

Children with an ASD may have difficulty in creating imaginary scenarios or in making sense of hypothetical discussions. In relation to their school work, they may not be able to predict how a character in a book is feeling, or what the character may do next. This is why children with an ASD often have a reading scores that are higher than their comprehension scores. *The child with an ASD will need high levels of support in these areas, but remember to be realistic in what you expect.*

Writing in character, or from another’s perspective can be particularly difficult and puts children with an ASD at a disadvantage in tests and exams or understanding how their behaviour impacts on others.

**Sensory Issues in Autism**

**The seven senses are sight, hearing, touch, smell, taste, balance (vestibular) and body awareness (proprioception). In individuals with autism, the brain sometimes processes sensory information differently to those without ASD. Everybody is different and therefore individuals will experience things differently and respond in different ways.**

Sometimes these different sensory perceptions can cause pain, distress, anxiety, fear or confusion and result in ‘challenging’ behaviour as the individual tries to block out what is causing the problem.

In some cases the senses may work too well and the brain receives too much information (hypersensitive) or not well enough where the brain doesn’t get enough information (hyposensitive). When the senses are hyper you may find that individuals with ASD rock, flap, spin, hit their ears, etc as a way of trying to block out the overload that they can’t tolerate and to help them to calm down or relieve the pain. In cases where the senses are hypo individuals may make or seek out noises, bang objects, etc as a way of causing more sensations and getting the senses to work better.

<table>
<thead>
<tr>
<th><strong>Hypersensitive</strong></th>
<th><strong>Hyposensitive</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Dislikes dark and bright lights</td>
<td>Moves fingers or objects in front of the eyes</td>
</tr>
<tr>
<td>Looks at minute particles, picks up smallest pieces of dust</td>
<td>Fascinated with reflections, brightly coloured objects</td>
</tr>
<tr>
<td>Covers ears</td>
<td>Makes loud rhythmic noises</td>
</tr>
<tr>
<td>Dislikes having their hair cut</td>
<td>Likes vibration</td>
</tr>
<tr>
<td>Resists touch</td>
<td>Likes pressure, tight clothes</td>
</tr>
<tr>
<td>Avoids people</td>
<td>Enjoys rough and tumble play</td>
</tr>
<tr>
<td>Runs from smells</td>
<td>Smells self, people and objects</td>
</tr>
<tr>
<td>Moves away from people</td>
<td>Seeks strong odours</td>
</tr>
<tr>
<td>Craves certain foods</td>
<td>Mouths and licks objects</td>
</tr>
<tr>
<td>Uses tip of tongue for tasting</td>
<td>Eats anything</td>
</tr>
<tr>
<td>Places body in strange positions</td>
<td>Rocks back and forth</td>
</tr>
<tr>
<td>Turns whole body to look at something</td>
<td>Lack of awareness of body position in space</td>
</tr>
<tr>
<td>Difficulty walking on uneven surfaces</td>
<td>Spins, runs round and round</td>
</tr>
<tr>
<td>Becomes anxious or distressed when feet leave the ground</td>
<td>Bumps into objects and people</td>
</tr>
</tbody>
</table>

*Taken from ‘Sensory Issues in Autism’ by the Autism and Practice Group East Sussex County Council*
**Examples of sensory issues that a child may experience include:**

Some children with ASD will demonstrate extreme reactions in relation to sensory stimuli. They may become distressed around bright lights, loud noises or strong smells. They may be ‘fussy’ eaters, only eating certain foods, or foods of a certain colour or texture.

In some cases it is easy to notice the sensory stimuli that is distressing a child. In most cases it is not, and the child may be becoming agitated by things you don’t even notice such as a flickering light, noise from a radiator or the temperature of the room.

*If the child appears distressed, you should always assess sensory stimuli in the environment and address issues that maybe the cause.*

The child with sensory difficulties may experience sensory overload as the brain tries to process everything at once without filtering out unimportant things like background noise, wallpaper, people moving about, the feel of clothes on their skin, etc. This can make it difficult for children to focus on what someone is saying when in a busy area. When there is too much information to be processed at the same time it may be difficult for children with ASD to break a whole picture down into meaningful units. For example, when talking to someone we will see their whole face but some children with ASD may see eyes, nose, mouth, etc as individual things which all need to be processed separately. This makes it more complicated to process information and can lead to the child focussing on only one aspect or not having enough memory to process everything.

*It is good practice to reduce the sensory stimuli in the school environment in order to reduce distress and increase the child’s ability to focus and concentrate. This includes reviewing and adapting classroom displays, storage, lighting, wall colours, seating arrangements as well as in communal areas of the school such as the corridors or school hall.*

*Consider offering ear defenders if noise is an issue, allow the child to face the wall or in a less busy area of the class. If possible dim lights, and ensure that lights are not flickering. If the noise and movement of playtimes are an issue, offer a quiet alternative.*

*Allow the child to leave if it gets too much, this will prevent the child developing ‘challenging behaviours’ in order to gain permission to leave the class.*

*It is important to remember that when people are tired, unwell or stressed their tolerance levels are affected and this is also true of a child with ASD’s ability to tolerate sensory stimuli.*

**Repetitive Behaviours**

The term repetitive behaviour is used to describe specific types of unusual or seemingly odd behaviours that are often seen in children with autism.

Repetitive behaviour is sometimes referred to as self-stimulating behaviour or stimming. This behaviour may involve any or all of the senses in various degrees in different individuals.

**Several examples are listed below:**

- visual — staring at lights, blinking, gazing at fingers, lining up objects
- auditory — tapping fingers, snapping fingers, grunting, humming
• smell — smelling objects, sniffing people
• taste — licking objects, placing objects in mouth
• tactile — scratching, clapping, feeling objects, nail biting, hair twisting, toe-walking
• vestibular — rocking, spinning, jumping, pacing
• proprioception — teeth grinding, pacing, jumping

Some repetitive behaviours are very obvious while others are more subtle and hard to detect such as blinking or eye rolling, tapping fingers and mild hair twisting.

We all engage in some of these behaviours occasionally, especially when we are stressed. However, a child may engage in these activities excessively to the point that they interfere with learning or daily living activities.

It’s not completely clear why repetitive behaviour almost always goes with ASD, but it is the case that children with ASD experience a lot of chaos in their world and repetitive behaviour is a way of bringing predictability to an otherwise unpredictable and frightening world.

**Some of the reasons children adopt repetitive behaviour are outlined below:**
• it is self regulation, which helps the child become calm and overcome situations of stress or upset
• it demonstrates excitement
• it provides the child with an escape route when they are overworked or wound up
• it makes the child happy. Some children find the behaviour pleasurable even if causing injury to themselves
• it provokes a reaction from others, which reinforces the behaviour
• it is a way of avoiding a task or activity

Some children learn to monitor their behaviours so they can engage in them in ‘safe’ environments (at home rather than at school or out in the community).
No matter what repetitive behaviour the child engages in, you need to understand this is something that they need to do in order to reduce anxiety. *Don’t reprimand the child for repetitive behaviours, instead note what may be causing the child anxiety or distress at the time they occur and seek to rectify this.*

*If repetitive behaviours are causing problems, or are likely to cause harm, seek advice from an occupational therapist.*

**Special Interests**

All children have favourite things but most children can be distracted or engaged in another activity without too much fuss. Also most children like interaction with other people in order to get the most enjoyment from their activities.

However, some children with ASD seem to develop interests in an unusual, over focussed way. These interests are usually referred to as ‘special interests’ and to a child with ASD they might be the most important thing in their life. Children with ASD normally develop interests that do not involve anyone else, where they can retreat into their own world for hours and hours, whereas other children might want to talk non stop about their interest, which in turn makes it difficult for them to develop friendships.

**These interests are different to repetitive behaviours but some of the reasons for the special interest can overlap, such as:**

- reducing anxiety
- maintaining a sense of calm
- gives them pleasure
- a way of avoiding another task or activity

To others some of the interests of children with ASD may appear pointless or boring but the child will be experiencing something completely unique to them. For some children their ability to focus on detail will mean that they are experiencing something completely beyond your imagination.

**Special interests can be anything from weird to wonderful. Some of the more common examples of special interests in children might include:**

- lining up toys eg cars, trains etc
- drawing
- counting
- collecting
- fact based interests such as dinosaurs
- gaming characters
- types of cars or trains

As with repetitive behaviours children can become engaged in their special interest if they are feeling anxious or scared, but the reality is that they have an uncontrollable desire to involve themselves in these things because their interest is real and their enjoyment and satisfaction is real.
Children with an ASD will normally have one special interest at a time, but they often change as the child develops and experiences more things.

Special interests can interfere with learning or daily living activities but they can also be used to motivate and engage with a child with an ASD. If the interest is interfering with learning or other activities, try offering specific times for them to spend on their special interests. You could look for ways to expand the child’s special interest or use the interest as a motivational tool by including it in class work or using as a reward.

Be patient and tolerant, some of the most famous autistic people have developed successful careers from their special interest.

Aside from the interest itself, many children develop a wider set of skills as a result of pursuing that interest, these can often be utilised to encourage learning and to build the child’s self-esteem.

Some skills that may have been developed from special interests are:
• cataloguing
• research skills
• use of internet
• attention to detail
• artistic skills
• recognition of similarities
• increased concentration

**Autism and Other Disorders**

Some children have other difficulties which are not directly related to their ASD, such as dyspraxia, dyslexia or attention deficit hyperactivity disorder (ADHD). It’s important to seek an assessment of any other conditions, as this affects the sort of support that will best meet your child’s needs.

Sometimes individuals with an ASD have another disorder as well. Some conditions appear to affect individuals with ASD more frequently, although it is sometimes difficult for professionals to ascertain whether symptoms are part of the ASD or another condition. Some of these disorders are:
• dyspraxia
• dyslexia
• depression
• anxiety
• epilepsy
• obsessive compulsive disorder (OCD)
• attention deficit hyperactivity disorder (ADHD)
• tourette’s syndrome

It is important to recognise that individuals with ASD are not excluded from other mental health and physiological conditions.
Adapting Day to Day Practice
A Child Focused Approach

A child with an ASD deserves the same rights to grow, learn, engage and reach their potential as any other child. Each child will have their own unique set of strengths and difficulties, and has potential to play an active part in the school community. The way in which a child with ASD presents and the difficulties they experience varies from one child to another. However, every child with an ASD will need adjustments to be made in order to maximize their learning potential and reduce distress. Because of the range of difficulties that pupils with an ASD experience, more structure within teaching practice and class activities needs to be added in order to differentiate the work for them.

As discussed earlier, it is vital that you adapt your communication style to promote understanding and decrease anxiety and confusion. It is essential that each child is considered as an individual, and that teaching practice and the school environment are tailored to meet their individual needs.
Many of the suggestions outlined in this guide are no or low cost, and schools have a duty to make these reasonable adjustments in line with The Equality Act.

Key to delivering the best outcomes for children with ASD is working with partners, who can provide information, expertise and advice to help school to support the child. These partners include professionals from health, social care and the voluntary sector along with parents, carers and other family members.

**The School Environment**

The potential impact of the environment on sensory distress needs be considered across the school. Entrance areas, cloakrooms and corridors that are chaotic can make a child with ASD agitated as soon as they enter school. Schools should seek to decrease sensory stimuli in these areas, by using minimal, neutral wall displays and keeping areas clean and tidy. The movement of other pupils at busy times can also be distressing and this can be minimized by allowing the child with ASD to utilize another entrance or to move through the school before or after the other pupils. School staff should be instructed to use a calm, consistent tone of voice when addressing pupils in communal areas, and to avoid shouting.

The class room environment is often a source of distraction or distress for pupils with an ASD. Bright lights, buzzing noises from classroom equipment, visually stimulating displays or the movements of a large number of children through an area can be very difficult for a child with an ASD.

By adapting the classroom, or making allowances for the child with an ASD, the child will feel less anxious, be less likely to become overstimulated and will be more likely to behave appropriately and concentrate more in class.

Developing a sensory neutral environment will help greatly. Minimize class displays and where unavoidable choose neutral or pastel shades rather than bold colours. Place items on the wall in an orderly manner, lining them up vertically or horizontally rather than placing them in an ad hoc manner. Do not use displays that may move, such as windmills. Avoid hanging items from the ceiling. Avoid placing displays near to the whiteboard, as these can often be distracting for a child with an ASD.

Fluorescent lighting can be a problem for many children with an ASD, especially if noisy or flickering. Reduce classroom lighting, and rely on natural light where possible. Ensure flickering or buzzing lights are fixed as soon as possible.

Any background noise is very distracting for a pupil with an ASD. This may be chatter from other pupils or noise from equipment or other areas that you hardly notice yourself. *Ear defenders can be very useful when this is the case, as they will decrease the background noise whilst enabling the pupil to focus on your interactions.*

Of course, movement, noise or just the presence of other children, can often be enough to effect the pupil with ASD’s concentration or to increase their anxiety. *At times where the pupil is expected to undertake work independently, it can be really useful to place a desk against a wall.* By doing this, the pupil will be less likely to be impacted by the other children in the class, and more able to focus on concentrating on the task in hand.
Some children may need to take regular breaks from the class in order to cope with sensory stimuli. By allowing the pupil to take a break in a quieter area when necessary you will enable them to reduce their anxiety and stress to be better able to cope with periods in the classroom. Children who are not provided this opportunity, will sometimes display challenging behaviours (such as shouting) in order to access this opportunity (by being asked to leave class for behaving inappropriately). By offering the opportunity, the child will learn more appropriate ways of seeking the quiet space that they require to calm and relax.

For those who find it difficult to recognize when things are getting too much, it may be useful to structure regular quiet times throughout the day. For those who are more able to communicate their needs, a ‘time out pass’ can be very useful. The pupil should be encouraged to use the pass regularly, and will learn to use this appropriate behaviour rather than inappropriate behaviours to be able to take a break from the class room.

Carpet time can be difficult for children with an ASD, hard flooring and being so close to other pupils can cause sensory issues. Allow the child with ASD to sit on a chair, away from the group.

The School Day

Children with an ASD need support to predict and understand the structure of the school day, and this is even more essential when there are changes to the usual day including school trips, concert practices or special assemblies. The most useful way of providing this additional structure is by using picture timetables. Timetables should be laid out in a vertical line, with
the next activity always appearing at the top. When this activity concludes the picture should be removed from the planner so that the child can clearly see what activity is next and what follows after.

Changes, noise and distractions from visitors can also be unpleasant. Try to avoid unnecessary visitors, prepare the child in advance and be sure to explain the purpose of the visit.

For more information on planning and managing changes please refer to the section in chapter 2.

Children with an ASD will need to be prepared for substitute teachers, timetable changes, school trips or any other irregular activity in advance.

Picture cards for creating timetables can be accessed at www.ASDinfoWales.co.uk/picture-cards. For older children, or those that enjoy technology, the timetable can be downloaded to a smartphone or tablet, or instead of a picture timetable a planner app. can be used. For more information on the free ASDinfoWales planner app visit: www.ASDinfoWales.co.uk/ASDplanner.

Whole School Activities

Many children will with an ASD find certain points of the school day difficult. Walking into a busy hall, lunch breaks and play times can be extremely anxiety provoking. Allowances and adaptations will need to be made in order to decrease stress.

Assembly time can be difficult for children with an ASD. Different children and adults, movement of large groups, not understanding expectations, social cues as well as sensory stimuli from the hall can quickly lead to distress. For children who find assemblies difficult a graded approach should be taken. The child should not be expected to engage in the same way as peers, nor be punished for finding it difficult to manage. If noise is an issue, ear defenders should be provided. If particular sections are difficult (such as singing) the child should be encouraged to attend for the sections they find less distressing. The child should be allowed to enter the hall before or after the other pupils, so they are not caught up in the bustle of children arriving. The child could be allowed to take a comforter in and sit by the exit so that they can leave if it gets too much.

For the similar reasons, lunch time can also be distressing. The child should be allowed to attend for lunch before the other pupils arrive, or after they started to leave – when it is quieter. Alternative arrangements could be made, such as allowing the child to have lunch in a quiet area. If the child has sensory issues around food, special dietary arrangements will need to be made with school catering.

Children with ASD can be supported to attend school trips, by planning ahead. Using a planner to countdown, providing pictures and explaining what will happen can help. It is useful to take the child with an ASD’s need into consideration before planning a trip, and choosing an activity that is more suitable where possible.

Preparation for school concerts, especially around Christmas can mean a distressing period for the child with an ASD. Changes to the usual routine can cause anxiety and confusion.
By using timetables or planners which incorporate concert practice along with activities that will occur before and after, the child can be supported to cope with the change. It is important that all staff are aware of the issue so that practices are not moved or instigated at short notice. Due to sensory problems, the noise and chaos of the rehearsals can lead to the child feeling overwhelmed. Providing ear defenders to cut out the noise might help.

The child with ASD should be encouraged, but not forced, to take part. They could be allocated a smaller role that they only have to attend part of the practice time. For children who do not want to perform in the concert, alternative duties could be allocated such as stage hand, or making tickets so that the child still feels a part of the activity.

As discussed earlier, children with an ASD may also need additional support at playtimes. Difficulties with social interaction and imaginative play may mean that the child will struggle during play times. By encouraging peers to play games that don’t require imagination, the opportunities for the child to engage are increased. You could also try introducing a ‘buddy’ system. Pairing up with another child may help a child with an ASD to feel valued and develop social skills.

Explaining social rules and expectations clearly to a child with an ASD can help them learn the appropriate skills for the playground. Children with an ASD may not understand concepts such as taking turns, sharing, appropriate conversation subjects or personal space. Be patient and be prepared to repeat your explanations.

**Setting Tasks and Managing Unstructured Activities**

Many children with an ASD will struggle to undertake multiple tasks at the same time. This may include taking notes whilst listening, mimicking actions whilst singing or listening to instructions whilst engaged in another activity. *The way in which class tasks are set will need to be adapted, taking this into account.*
Even with single tasks, many pupils with an ASD will need additional structured support—especially if the tasks are lengthy or complex. This can be provided in the form of additional support from an adult, or by providing visual cues or lists of instructions that the pupil can refer back to.

Complex tasks will almost certainly need to be supported by additional structure. Break the task down into smaller components. Start small and build up, set smaller tasks that can be added to over time. Support task setting with visual cues.

Especially for children with an ASD, not understanding the purpose of an activity can lead to anxiety or cause lack of motivation. Ensure the purpose of the activity is conveyed to the child, especially when it forms part of a larger programme of work. Repeating the same task over again is often not useful for a child with ASD.

When setting tasks or activity, remember to adapt your communication. Be clear and specific, e.g. rather than set the task of ‘having a kick about’ with your partner, say ‘kick the ball back and forth to friend 6 times’.

In addition, pupils with an ASD often find it difficult to predict end points and to understand what is expected of them unless these are clearly explained. When end points or expectations are not clearly set, the child may become confused or anxious and this may lead to refusal to undertake work or anxious behaviours including aggression. Be specific in stating what is expected of them, setting clear, measurable end points. Instead of using time (e.g. “use the last 15 minutes to practice some more problems”) or product (e.g. “write about your weekend”) as an indication of completion; use specific expectations such as “complete the answers to 3 more problems”, or “write 12 more sentences”. Be realistic and use estimations based on what the child can achieve, many children with an ASD will feel the need to compete the work set, setting too much can cause difficulties. Similarly, unless you are specific, a child with an ASD may not understand what the criteria for success around behaviour or school work. Non specifics lead to the child getting it wrong and then feeling as if they have failed. This decreases self-esteem and therefore increases anxiety. Be clear and set measurable objective success criteria such as “return the items you have used during the activity to where they are kept” rather than “tidy your table”.

Introducing structured activities during times when other children are offered free time can help a child with an ASD.

Children with an ASD can have difficulty in choosing activities independently; offering a choice between 2 or 3 activities can help.

Within the foundation phase frequent task changes with no additional structure can be difficult for children with an ASD. Children can be supported and prepared for changes with picture cards. Providing increased structure within activity or setting smaller tasks is useful. The number and range of activities may need to be decreased for the child to be able to manage.

**Learning Objectives, Evaluation and Feedback**

Many children with ASD lack motivation to learn when they are unclear about the point or purpose of the activity. Therefore setting learning objectives is very useful.
However, you should ensure that learning objectives are specific, concise and that where possible they utilize familiar language. Learning objectives should reflect the differentiated activities that have been set for children with an ASD. They should also be accompanied by clear success criteria which clearly set out what is expected of the child during the activity. Unless specific, the child will inevitably get it wrong, this can decrease self-esteem and therefore increase anxiety.

Self evaluation can be very difficult for children with an ASD, this is often due to the difficulties they have with social imagination and creativity. For a child with ASD, it may seem futile to
evaluate a piece of work themselves (if they knew what they could have done better, they would have done it in the first place). To help the child with self evaluation, it is useful to provide additional structure in the form of a checklist. This could be developed with the child or class as a whole.

Rigidity of though can also make peer evaluation difficult. Often children with an ASD will use repeated phrases (such as always saying handwriting could be improved) to conceal their difficulties with this. Again additional structure in the form of checklists can be useful in helping the child with ASD to identify areas that would benefit from improvement. Following this, the child can be given additional teacher support to suggest alternatives.

Teacher feedback to children with an ASD needs to be specific to the learning objective. Suggestions for improvement should be structured to ensure that the child understands the difference between strengths, difficulties and goals and the specific areas of work the comments relate to. General statements such as ‘good work’ or ‘use a variety of sentences’ are not useful for children with an ASD.

**Empathic and Creative Writing**

It is expected that children use their social and creative imagination as a method of learning both inside and outside of the classroom. For younger children this may be the emphasis on learning through imaginative play within the foundation phase and for older children using social imagination to predict the intentions of characters in books or to empathise with the character’s situation. They are expected to empathise with historical figures and consider how they would feel or react in varying situations.

Children with an ASD have an impaired social imagination. This means that the majority will be unable or limited in their ability to use their imagination and to empathise with others, situations or characters.

They will need to be provided with additional structure to complete activities such as comprehension, empathic or creative writing.

There are a number of approaches that can be helpful.

*For comprehension activities, the child could be supported to elicit a list of key points from the text and then base answers on these. As children with ASD struggle to ‘read between the lines’, additional information such as describing characters feelings could be provided as a starting point, and the amount of information provided as the child develops skills. Figurative language will need to be explained, in order for the child to fully understand the text.*

*If being asked to pretend to be somebody else writing the text (such as an evacuee) the child could be provided with a list of key facts and encouraged to write these in the third person. They could then be supported to change to the first person in another session, continuing to build on their work.*

*Creative writing can be supported by increasing structure also. A familiar story could be used as a basis, and the child supported to rewrite in stages, changing characters, situations and*
outcomes as they progress. If imagining characters and their actions is the issue, a story could be ‘acted out’ using toy characters and then the child could be supported to write up the story.

Because of the issues with understanding and use of language, many will struggle with personification, simile and metaphor. Providing a list of a few core phrases, along with explanations can help the child introduce these into their work.

It is important to be realistic, this is a core impairment of the autism spectrum, and whilst support can be provided – social imagination is not a skill that can be learned.

**Group Work, Team Games and Group Activities**

Group work and group activities can be particularly difficult for children with an ASD. In addition to finding it difficult understand the task as a whole, they may struggle to grasp the purpose or understand what is expected of them within the group and may struggle to understand social rules such as turn-taking, reciprocal conversation and waiting. Additional support and training around ‘social rules’ can be provided to help the child to learn these skills.

In order to support the pupil with an ASD with the task within a group activity, additional structure will need to be provided e.g instead of issuing guidance such as ‘work in your groups to find out facts about mini beasts’, provide an additional structure which may state ‘suggest insects and listen to others suggestions, write them down on a scrap paper, choose 2 each to research……

Many children will not understand the purpose of team games, and frequently lack the predictive skills to be able to adapt their actions within a team. Provide alternative individual activities or team games in which the child is reliant mainly on self e.g. rounders. Group or whole class reward systems (or consequences) are not suitable for a child with an ASD. They can cause confusion, and they often lack the social motivation needed for such approaches to work. Use individual approaches to promote and manage behaviour.

**Tests and Exams**

Tests can cause much anxiety for a child with ASD, for many reasons. For many easy read or large print versions of test papers can be helpful for children with an ASD. These often have larger text and amended content which can make them easier to access.

As an irregular event, the fact that there is a change in routine can cause problems in itself. The child can be supported through planners to help cope with this.

Many children fear failure in tests because they are unclear of what is expected of them or the impact of not doing well. By explaining the purpose of tests and implications of the test results, the child will experience less worry about them.

Many children with an ASD will feel the need to complete the activity so running of time during a test can be an issue. Supporting the child to work out how much time to spend on each section of the test in advance may help.
Being asked to write from another’s perspective, interpret how characters are feeling or undertaking comprehension activities will be difficult. By practicing similar questions in advance, the child may be able to develop skills in attempting such activities. However, it is important to be realistic - this is a core feature of the autism spectrum, and unfortunately puts children with ASD at a disadvantage in many tests.

**Home to School Transition**

Many children with ASD, manage differently at home and school. For some the structure of the school day helps them to cope better than the unstructured time at home. For others being able to access special interests and quieter areas more easily means that they manage better at home than at school.

Children with an ASD often find the transition between school and home difficult. This is often escalated on return from school holidays or following weekends or inset days. A timetable or planner used at home and school can help to alleviate anxiety.

Homework can sometimes confuse the child, as school and home are blurred. It may help to allow time in school to complete or if this causes big problems do not issue homework to the child. Be flexible and allow for the child’s difficulties.

**Working with Parents and Carers**

Working in partnership with parents and carers is an essential component of a child centred approach. Children with ASD work better with consistency and utilizing the same approaches in school and at home is very beneficial.
Issues from school can spill over into home life and vice versa so it is vital to ensure there is open communication between the two. A home - school diary can be used to share relevant information on a daily basis.

Parents and carers of children with ASD experience higher levels of stress. Caring for a child with ASD can limit activities, impact on sleep and decrease parental self-esteem. Many parents and carers are not provided with training around ASD. A guide for parents and carers can be accessed at www.ASDinfoWales.co.uk/resource/Autism-English-download.pdf.

Many parents and carers find liaising with school difficult. They sometimes feel as if staff are judging them, especially when the child seems to cope better at school than at home. Sometimes parents and carers feel that schools are not being honest, especially when only positive aspects of the child’s work and behaviours are conveyed to them in school reports, at parents evening and in school diaries.

*Developing a transparent relationship with parents and carers can be useful in earning their trust and building rapport. Providing accurate feedback is good starting point for this.*
Transition to Secondary School

Transition from school to school can be both exciting and daunting for any pupil. A change in environment, the geography of the school and volume of people each bring their own challenges. This can sometimes lead to a period of distress as the pupil endeavours to cope, which can affect attendance levels. To support children with an autistic spectrum disorder effective and early transition planning is essential to help them realise their potential and achieve individual goals.

For any pupil going to a new school the transition can be a daunting experience. This is especially the case when the pupil is in the small, nurturing environment of the primary school, contemplating a move to secondary school. Undoubtedly, the consequences of a poor transition will not only impact upon the pupil’s school career but also the perceptions of others towards that pupil. Indeed, later behavioural difficulties caused by a poor transition can include detachment from the new environment.

There are many reasons why this transition may prove a challenge to the pupil with an autistic spectrum disorder. Here are just a few:

- geography of the School – Finding your way around, coping with the environment, dealing with large, noisy crowds
- anonymity – In primary school settings most children grow up together and understand and make allowances for certain behaviours, this may not necessarily be the case in secondary school
- travelling to school by bus – allowing time to get to the bus, where to wait, times of the bus, what happens if the bus is late
- following a timetable – this is one of the most complicated parts of school life to get used to. In Primary School the child is taught by one teacher in the same classroom. They may be dependent on 1:1 support to help them with classroom activities
- added responsibility – organising their own equipment, books, writing down homework, finding the way to lessons on time
- procedures for break times and lunch time and how to cope – where to play, what to play, where to meet friends, which way to the next class
- social problems – much larger number of pupils, being the youngest at the new school, opportunities to develop social interaction

With these things in mind, transition needs to be considered a PROCESS rather than an EVENT, which certainly needs to begin when a pupil is in Year 5 if not sooner. If you are beginning to talk about a pupil’s transition between primary and secondary towards the end of Year 6, then it is already too late. An effective transition is about working in a person-centred way, and in partnership with the pupil, the family, key professionals and both schools involved.
Understanding the Cause of Challenging Behaviours

Everyone displays ‘challenging behaviours’ at some time because it is a way of communicating what they are thinking or feeling. Those with ASD may seem to display challenging behaviour more frequently than other children but this is because they see the world differently.

They do not always understand social rules, may have difficulty expressing themselves and may struggle to cope with changes in routine and understanding how other people may be feeling, all of which can lead to very stressful situations for them. This, together with any sensory issues they may have, can be overwhelming for them to deal with and their only way to cope and to let you know that they are struggling is through inappropriate or ‘challenging’ behaviour (sometimes described as tantrums, rage and meltdowns).

Anxiety is a common cause of challenging behaviours amongst children with an ASD. High levels of anxiety are common in children with ASD.

Children with an ASD are typically unable to communicate their feelings of anxiety, and may present with behaviours that you do not typically associate with feeling worried or anxious.

These might include:
- tantrums and aggressive behaviour
- becoming withdrawn and resisting any interaction with others
- complaining of pain or illness
- engaging in repetitive behaviours
- hurting self

Difficulties in understanding language, predicting others, sensory issues alongside other issues can all cause anxiety, and this is why anxiety common amongst children with an ASD.

We all experience anxiety, it is part of our everyday life and we all react to stressful situations in a way which is personal to us, but the symptoms of anxiety are often similar. Think of a time when you have felt anxious, you may have experienced feelings such as being scared, panic, increased heart rate, sweating, sickness, not knowing where to turn or what to do next, loss of confidence etc. These are unpleasant feelings and can impact our mood, energy levels and behaviour, so imagine what it must be like to feel anxious every day of your life but not understand why?

Common situations that trigger anxiety are:
- meeting strangers
- being given too many choices
- not being able to communicate their needs
- changes in routine
- new activities or places
• experiencing unpleasant sensations, eg dog barking, flashing lights, crowded and noisy environments, overpowering smells
• transition from one activity to another — even small transitions
• trauma - remembering unpleasant events eg having a haircut, seeing the dentist or doctor, which when being asked to repeat makes them anxious

Sometimes, children with an ASD can be anxious about more than one thing at a time.

Before attempting to address challenging behaviours, it is essential that you identify the causes and/or reinforcing factors. Without doing this, your interventions may lead to increased distress and a likely worsening of behaviours.

Following this you may need consider if there is also often a function or purpose to the behaviour, and anything that may be reinforcing this.

Step 1 - Track and Analyse Behaviours over a Period of 1 – 2 Weeks

To do this, you will need to record the ABC of the challenging behaviour using a chart, as follows.

Antecedent (what happens before) — This is often the trigger for the behaviour. This can sometimes be clear-cut such as somebody saying ‘no’ to a request but in individuals with ASD it can be more difficult to identify because the cause may be related to sensory issues such as loud noises or specific sounds or related to the need for predictable routines. It is therefore important that you record all relevant information including time, environment, what was said etc.

Behaviour — In this section you will need to record details of the behaviour, without judgement or assumptions. Describe the behaviour rather than jumping to conclusions as many individuals with ASD have difficulties in expressing their feelings in an appropriate way. For example, anxiety may present as worry but could also present in repetitive behaviours or aggression.

Consequence (what happens after) — Often the consequence or outcome of the behaviour can provide clues as to what the child is feeling, by showing what the child is trying to achieve. Consequences can often be reinforcing the behaviour. Even if the consequence is negative attention, it is still attention...

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<th>Date and time</th>
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Step 2 – Analyse the antecedent, what could be triggering the behaviour?

It is useful to use the CRISIS acronym to consider the main issues that may be triggering challenging behaviours in a child with ASD.

**Communication** – did the child understand? Has the child misunderstood?

**Routines** – has there been a change in routine? Has the child been supported to know the routine?

**Interaction** – has there been a social misunderstanding? Does the child understand what is expected?

**Sensory Issues** – is there an increase / change in sensory stimuli?

**Imagination** – have impairments in social imagination caused the issue?

**Subjective attribution of behaviour** – are you treating the child as ‘naughty’ and not supporting?

**An example:**

**The specific behaviour:**
Shouting during story time.

**The possible reasons/underlying difficulties:**

**Communication**
I can’t understand the story, is the teacher talking to me? I feel anxious, but I don’t understand these feelings and can’t tell anyone about it.

**Routines**
We don’t usually have story time at this time of day, we usually have maths – I don’t like things changing.

**Interaction**
I don’t understand what you expect from me — why do we have to sit on the carpet? Why is everyone being quiet, are they ignoring me?

**Sensory**
When I sit on the carpet, other children are touching me and I don’t like it. There are lots of facial expressions and fidgeting, I can’t cope with it all.

**Imagination**
I don’t ‘get’ the story. It’s just words to me, I can’t imagine how the characters are feeling or why they are doing what they are doing – it’s all irrelevant to me so I am bored.

Why are we waiting? I thought it was nearly home time, I want to go home now – stop the story so that I can go home.

**Subjective judgement of cause of behaviour**
The teacher thinks I am just being naughty and is punishing me rather than helping me.

By recording ABCs of behaviour in this way, you will be able to identify patterns which will help you to explore triggers and reinforcers.

In the above example, there are clear triggers for the behaviour relating to the child’s lack of understanding.
If the child’s behaviour is appropriate even if it is undesirable (for example becoming anxious around a change in routine) you should not try to change the behaviour, but rather change the environment. If sensory issues are the cause of the unwanted behaviour, altering the environment will also be the way to move forward. Where there are clear triggers, that are related to the child’s ASD, you should always put in additional support and alter the environment to prevent the behaviour reoccurring.

**Step 3 – Working on Behaviour Directly**

If the behaviour is not appropriate or desirable you may need to start some work around changing the behaviour.

When implementing a behavioural approach, remember the principle.

- if you reward a behaviour you will see more of it

This works for both positive and negative behaviours, for example if you reward a positive behaviour with a treat, the child will be more likely to repeat the behaviour. However, if you have a child that dislikes school, and then you reward aggression by sending the child home from school, the child will be more likely to repeat the behaviour to obtain ‘the reward’.

Sometimes, the ‘reward’ for a behaviour is the attention you give to it. This includes negative attention such as shouting, statements of disappointment or lengthy attempts at problem solving.

In an individual with ASD the picture can be even more confusing, for example if the individual prefers to spend time alone, using ‘time out’ as a punishment could be rewarding. It is therefore important that you take the individual into consideration when deciding on how to give or remove rewards for a behaviour. When managing an child with ASD’s behaviour, it is important that you adapt your communication as discussed earlier.

When trying to decrease an unwanted behaviour, it is important that you teach a new way of behaving appropriately at the same time. This will prevent other negative behaviours developing. To do this you will need to remove all rewards from the unwanted behaviour and look for ways to reward a behaviour that is wanted.

For example, ignore the individual when they interrupt you talking by asking for something, but respond immediately if they say ‘excuse me’. In this situation the individual will learn that they will only get the response they are seeking by saying ‘excuse me’ first.

Use your ABC chart to help to identify the unwanted behaviour, and ensure you have clarity about this before you start. Many behaviours are grouped together and you need to be sure you are addressing one at a time. For example, if a child is frequently becoming aggressive to leave class, do you want to work on the aggression? Or is leaving the class the main problem?

Be sure to recognise your own thoughts and feelings around the issue, and ensure they are not impacting on your management of the behaviour.
In order to help the learning of new behaviours it is important that your response is clear and consistent, you must respond in the same way each time, and ensure that others are following the same plan too.

When children have complex behaviour issues, it can be difficult to plan your approach alone. It may be worthwhile seeking support from your local advisory team, or other professionals involved.

**Using Reward Programmes**

Reward programmes can be very effective in reinforcing positive behaviours. Implemented as ‘star charts’, ‘points systems’ or even simple money in a jar, reward programmes must follow the same principles. When used incorrectly, reward programmes will have little effect, and may even contribute to a decrease in self-esteem and worsening of behaviour.

Here are some basic rules that must be implemented when using a reward programme.

- to ensure motivation, goals must be clear and achievable
- the reward needs to be interesting to the child, and not be available regularly to them. For example, a child will be unlikely to work hard to earn a trip to a fast food restaurant if the family eat there regularly anyway
- start small, the child needs to achieve the reward before you make the task more difficult.
- don’t address more than 2 behaviours at a time
- for children with an ASD, the ‘social reinforcement’ (statements of pride, congratulations) may not be useful. Instead use a structured reward such as extra play time, trips out or access to favourite activities
- for children with an ASD, ‘group’ reward systems (whole class, or all siblings) are not useful and can cause anxiety. Use individual programmes
- use a visual cue to help understanding, increase self-esteem and keep an accurate record this can be in the form of a star chart, points system recorded in a journal or even making puzzle pieces out of a picture and issuing one each time the target is achieved
- if you lose enthusiasm, so will the child – ensure you visit the reward programme at regular intervals
- plan ahead. The reward needs to be given near to the point at which it is earned
- reward programmes only work on behaviours you want to see ‘more of’, the expected behaviours must always be worded positively (e.g. ‘using a calm voice’ rather than ‘not shouting’)
- the behaviour to be rewarded must be specific and if necessary time limited (e.g. you will earn a star for brushing your teeth for 2 minutes, or behaving calmly for 1 hour; rather than you will earn a star for being good today)
- if the child has completed the target behaviour, the reward should be given – irrelevant to anything else that is going on. (i.e. if you stated that the child would earn a star for brushing their teeth, and they brushed their teeth and then kicked you they must still get the star)
- you must never, ever remove rewards that have been earned. To a child, there is very little point in working to earn rewards if they can be removed on a whim, and by doing this you are actually reinforcing negative behaviours
Reward programmes can be very effective if used in the correct way. Ensuring that you take into account the child’s strengths and difficulties is the key to a successful outcome.

To reiterate, it is essential that you ensure the behaviour is not an appropriate response for that child before implementing behaviour interventions. Most children with an ASD will respond better to preventative interventions.
Further Information

www.ASDinfoWales.co.uk is the National website hosted by the National ASD Development Team within the WLGA in partnership with Public Health Wales and funded by Welsh Government. The website provides information and resources for individuals with ASD and those supporting them.