



**Charity No: 313182** 

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### **Summary**

Asperger Syndrome, or High Functioning Autism, is an Autistic Spectrum Disorder. Children with Asperger Syndrome can have high intelligence and would therefore be considered 'dual or multiple exceptional' (DME)<sup>i</sup>. This fact sheet is for teachers, professionals, parents and carers who would like clear information on how Asperger Syndrome may affect children with high learning potential (HLP). This fact sheet provides information on the characteristic traits that high learning potential children with Asperger Syndrome share, problems which may arise at home or at school and useful strategies and ideas to help deal with those issues.

#### Introduction

Asperger Syndrome (AS) is a form of Autistic Spectrum Disorder (ASD). People with ASD have: ii

- Impairments in social interaction
- Difficulties with social communication
- Restricted interests
- Rigid and repetitive behaviours

If the behaviours listed above meet the criteria defined in the International Statistical Classification of Diseases and Related Health Problems (ICD-10) and the Diagnostic and Statistical Manual of Mental Disorders DSM-IV Fourth Edition (DSM-IV) and have a significant impact on function, a diagnosis of ASD can be given.<sup>iii</sup>

The term 'spectrum' is used to describe the varying intensity of symptoms ranging from mild to severely autistic. There are three main types of ASD:

- 1. Autism (sometimes known as 'classic autism' or autistic disorder)
- 2. Asperger Syndrome, or High Functioning Autism
- 3. Pervasive Developmental Disorder- Not Otherwise Specified (PDD-NOS, 'atypical' autism)

Children with autistic disorder usually have significant problems with language, social interaction and behaviour. Many children with autistic disorder will also have learning difficulties and below-average intelligence. In comparison, children with Asperger Syndrome have milder symptoms that affect social interaction and behaviour whilst their language development is usually unaffected and they usually have above-average intelligence.

The exact cause of Asperger Syndrome has not yet been identified; however both genetic and environmental factors are thought to affect the changes in brain development that result in Asperger Syndrome being present in certain people. V

### **How Many Children are Diagnosed with Asperger Syndrome?**

Autism was once believed to be an uncommon disorder; however recent studies have reported increased prevalence and now at least 1 in 100 children is thought to be autistic. vi

Asperger Syndrome is considerably rarer and can be distinguished from Autism as children with Asperger Syndrome more typically have intellectual abilities that are above average to high. vii

Depending on the diagnostic criteria used to diagnose Asperger Syndrome, it is estimated that 3 to 7 in every 1000 children have Asperger Syndrome<sup>viii</sup>





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Considering that one in a hundred children will have some form of ASD, AS in comparison is a much rarer form of ASD.

### **Symptoms of Asperger Syndrome**

The National Autistic Society<sup>ix</sup> states that people with Asperger Syndrome have difficulties in three main areas. They are:

- 1. Social communication
- 2. Social interaction
- Social imagination. 3.

The NAS describes the three main characteristics that people with AS usually have as:

- 1. Love of routines
- 2. Special interests
- Sensory difficulties. 3.

Unlike other Autistic Spectrum Disorders, children with Asperger Syndrome do not usually suffer from delayed language development, but their speech may be affected in other ways. For example, it may sound very monotonous, flat and/or unusually fast. In older children with Asperger syndrome, problems with their use and understanding of language often become more apparent, such asx:

- Talking 'at' somebody, rather than having a two-way conversation.
- Being unable to adapt the tone and content of their speech to different social situations. For example, speaking very formally at a party and then speaking to total strangers in a familiar way.
- Taking people's speech literally, and being unable to understand humour, sarcasm, metaphors or figures of speech.

### Treatments for ASD/Asperger Syndrome

There is currently no cure for autistic spectrum disorders (ASD). However, there is a range of specialist education and behavioural programmes (often known as interventions) to improve upon the social integration and communication skills of children with ASD.xi

The NHS<sup>xii</sup> has produced information on some currently used interventions for ASD such as:

- 1. Applied Behavioural Analysis (ABA)
- Speech and Language Therapy (SALT)
- 3. Treatment & Education of Autistic & Related Communication Handicapped Children (TEACCH)

## Shared Characteristics of HLP Children with and without Asperger Syndromexiii:

Children with high learning potential (HLP) who do not have Asperger Syndrome often display many of the areas of difficulty shared with Asperger Syndrome. A Dual or Multiple Exceptional (DME) child with





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Asperger Syndrome is defined as sharing Asperger symptoms alongside high intellectual ability. HLP children with *and* without Asperger Syndrome can share the following traits:

- Excellent memory for events and facts
- Verbal fluency or precocity
- Talks or asks questions incessantly
- Hypersensitivity to stimuli (noise, lights, textures and tastes)
- Concerned with fairness and justice
- Uneven (asynchronous) development
- Absorbed in a specialist interest

### Intelligence Profile of Children with Asperger Syndrome

Children with Asperger Syndrome often do well in academic subjects that involve facts, figures and logic.xiv When formally assessed for IQ, HLP children with AS score highly on subtests which involve factual information, definition of vocabulary, mathematics and block design. This intellectual profile of AS children was documented by Dr Elizabeth Wurst, who worked with Hans Asperger in the 1960s and 70s.xv

More recently, NICE guidance on the symptoms of ASD, published in September 2011 xvilists an:

'Unusual profile of skills and deficits (for example, social or motor coordination skills poorly developed, while particular areas of knowledge, reading or vocabulary skills are advanced for chronological or mental age)'

Although these children are able to score highly in the tests listed above, their overall intelligence quotient will be significantly diminished due to their inability to excel in tests involving problem solving, comprehension and picture arrangement. Hence the overall IQ profile of a child with AS will be considerably uneven due to their weaknesses in areas that require social knowledge, abstract thought or social communication. This discrepancy in high ability in some areas and weakness in others is a determining factor of dual or multiple exceptionality. Vilia

HLP children with Asperger Syndrome particularly enjoy tasks which involve copying (for example: a method, equation, design, programme) and creating systems which help them to provide them with much-needed consistency and order. Their special interests are likely to involve solitary and repetitive activities. A child with AS is likely to find another person's involvement in their special interest to be intrusive and unnecessary.xix

### **Symptoms of Asperger Syndrome Requiring Support**

### **Disruption to Routine or Special Interest**

To an Asperger child, their special interest<sup>xx</sup> provides them with incomparable enjoyment; any interruption whilst engaging in their chosen activity is likely to cause considerable anxiety and possible emotional or physical outbursts. This can cause problems for parents and teachers as interruptions are of course, unavoidable at times. These children thrive on repetition and strict routines and even slight disruptions are likely to upset them considerably. An awareness that this is how a child with AS is feeling is at least a starting point in preparing them for inevitable change.





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#### **Transition Problems**

Transition into school can be a particularly difficult time for children with AS experiencing an extreme change in their normal routines which can be very unsettling and upsetting. NICE guidance on diagnosis of autism mentions<sup>xxi</sup>:

'The core autism behaviours are typically present in early childhood, but features are not always apparent until the circumstances of the child or young person change, for example when the child goes to nursery or primary school or moves to secondary school.'

Lessons in secondary school are considerably different to primary school where the emphasis is largely on the acquisition of basic academic skills with a degree of learning by rote (for example memorising spellings, times tables, basic scientific facts, etc.). In secondary school, children are expected to develop a learning style which places importance on abstract thinking, creativity, debate, discussion, collaboration and presentations. This type of education can prove to be problematic for a child with AS to engage with. \*\*XIII

### **Problems with Motor Skills**

Another area which these children require support in is motor skills; both fine motor and gross. Handwriting can prove to be a very difficult task and despite having the intellectual ability, children with AS may struggle with pencil grip and become very anxious when given a task involving writing by hand. These children tend to thrive when allowed to use a keyboard. Physical Education involving ball games can also be challenging for children with Asperger Syndrome as their gross motor skills are likely to be under-developed compared with their peers. XXIIII

## **Communication Issues** xxiv

It is of vital importance that children with AS are given as much support and understanding as possible in the area of social communication that they struggle with. One of the first lessons the parents or teachers of such dual or multiple exceptional children learn is to tailor their language so that metaphors are rarely used-phrases like 'keep an eye on' are unfathomable to an Asperger child. Clear communication and simple instructions are of paramount importance when engaging with a child with AS.

### **Sensitivity**

Asperger children can suffer greatly from sensory overload which can be particularly problematic away from the comfort of home. The school environment, journeys on public transport or shopping in a supermarket can be unpleasant experiences for a child with AS due to their sensory issues. Although a complete avoidance of bright lights, loud noises, strange smells and uncomfortable textures would be what a child with AS would want, in reality, of course this is not possible. Sensory Integration Therapy is sometimes offered to AS children to help them manage extreme sensory issues. This should be carried out by a qualified Occupational Therapist.

## **Bullying**<sup>xxvi</sup>

Unfortunately, it is very common for Asperger children to become victims of bullying because of their problems with social communication. Sadly, their specialist interests, which can give them so much pleasure, can easily become of topic for cruel teasing and bullying. Many children with ASD cannot follow sarcasm and they do not have the skills to know how to respond to teasing. This makes them vulnerable and in need of support from parents and teachers. An Asperger child will not have a natural interest in the latest fashions or fads; they cannot comprehend why their interests, thoughts or appearance should change to suit popular culture. This rigidity in thinking can result in their isolation and leave them vulnerable to bullies.





### Choosing a School for a HLP Child with Asperger Syndrome

Because of the difficulties caused by Asperger symptoms as outlined above, when choosing a school for a HLP child with AS, it is important to consider the following policies of the school:

- 1. The Special Educational Needs (SEN) policy
- 2. The whole school policy on Bullying and/or Behaviour Management
- 3. The Gifted and Talented/Academically More Able Policy

This is because dual or multiple exceptional children require support in several different areas; one is not more important than the other. xxvii

Initially, school can appear to be a very hostile environment to a child with AS. Compared with the relative comforts and calm of their home environment, school, in contrast is often loud, chaotic, with bright lights and colours, odd smells, strange textures, sudden noises and most importantly many people to interact with. However, with the right support from the school's SEN Coordinator (SENCO) and the member of staff with responsibility for academically more able pupils, it can be possible to make certain provisions to support HLP children with AS. This requires an unwavering commitment on the part of the school to work with parents to fully support all the child's needs to ensure that the child's experience of school is, on the whole, a positive one.

#### Conclusion

For these dual or multiple exceptional children, the world outside their familiar comforts and routines of home and support of their parents can be a very unwelcoming place. It is important for parents, teachers and professionals to understand these children's strengths as well as their weaknesses and try to make their day to day life as positive as possible by providing the right level of challenge as well as consistent support for Asperger symptoms.

Potential Plus UK regularly supports parents whose children are experiencing problems with sensory, organisational, handwriting and friendship or bullying issues. It can be a daunting prospect for parents to consider whether or not their children have Asperger Syndrome or are simply experiencing certain social, organisational and sensory difficulties due to HLP children's extreme asynchronous development. However, a medical diagnosis of Asperger Syndrome, for those who have it, is the only way to ensure that much-needed support, understanding and specialist (both SEN and HLP) provision is available to the children who would really benefit from it.

Potential Plus UK Date of Issue: November 2011 Potential Plus UK Planned Review: November 2014

To give feedback on this fact sheet, please go to: <a href="https://www.surveymonkey.com/s/Factsheetfeedback">https://www.surveymonkey.com/s/Factsheetfeedback</a>

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