

**AMAZING
THINGS
ARE
HAPPENING
HERE**

Faculty Lunch And Learn: Academic Support for Students with ASD

Marisela Huerta, Ph.D.
Center for Autism and the Developing Brain

10/23/2013



COLUMBIA UNIVERSITY
*College of Physicians
and Surgeons*



Weill Cornell Medical College

 **New York-Presbyterian**
Center for Autism and
the Developing Brain

Today's Presentation

- ✓ Introduction to CADB
- ✓ The culture of ASD
- ✓ Recommendations for faculty
- ✓ Faculty Q&A



Center for Autism and the Developing Brain

- The vision of a group of parents
- Developed by a not-for-profit agency, New York Collaborates for Autism
- Presented to NewYork Presbyterian Hospital
- Academics supported by Weill-Cornell Medical College, Teachers College, Columbia University
- Already ongoing collaborations with NYU, Mt. Sinai, Rutgers, Einstein, Columbia School of Public Health and more planned



Opened
in July
2013



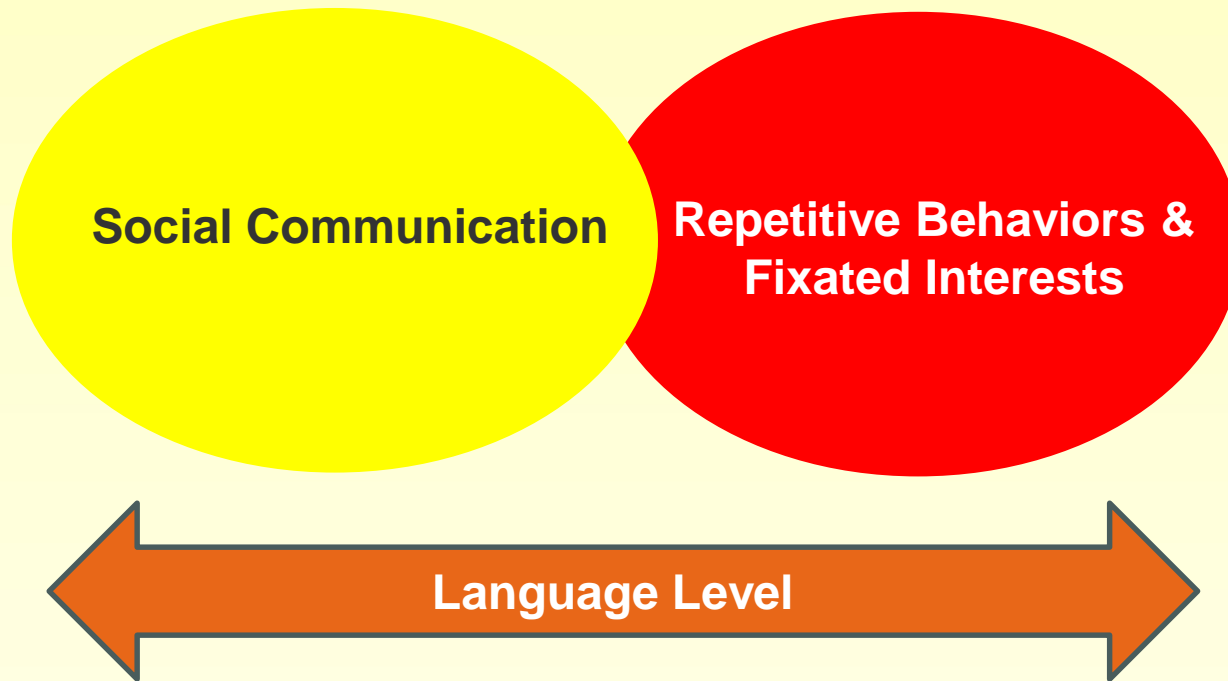
Center for Autism and the Developing Brain

- Comprehensive clinical and research center
- Assessment, diagnosis, treatment, and research
- Services across the lifespan, working together with families and professionals across disciplines

- *The goal is to use evidence-based treatments and diagnostic techniques, and when little information is available, collecting this evidence*



Autism Spectrum Disorders



Challenges for Faculty:



- The challenges for faculty (and TA's) can be significant and time-consuming
- The expectation for faculty to provide “fair” learning opportunities for all



Students with ASD

- Difficult behavior in a student with ASD is often the result of the mismatch between their culture (social knowledge, repertoire of social behaviors and skills) and that of “neurotypical” students
- Thus, to ensure success for all students, and to minimize disruptions, the key is to identify needed skill sets and/or reduce the social demands in the classroom/lab/lecture.
- The idea is not to make exceptions for 1 or 2 students but to maximize student participation by reducing social demands (ambiguity) and focusing on the course content



The “Culture” of ASD...

Consider:

- *Limited social experience and limited knowledge:*
 - sensory processing
 - difficulty with change
 - learning profile
 - social communication deficits/strengths



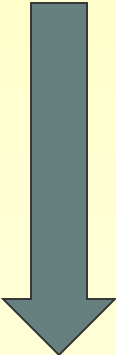
Early Development & ASD

- Different gaze
- Different interests
- Less interest in social sounds
- Less shared attention
- Trouble with imitation

Cascading effects...

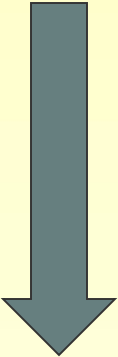


ASD and Social Communication

- 
- History of delays in language development
 - Little self-initiated communication
 - Unusual forms of speech
 - Pedantic/stereotyped speech
 - Little conversational ability
 - Poor retelling/sequencing



ASD and Social Communication

- 
- Limited use of body language
 - Little or no turn-taking behavior
 - Difficulty knowing “hidden” rules
 - Trouble seeing the bigger picture
 - Concrete understanding of situations/language
 - Limited coping/seemingly high reactivity
 - Poor modulation of volume/tone when speaking

Students may look more distressed than they are...



ASD and Unusual Behaviors

- Unusual or intense interests
- Motor mannerisms and posturing, particularly when excited
- *Different sensory profile, sensory sensitivities to light and sound*
- *Difficulty with changes in routine*



ASD in adults

- Few adults recover from ASD and most continue to demonstrate clinically significant symptoms of the disorder (Seltzer, Shattuck, Abbeduto, & Greenberg, 2004):
 - Core social skills are often learned by the time students reach college, but putting it all together is a challenge;
 - Negative experiences may make young adults averse to social interactions of any kind; On the other hand, some young adults are highly socially motivated but may have limited skill/awareness
 - In general, social problem-solving may be poor;

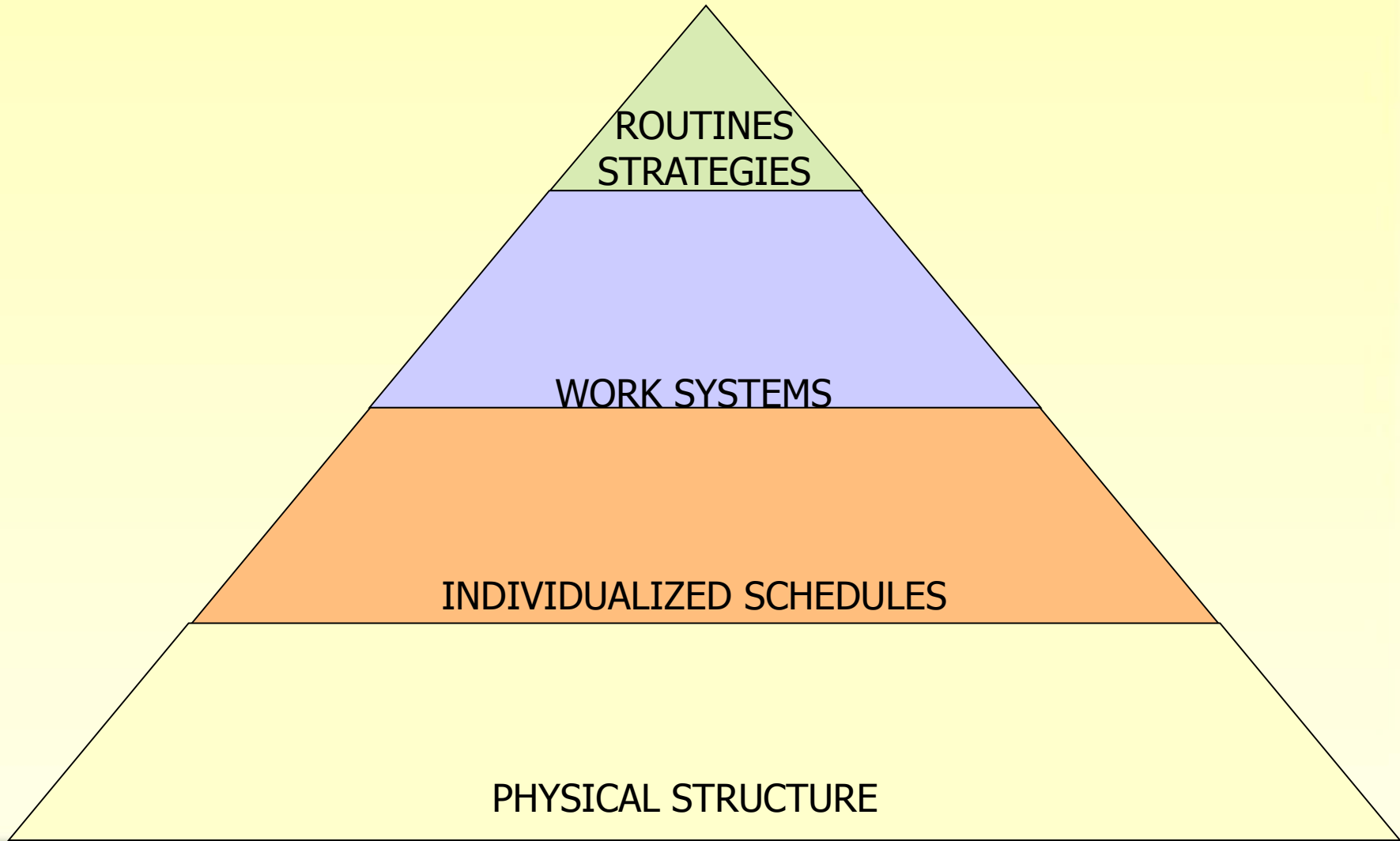


What does this mean for student behavior?

- Concrete thinkers.....may seem inflexible/argumentative
- Different tolerance for change.....unusual responses to failure
- Limited perspective-taking...difficulty w/hypotheticals & bigger picture
- Difficulty organizing information.....prioritizing is a challenge
- Easily distracted.....may go off-topic/lose assignments
- Tendency to be fixated.....may dominate class discussion
- Difficulty reading social cues.....may continue difficult behavior
- Poor inhibition.....may interrupt, may share personal information



What works for ASD: “Structured Teaching”



“Structured Teaching” ...

Supports comprehension of (and participation in) social world (classroom/lab/lecture) by:

- Capitalizing on visual learning style and
- Preference for routine

The goals are to:

- Reduce ambiguity
- And reduce social demands
- Provide information, boundaries/rules and consistency

Note: For some young adults, comorbidities and sensory challenges may require additional intervention (medication)



“Structured Teaching” and Universal Design

Universal design: an approach to the design of products and environments, including instruction, that takes into consideration the variety of abilities, disabilities, racial/ethnic backgrounds, reading abilities, ages, and other characteristics of the student body.

Rather than focus on adapting things for one individual, to react to a challenge or crisis, universally designed learning environments are created to be accessible to everyone *from the beginning*.



Recommendations for Faculty:

Best practice is to anticipate a diverse student body:

- Clarify course goals and ways to assess progress
- Explain, at the start, the roles of faculty, TAs (and other student services)
- Set expectations for classroom/lecture by creating routines:
 - Begin with class updates/recap of previous work
 - Note how assignments relate to lectures/class/lab
 - Save last 5-10 min of class/lecture for recap/next steps
 - Rubrics for grading
 - Avoid pop quizzes



Recommendations for Faculty:

Best practice is to anticipate a diverse student body:

- Create structure for tasks that require social interaction:
 - For group work, assign roles and expectations for each
 - If class participation is part of the course grade, also allow alternative methods of participation (e.g. written)
 - “2 Cards” approach during classroom discussions or similar boundaries (see recommended book)
 - Or journals/comment box/message boards, which can be monitored by TAs
 - Explain distinction between faculty office hours, TA office hours, and general tutoring/support on campus



Recommendations for Faculty:

Services and supports for young adults with ASD are not yet well-developed. Collaboration will be important.

- Anticipate need for student-faculty communication (provide rules/scripts/Q&A)
- Provide mechanism for disclosure (e.g.; worksheet for all on 1st day)
- Indicate procedure for accommodations request (on syllabus)
- Know policies for accommodations and contacts for student disabilities center



What is it like living with ASD?

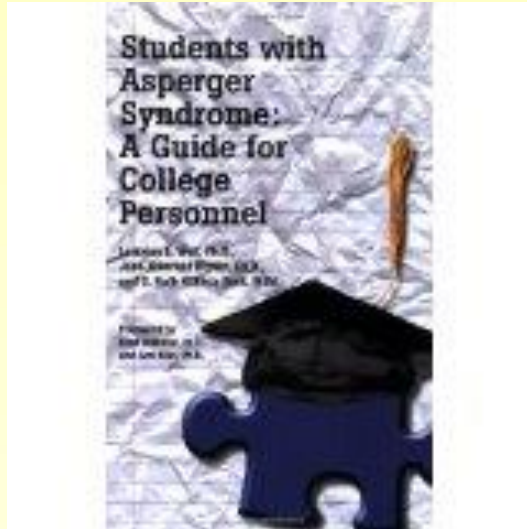
“...it’s a huge pain...you don’t understand everything that people talk about. You don’t feel the same emotions they do. You are hypersensitive to things they wouldn’t even notice. And then there are times that your head just stops working.”

“I think it’s important to know that every autistic person’s an individual person, not just a collection of symptoms...it’s just like everybody else, different personalities, different sizes, different shapes.”



Thank you for your attention! Questions?

Good resource:



My email:
mah2046@med.cornell.edu



COLUMBIA UNIVERSITY
College of Physicians
and Surgeons



Weill Cornell Medical College

NewYork-Presbyterian
Center for Autism and
the Developing Brain

AMAZING
THINGS
ARE
HAPPENING
HERE