A graduate project submitted in partial fulfillment of the requirements
For the degree of Master of Science in Counseling,
School Counseling

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August 2014
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Acknowledgements

I would like to take this opportunity thank everyone from the School Counseling program for pushing me and molding me during the school process. I would like to especially thank my chair, Dr. Tovah Sands for the many appointments, guidance, and assistance throughout the project. I would also like to acknowledge the rest of my committee starting with Dr. Shyrea Minton. Your optimism and belief in me to succeed was invaluable. Thank you for talking me through the process and taking the time to make sure I was receiving the best experience. I would also like to thank Jessica Apperson for not only being my reader but helping me develop my professional abilities throughout the year.
Dedication

I would like to dedicate this thesis project to my family. My husband, Jeffrey Winger, for pushing me, believing in me, and knowing I could complete the program even when I had my doubts. I would like to thank my children, Charlotte, Abigail, and Benjamin for being flexible with the time I needed to spend away from home. To my mom, Donna Ayres and my in-laws Richard and Joan Winger, thank you for the countless hours helping with the children so I could write or attend school related activities. Without the support of my family, I would not have been able to complete this chapter of my life. This project is for you!
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ABSTRACT

PROFESSIONAL SCHOOL COUNSELOR PRESENTATION REGARDING AUTISTIC STUDENTS

By

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Master of Science in Counseling, School Counseling

Full inclusion in middle school classrooms of high functioning autistic students has been on the rise in recent years throughout the United States. General education middle school teachers receive some training in their credential schooling regarding full inclusion however; additional support at the school site level is needed to help teachers with behavioral supports for the inclusion autism spectrum disorder students. For this graduate thesis project, a professional development has been created for professional school counselors to present to the general education middle school teachers in collaboration with the school psychologist. The presentation is designed for the presenters to discuss common behaviors found in autism spectrum disorder students, how these behaviors may be demonstrated in the classroom setting, and strategies to prevent or intervene during negative behavior outbursts that may occur in the classroom.
Chapter 1: Introduction

Introduction

The diagnosis of autism spectrum disorders (ASD) among children is on the rise in the United States (Center for Disease Control [CDC], 2012). ASD is a developmental, mental disorder that affects communication and social relationships in diagnosed individuals of all ages. The causation of autism spectrum disorder is widely debated, however research is beginning to show an association with early brain development, genetic pre-disposition, and environmental triggers (Autism Speaks, 2014). The Autism and Developmental Disabilities Monitoring Network (ADDM) is a CDC-funded research group that examines the prevalence of autism spectrum disorders in the United States. In 2008, ADDM researchers collected data related to the incidences of diagnosed autism spectrum disorder symptoms among individuals from birth until the age of eight at fourteen elementary schools in the United States. The ADDM researchers found that the autism diagnosis was on the rise in the fourteen investigated elementary school sites. The same study of fourteen elementary schools by the ADDM researchers showed an estimated 1 in 54 boys and 1 in 252 girls diagnosed with autism spectrum disorders. With estimates that 1 in 88 children, boys and girls in the United States are diagnosed with autism spectrum disorders, there appears to be a rise from the late 1990’s when the estimate was 1 in 110 boys and girls in the United States were being diagnosed with autism spectrum disorders. While autism spectrum disorders can be found in children of all ethnicities and both genders, boys are diagnosed five times as often as girls (CDC, 2012).
High functioning autism spectrum disorder students are being placed into general education or full inclusion classes at a higher rate than previous years (U.S. Department of Education, 2012). One reason for the rise of full inclusion classrooms is to comply with the Individuals with Disabilities Education Act (IDEA) of 2004. The IDEA law requires that students with disabilities receive educational services in the least restrictive setting appropriate or beneficial to them (Norris & Dattilo, 1999; IDEA, 2004). Kindergarten through twelfth grade general education schools are seeking to help the high functioning autism spectrum disorder students with their social skills by providing the opportunity for the autism spectrum disorder students to interact with their same aged peers in full inclusion classrooms (Boutot & Bryant, 2005). Recent data shows 37.4% of K-12 autism spectrum disorder students in the United States were placed in mainstreamed general education classrooms if the autism spectrum disorder student could effectively perform the general education classwork approximately 80% of the school day (U.S. Department of Education, 2012).

While teachers have some in-school training while in their teacher preparation programs in making accommodations for the autistic spectrum disorder student, there are not a lot of resources such as professional developments or workshops provided to them in the schools on how to effectively utilize classroom behavior management strategies for the mainstreamed or full inclusion autism spectrum disorder population of students. In fact, many teachers do not have exposure to autism spectrum disorder students until these students are placed in the teacher’s classroom (Sansosti & Sansosti, 2012). Hans Asperger, a medical theorist who focused his research on autism spectrum disorder
children stated in his article entitled, Die „Autistischen Psychopathen" im Kindesalter [The autistic psychopaths in childhood],

"These children often show a surprising sensitivity to the personality of the teacher. However difficult they are even under optimal conditions, they can be guided and taught, but only by those who give them true understanding and genuine affection, people who show kindness toward them and yes, humor" (Hans Asperger, 1944).

**Statement of the Problem**

High functioning autism spectrum disorder students are typically able to perform academically as well as their general education peers. However, the classroom environment can be overwhelming to both the autistic student and the general education teacher. Not enough resources, such as professional developments or workshops, available for general education teachers to utilize at the middle school sites. Professional developments, handouts, and strategies such as prompts, organization of classroom routines and behavior management may not be provided to the general education teacher when a mainstreamed autism spectrum disorder student enters their classroom.

**Purpose**

The purpose of this graduate project is to create a professional development presentation for middle school professional school counselors to present to middle school general education teachers on the topic of classroom behavioral management strategies the teachers can utilize with the autistic students in his or her classroom.
Definitions

*Autism Spectrum Disorder (ASD):* A group of developmental disabilities that can cause significant social, communication and behavioral challenges (CDC, 2012).

*General Education:* The school curriculum that is required for all students. (Hunt, 2010).

*Individualized Educational Plan (IEP):* A legal written document of the educational program and goals designed and provided by the school district to meet a special education child’s individual needs (National Dissemination Center for Children with Disabilities [NICHCY], 2013)

*Inclusion:* Including students with special needs in the general education classroom (Hunt, 2010).

*Mainstream:* Allowing students with mild or moderate special needs to participate in the general education classrooms if the student was at or near grade level academically and required only minimal behavioral supports (Hunt, 2010).

*Special Needs:* Describes the needs of special education students that the teachers and school staff must accommodate (Ravitch, 2007).
Chapter II: Literature Review

Introduction

Middle School students with a high functioning autism spectrum disorder diagnosis have a historically harder time with academics, social situations, and communication. Professionally trained school counselors are advocates in assisting students to succeed academically and in developing peer relations. With full inclusion classrooms in the middle schools on the rise, general education teachers need behavior management intervention strategies to aid autistic students in the classroom environment.

Early adolescence

Puberty in early adolescence begins the triggering of many changes cognitively, physically, and socially. Cognitive development in early adolescence undergoes a transition in which children expand their way of thinking in regards to concrete and fluid thoughts. Piaget explained the increasing ability to think abstractly as part of the formal operational stage (Papalia, Olds, & Feldman, 2007). Piaget theorized that children beginning approximately at age eleven are moving away from a concrete way of thinking into more fluid thoughts. The children in the concrete thinking stage, approximately 11 years old and younger, are unable to remove themselves from the present situation and theorize about the future. Piaget theorized that early adolescents are able to think outside of the present moment, allowing them to further explore possible outcomes of situations they may not have encountered.

Physical development is rapidly occurring for the youth in the adolescent age group. While some physiological changes regarding puberty can occur before middle school, most changes for females begin as young as eight. Males begin their
development as young as age nine (Papalia et al., 2007). Puberty is the onset of sexual maturity in which an increase of sex hormones such as androgens, estrogens, and testosterones are released in greater quantities from the ovaries and testes (Concise Medical Dictionary, 2010). During puberty, both boys and girls will encounter a rise in their weight and height (Tanner, 1962). Physical changes, such as the weight and height gains, in addition to deepening voice and body hair growth are the result of a rise in estrogens, testosterones, and other hormones such as androgens (Papalia et al., 2005).

Two researchers, Davison and Susman (2001), examined the relationship between an increase in hormones during puberty and cognitive abilities during early adolescence. The researchers hypothesized a relationship among the specific hormone of estrogens, androgens, or testosterones and spatial abilities and verbal communication abilities. The researchers provided self-surveys to fifty-six boys between the ages of 10 and fourteen and fifty-two girls between the ages of 9 and fourteen. Blood samples were taken to measure hormone levels during the testing. Samples were taken three times with the same participants at six month intervals to ensure validity. Researchers found a positive correlation between spatial abilities and testosterone levels for both boys and girls. However, researchers found boys were affected at a higher degree than the girls in the correlation between spatial abilities and testosterone levels. While physical and cognitive developments are often discussed separately, there is evidence that these changes in early adolescence affect one another.

In addition to physiological body changes and the development of more abstract thinking cognitively, the middle school students are also entering into a more social atmosphere. Erikson (1968) developed a model of stages for different psychosocial
phases of life in which an individual can either conquer a ‘crisis’ or remain within the crisis state. The crisis stages throughout the lifespan have the individual working on completing a psychological, social, or emotional goal in order to conquer the crisis. During adolescence Erikson theorized the individuals would be in the crisis stage of identity versus role confusion. The adolescents are developing self-awareness and finding themselves within their peer group as well as attempting to fit in with society as a whole. If the role confusion crisis is overcome, the student will feel secure in who he or she is. However, if adolescents do not pass positively through the identity versus role confusion stage, the adolescents will remain insecure of themselves. According to Erikson, even if the identity versus role confusion stage is completed with self-confidence, often times this stage will be re-visited throughout the lifespan (Papalia, Olds, and Feldman, 2007).

**Autism Spectrum Disorder**

General symptoms of autism have been documented by researchers in medical journals since the early 1900’s. However, in the beginning stages of autism research, clinicians believed the characteristics of autism were a form of childhood schizophrenia (Holaday, 2012). The diagnosis of schizophrenia for autistic children remained until 1943 when abnormal child development began to be classified into subcategories by research clinicians (Kolvin, 1972). At this point, the researcher Kanner (1943) began to notice children previously regarded as schizophrenic had defects in the areas of social interaction but no other symptoms of schizophrenia. One child in particular was noted as wandering around by himself and did not understand sarcasm or analogies. Kanner’s research noted the children in his study only using words as literal figures of speech.
At the same time Kanner (1943) was conducting his research a pediatrician Hans Asperger, for whom the diagnosis of Asperger Syndrome is named, began documenting autistic children in the mid 1940’s. Hans Asperger described children with repetitive movements, who socialized with adults better than children their own age, and had inflexibility to new situations (Lai, Lombardo, & Baron-Cohen, 2014). When new situations or a change in routine occurred, children diagnosed with Asperger Syndrome reacted with anger, frustration, and an inability to move onto the next task or situation.

Autism Spectrum Disorder is now known to be a neurodevelopmental disorder, meaning there is a deficit with brain development. The CDC (2012) has estimated that 1 out of every 88 children in 2012 in the United States was diagnosed with a form of autism spectrum disorder. While a definitive cause has not been found, there is evidence to suggest there is a genetic factor involved in autism spectrum disorders. The Interactive Autism Network is a United States research-based online community with over 9,000 children with an autism spectrum disorder and their family members registered on the website (Rosenberg, Law, Yenokyan, McGready, Kaufmann, & Law, 2009). Utilizing the member’s information from the Interactive Autism Network website, researchers were able to analyze information on genetics related to autism spectrum disorders. Researchers reviewed the volunteered information of the member’s online information from the Interactive Autism Network website and split the information into non-twins and twins. Researchers further categorized the twins found from the information from the member’s profiles into two groups: monozygotic and dizygotic twins. The monozygotic twins, or identical twins, share the same DNA. These children were fertilized in the same egg, which split early in development and became two embryos.
The dizygotic twins, or fraternal twins, were two eggs that fertilized at the same time. Therefore, the dizygotic twins share the same amount of DNA as any genetic siblings. The researchers reported if one dizygotic twin was diagnosed with an autism spectrum disorder, their twin had a 10-20% chance of being diagnosed with an ASD as well. However, if one identical twin was diagnosed with an ASD, the percentage rose to a 60-90% chance that the other identical twin would be diagnosed (Rosenberg, et.al., 2009). Thus, the researchers concluded there is a genetic factor with autism spectrum disorders.

While characteristics of with autism spectrum disorders may be detected in the school setting, school personnel cannot make a diagnosis or test specifically for characteristics of autism spectrum disorders. Autism is diagnosed by either a psychiatrist or a medical doctor. Early detection happens after 18 months of age and is indicated by, in part, delayed verbal and non-verbal communication, repetitive behaviors, inflexibility between tasks or situations, and pretend play (Lai, Lombardo, & Baron-Cohen, 2014). The severity of symptoms caused by with autism spectrum disorders varies greatly between individuals. The wide degree in which with autism spectrum disorder affects individuals is referred to as the autism spectrum. Individuals on the spectrum can be categorized as high or low functioning ASD individuals. There are three main categories within an autism spectrum disorder: Pervasive Developmental Disorder, Asperger’s Syndrome, and Autistic Disorder (CDC, 2012). Pervasive Developmental Disorder According to Autism Speaks (2014), a national nonprofit organization for autism research and awareness, autism spectrum disorder children and adolescents have difficulty with social interactions. However, most high functioning autism spectrum disorder students have average to above average ability to develop and utilize language.
Low functioning autism spectrum disorder children and adolescents currently remain in special education classrooms due to the inability to perform at the same level as the general education peers.

The American Psychiatric Association (2013) describes communication deficits in children and adults with ASD as having difficulty in responding to conversation interactions. Often times students diagnosed with ASD struggle with the back and forth nature of a conversation. The difficulty is further displayed by the natural flow of a conversation changing topics. As the conversation goes from a previous topic to a new one, students diagnosed with ASD tend to remain on the first topic. The ability to move forward with the rest of the group is hindered. Furthermore, students diagnosed with ASD tend to not understand non-verbal cues, such as body language and facial expressions. There is a lack of the ability to decode what a roll of the eyes or a loud sigh means. In addition to the above, ASD children have a difficult time with empathy or relating to other’s emotions. All of these characteristics contribute to students diagnosed with ASD having a difficult time building and keeping friendships.

In addition to social interactions, ASD individuals are often inflexible with situations, dependent on routines, and can become intensely focused on their preferred topic or object. The inflexibility to change can become problematic in middle schools when students’ class schedules change. In many schools, students’ schedules of classes change either quarterly, four times a year, or by semester, two times a year. If a schedule change occurs without ample notice, these students may act out to show their frustration and lack of control in the situation.
While the criteria can for diagnosing ASD may be identified in adulthood, the symptoms must have been present in early childhood in order for an ASD diagnosis to occur (The American Psychiatric Association, 2013). It is important to understand the way these children and adolescents function in order to help them have productive interactions with others.

The Diagnostic and Statistical Manual of Mental Disorders or the DSM V (2013), a manual utilized by professionals in the mental health field such as Psychiatrist and Medical Doctors, has specific criteria to diagnose an autism spectrum disorder. The severity of the diagnosis of with autism spectrum disorder is based on what deficits are being expressed and to what extent. In general there are characteristic of ASD that will be displayed in each individual given the ASD diagnosis. The first criterion of diagnosis involves social aspects of the child’s life. The individual will have a deficit in social communication and social interaction. An ASD child will have difficulty having back-and-forth conversations, have a hard time initiating conversation with others, and relating to others on non-preferred topics. In addition, these students often times have a lack of eye contact and cannot decipher body language or facial expressions. When peers are bored or not relating to the topic the ASD child is fixated on, the ASD student will not notice and continue on with the subject of interest.

In addition, the DSM V (2013) outlines behaviors that may indicate an autism spectrum disorder diagnosis. The student may display repetitive movements or speech. Often times rocking back and forth is observed by others, or lining up objects (Autism Speaks, 2014). The autism spectrum disorder child is inflexible to change in routines or when a preferred activity is taken away. There may also be hyper or hypo-activity
response to sensory input (DSM V, 2013). For instance, there may be constant touching of a specific object or adverse reactions to loud noises (Autism Speaks, 2014).

The DSM V (2013) specifies that in order for a diagnosis to occur, symptoms must have been present early in life. These criteria must have also made a significant impairment in the social and schooling aspects of the child’s life. After the criteria has been established for the child, a severity level needs to be assessed. The levels of support range from level 3, “Requiring very substantial support” to level 1, “Requiring support” (DSM V, 2013). Level 3 individuals may be non-verbal; if the individual is verbal he/she will rarely initiate conversation with others, is extremely inflexible with change, and has difficulty with changing activities. Individuals in level 2 will have supports in place however, will continue to respond to social cues in an inappropriate manner and will be inflexible with change, especially in preferred activities. Level 1 individuals will have social deficits without supports in place, have difficulty initiating conversation with others and are inflexible with changing of activities (Autism Speaks, 2012).

While the high functioning autism spectrum disorder students are typically at a level academically to achieve satisfactory grades, autism spectrum disorder students continue to struggle with having a feeling of comfort in the classroom environment (McAllister & Maguire, 2012). The common characteristics of with autism spectrum disorder make it difficult for these students to move on from activity to activity, remain flexible to situations, and to read others’ social cues (American Psychiatric Association, 2013). Autistic students can respond to stressful situations with an increase of anxiety, anger, and uncontrollable tantrums (Myles, 2005). Despite the possible negative experiences, research has shown that the high functioning autism spectrum disorder
students can benefit from the mainstreamed or inclusion classrooms when the classroom is set up for them to succeed both academically and socially (Harrower & Dunlap, 2001).

**Middle School**

Middle School is a transition stage of schooling between elementary and high school. Catering to early adolescents, middle schools primarily serve children ages 11-14 (Hunt, 2010). Typically ranging from grades six through eight, these students are introduced to having multiple teachers for their classes and academic professional school counselors (O’Brien, Collins, & Credo, 2011). These schools are also founded on the recognition of social, physical, and cognitive changes happening for youth during these ages of life (2011).

While in middle school, students are passing through a time in which peer approval and status within a peer group become very important. Shim, Cho, and Want (2013) looked at the social aspect of middle school and the effects of the students’ academics based on their perceived social competence. Researchers assessed 373 middle school students in the United States in two schools, about half boys and half girls, by providing self-surveys regarding social competence and reviewing the middle school student’s academic grades. The researchers found a positive correlation between social development goals and higher social satisfaction. Social development goals can help students feel more knowledgeable about how to handle social situations, both negative and positive, and therefore provide a positive outlook on social interactions.
Full Inclusion of High Functioning Students Diagnosed with ASD in General Education Classrooms

As mentioned in the previous section, the Individuals with Disabilities Education Act (IDEA) requires that schools provide accommodations so that students can learn in the most non-restrictive environment appropriate to their needs (2004). This practice is often called ‘full inclusion’ or ‘mainstreaming’, and it offers special education students, including high function autistic students, the opportunity to be in a general education classroom, the chance to develop friendships, and the chance to find role models among their peers (Boutot & Bryant, 2005).

Along with the social interaction increase for inclusion or mainstreamed autism spectrum disorder students, there have also been studies showing academic gains when students diagnosed with ASD are included in general education classrooms. Kurth and Mastergeorge (2010) conducted a long term study with fifteen mainstreamed students diagnosed with autistic spectrum disorder in 7th through 9th grade. Assessing the impact of inclusive settings for these students, researchers gave three assessments in the form of the Wechsler Intelligence Scale for Children 4th edition or the Non-Verbal Intelligence 3rd edition, the Vineland Adaptive Behavior Scales, 2nd edition, and the Woodcock-Johnson III Test of Achievement. Each test measures either cognitive intelligence, behavior of the student, or the academic ability of the student. Researchers found a significant positive correlation between autism spectrum disorder inclusion students and their academic achievement.

Dymond and Gilson (2007) investigated perceptions of 783 parents of 783 k-12 students diagnosed with autism spectrum disorder in Virginia regarding programs and
services the parents believed would help their autism spectrum disorder child succeed. The researchers provided an open-ended survey to the parents that asked about perceptions of the services provided to their child and recommendations to improve. The surveys were mailed to the Special Education director at general education schools, private schools, and special education schools in Virginia. When reviewing the results, the researchers found a common theme of four recommendations to improve services for autism spectrum disorder students. Theme one was for schools to improve the quality, quantity, accessibility, and availability of services to those diagnosed with autism spectrum disorder. The second theme, educating and training personnel who work with the students diagnosed with autism spectrum disorder, was recommended by 56% of the parents. Just over 50% of the parents felt that school personnel were in need of additional training to become more qualified to better work with the autism spectrum disorder population of students. The recommendations of the parents included understanding how ASD affects students in the classroom, strategies to effectively handle the students diagnosed with autism spectrum disorder, and knowledge about the services available for the students diagnosed with autism spectrum disorder.

Hsien, Brown, and Bortoli (2009) evaluated the attitudes and beliefs of thirty-six general and special education teachers. Categorizing the teacher information into educational obtainment and any additional training the teachers had obtained, the researchers found a correlation between the teacher’s level of education, area of study, and the teacher’s opinion on the inclusion process. General education and special education teachers with a Master’s degree or further training on autism spectrum disorder students were more confident and knowledgeable about the inclusion process than
teachers who held a Bachelor’s degree as their highest education or teachers without additional training regarding autism spectrum disorder students. In addition, the teachers with education past their Bachelor’s degree had more positive attitudes than the teachers without additional education past their Bachelor’s degree towards the inclusion process.

**General Education Teacher Training on Inclusion**

Techniques, strategies, interventions, and preventions are all needed to help the autism spectrum disorder population of students be successful in the classroom. Sansosti and Sansosti conducted interviews and focus groups of seventy educators in a suburban school district in Florida in order to assess the full inclusion process for the students, parents, teachers, and support staff. Two focus groups were conducted with the participants to review the purpose of the study and what the educators should expect during the process of the study. Individual interviews were conducted after the focus groups concluded and averaged sixty minutes each in length. Based on the educator’s responses during the focus groups and the individual interviews, the results showed a need for further professional development for general education teachers in the areas of understanding how the autistic students learn, strategies to assess each full inclusion student individually, and strategies known to help support the student’s specific needs (2012).

Teffs and Whitbread (2009) assessed the preparedness of 655 Connecticut K-12 public school general education teachers on the subject of full inclusion autistic students. The teachers were randomly selected from 169 districts in the state of Connecticut in order to give a fair representative of the whole state. The survey provided to the teachers had three sections: the first was demographic information including the teacher’s years of
teaching, grade levels the teacher had taught in the past or currently, and time in their current position. The second section asked the teachers to report experiences dealing with autism spectrum disorder children in the classroom and the teacher’s familiarity with Individualized Education Plans (IEP). The third part of the survey included questions regarding the teacher’s training about students diagnosed with ASD. The survey had specific questions asking the amount of training the teachers had acquired in strategies, IEPs, and how to assist the students diagnosed with ASD with social skills and communication. Results showed over seventy-five percent of participants self-reported the need for training or support in teaching the autism spectrum disorder students. Respondents specifically requested additional training in social skills (82.9%), Behavioral Supports (78%), Communication (70.7%), and Characteristics of ASD (52.4%). Only 18.3% of the participants felt “prepared” to teach students diagnosed with autism spectrum disorder and 5.5% felt “well-prepared”. The majority of the teacher participants felt “not prepared at all” (22%) or only “somewhat prepared” (54.1%) to teach the students diagnosed with ASD in the classroom.

Gao and Mager (2011) conducted a study regarding the attitude and personal/professional beliefs of 168 pre-service general education teachers. These students were currently receiving their education and training in order to be a general education teacher. The survey was distributed three weeks before university graduation in order to ensure the participants had the majority of their coursework completed. The researchers found a positive correlation between positive self-efficacy of the teacher and attitudes towards the inclusion process. As the teacher’s self-efficacy of his/her teaching abilities rises, the more positive attitude the pre-service teacher has regarding the social
diversity within the classroom. Gao and Mager asked the participants to report on the level of training in inclusion in order to correlate any positive or negative attitudes towards inclusion. The researchers found that the higher the level of preparation the teachers had, the higher the levels of positive regard towards inclusion and the higher the belief towards diversity of classrooms, including full inclusion, throughout the school system. The results showed that over 70% of the participants had one day or less of training on characteristics of ASD, instructional guidance, IEP’s, behavior of the autistic student, social skills, and communication. In the same survey more than two-thirds of the survey participants responded that there was a need for more training and support in the area of students diagnosed with ASD. Specifically, 83% of the respondents asked for additional support in the area of social skills. Behavioral supports were also asked for at a rate of 78% and communication support was needed by 70%. Fifty-two percent of the teacher respondents asked for additional information on characteristics of ASD in general.

Logan and Wimer (2013) researched 203 teachers’ attitudes about inclusion of autism spectrum disorder students. The researchers provided a survey to the teachers currently teaching general education classes in grade levels kindergarten to eighth grade in order to determine if years of teaching, gender, or school level would correlate with their opinions about inclusion practices. Logand and Wimer found that high school teachers were the most confident in their ability to teach an inclusion class of students. Years of teaching did not correlate with confidence teaching inclusion students. Researchers provided a place on their survey for additional comments from the participants. Teachers attitudes regarding inclusion were noted through these comments.
Teachers reported that classroom material was too difficult to be able to teach inclusion students, test scores dropped because the teacher had to spend time teaching students with special needs, and it was too great of a challenge. In addition, participants provided feedback such as needing additional training on how to manage the full inclusion classroom. Teachers also reported not having enough knowledge to teach the inclusion students. The teachers surveyed requested refresher courses in order to further assist in classroom behavior management strategies for the full inclusion classroom.

In a survey of over 700 parents with autism spectrum disorder children, Dymond and Gilson (2007) found that parents of students diagnosed with ASD felt they were more knowledgeable about with autism spectrum disorders than the teachers who would be teaching the student diagnosed with autism spectrum disorder. The lack of expertise was a concern for the parents as well as the lack of continuing education for school personnel. The parents suggested further training on strategies to use in the classroom and information on how to teach students diagnosed with ASD.

**Classroom Behavior Management Strategies**

General education and special education teachers are trained in their university training and in professional developments regarding classroom behavior strategies in order to manage the classroom of students. Effective classroom management has been linked to positive academic and social outcomes for the students (Ialongo, Poduska, Werthamer, Sugai, & Kellam, 2001). A recent study looked into the effectiveness of different classroom behavior strategies in first grade and the long term effect it had on these students as the students entered sixth through twelfth grade. The study utilized nine public schools in the Baltimore, Maryland area with 678 first-graders participating.
Every first grade classroom at the nine schools was given one of two interventions to implement throughout the school year: a classroom-centered intervention or a family-school partnership. The teachers received support and coaching in a support group with trained personnel each year. A pre-test was given to the teachers to assess each student in their classroom on a scale of 1 to 6 on “authority acceptance” and “aggressive behavior displayed by the student”. The researchers found at the end of the interventions a positive correlation between the use of both the family-school partnership intervention and the classroom-centered intervention strategies in first grade and positive behavior and early acceptance of authority by the same in middle school (Ialongo, Poduska, Werthamer, Sugai, & Kellam, 2001).

Many behavior management strategies exist for teachers to use in a general education classroom, however few are research based and proven to give effective results. Parsonson (2012) reported on the effectiveness of Applied Behavior Analysis (ABA) which involves providing positive reinforcement for desirable behaviors exhibited by the students. In addition, ABA recommends seating placement of the students in the classroom to be facing the front, teacher led lectures, instructions provided by the teacher to the students, and choices given to the students by the teachers. Results showed middle school age general education students and older were found to work more efficiently if seated in rows instead of in groups. The general education students behaved more positively when the rules, expectations, and schedules were posted in the room.

Reinke, Herman, and Stormont (2012) discussed positive behavior supports for general education students that can be used in the classroom by general education teachers. When teachers use clearly stated rules, positive rules, and positive praise, the
student’s behavior can become productive. Rules displayed throughout the classroom, especially in sight of the student becomes a constant reminder of the expectations of the teacher. The teachers who are explicit explaining classroom rules to students help with all student misunderstandings. In addition, when teachers use positive rule words such as “Do” or “Please” instead of “Do not” or “Never”, they are accepted more easily by the students.

In a study of three elementary schools utilizing participant teachers in grades first, second, and third, researchers looked into the school-wide positive behavior supports and effectiveness that teachers were utilizing with general education students. The researchers found the baseline data of positive interactions from the teachers to the students was not within the suggested amounts of the school-wide positive behavior intervention program between teachers and students. To effectively engage in school-wide positive behavior intervention and support, school personnel use, clearly stated rules, positive interactions between the students and teacher, as well as engaging students in lessons by using different ways of instruction. Researchers found teachers who had four positive interactions per one reprimand reported being less “emotionally exhausted” than the teachers who had more reprimands per positive interaction a day (Stormont, Reinke, & Herman, 2012).

**Classroom Behavior Management Strategies for Students Diagnosed with ASD**

Students diagnosed with Autism Spectrum Disorder students have difficulty in many areas of social interaction and flexibility in the classroom. In a classroom with autism spectrum disorder students, the teacher should be aware that sarcasm or idioms will not be understood. Students diagnosed with ASD are literal in their understanding of
words. Instead of using these forms of expression, the teacher should be direct and to the point with the students (Englehart, 2013).

Two teaching strategies utilized by general education teachers in general education classrooms are observational learning and imitation. Imitation occurs when a student observes an adult or peer react to a situation through behaviors and words. The actions and behaviors are then replicated by the student in response to a similar environment or situation. When students continue to develop themselves with sequencing steps to complete a task and initiating interactions with others, this is called observational learning (Plavnick, J. & Hume, K., 2013). Autism spectrum disorder students have difficulty with relating to peers, initiating conversation, and with perspective taking (Autism Speaks, 2012; The American Psychiatric Association, 2013; DSM V, 2013).

Plavnick and Hume (2013) suggest engaging the student diagnose with ASD one-on-one when the teacher can in the classroom. In addition, since the student diagnosed with autism spectrum disorder lacks the skills to engage in observational learning, the teacher can offer the approach in steps. By identifying the outcome behavior, the teacher can aid the ASD student with understanding the necessary steps to achieve the desired behavior. By allowing the inclusion student to slowly gain the skills necessary to succeed, the student will be able to adjust more smoothly to the general education classroom. It is necessary for the teacher to use positive feedback and praise for the student to continue progressing.

**Middle School Professional School Counselors**

Professional school counselors guide and assist students with academic achievement, college and career options, as well as personal and social issues that are
presented from the pre-school age until the senior year of high school. The wide array of responsibilities a professional school counselor performs on a daily basis may include scheduling, consulting with school staff regarding academic or personal/social issues that arise with students, and helping students through the challenging time of middle school as the students pass from childhood to adolescence (ASCA, 2010).

The requirements to become a professional school counselor vary within countries and within states in the United States. In the United States, all fifty states require professional school counselors to obtain a state credential or license to practice in that state and a Master’s degree in school counseling or a related field. If a degree other than school counseling or a related field is obtained, additional coursework or internship hours, experience on the school site, may be required depending on the state of credentialing. In addition to the master’s degree, fifteen states also require on the job training or internship hours. The hours required vary from 100-700 hours depending on the state. Thirty-four states use examinations to assess each professional school counselor before exiting the school program (American Counseling Association, 2011).

Personal or social issues that arise in a students’ life may have an effect on the student’s success in school. Scheel and Gonzalez (2007) investigated self-efficacy in academics, purpose, and support through professional school counselors in 346 high school juniors. The student participants were asked to complete a questionnaire regarding their future plans which was used in conjunction with the academic self-efficacy scale in order to assess the student’s efficacy expectancy beliefs. Scheel and Gonzalez’s study showed that students achieved better academically and sought out help in school more often when the student displayed high self-efficacy in relation to their
academics. The personal feelings students have for themselves either helps or hinders their academic abilities.

Another study of 212 elementary professional school counselors asked participants to rank 26 academic, personal/social, and career national standards from “not important” to “very important”. Researchers found counselors report academic counseling equally as important as the social and emotional aspect of school counseling. (Barna & Brott, 2011). In order to address the academics of a student, the personal part of the students’ lives has to be in balance or the students must have healthy coping skills to deal with their personal life.

The tasks of the professional school counselor have been outlined by the school system for decades and gave the professional school counselor the title of guidance counselor. However, in recent years there has been a reform in the counseling field. Straying away from the guidance counselor years, professional school counselors are now asked to be agents of change; advocating for students and their individual needs in the classroom and with their peers. In fact, professional school counselors are taking advocating one step further by creating and implementing programs for individual student needs (Beale, 2003). In order to create a successful curriculum the professional school counselor should consult with other school personnel before, during, and after implementation. Professional school counselors consult with other support personnel, teachers, and administrators to help the school be as effective as possible and offer support from all areas of expertise. Even though counselors are trained to be advocates, teachers, administrators, parents, and even community leaders can offer their knowledge and unique skill sets to aid in student needs (Lee, 2001).
ASCA, or the American School Counselors Association, has ethical and legal standards for all professional school counselors to follow. A few guidelines pertinent to this graduate project are listed below:

“A.5.b. Help educate about and prevent personal and social concerns for all students within the school counselor’s scope of education and competence and make necessary referrals when the counseling needs are beyond the individual school counselor’s education and training. D.1.g. Assist in developing: (1) curricular and environmental conditions appropriate for the school and community; (2) educational procedures and programs to meet students’ developmental needs; (3) a systematic evaluation process for comprehensive, developmental, standards-based school counseling programs, services and personnel; and (4) a data-driven evaluation process guiding the comprehensive, developmental school counseling program and service delivery” (ASCA, 2010).

This professional development graduate project is designed to assist the professional school counselor by providing information regarding educating middle school general education teachers about the social deficits facing students diagnosed with ASD. By using a power point presentation, teachers will be given examples of what the ASD student’s behavior may look like. In addition, the project will ideally be implemented in consultation with a School Psychologist.

“C.3.a/b. Share the role of the school counseling program in ensuring data-driven academic, career/college and personal/social success competencies for every student, resulting in specific outcomes/indicators with all stakeholders. Broker services internal and external to the schools to help ensure every student receives
the benefits of a school counseling program and specific academic, career/college, and personal/social competencies” (ASCA, 2010).

This graduate thesis project is designed to provide a basic understanding of high functioning ASD and strategies to use in the classroom, thus the professional school counselor will be helping the success of the ASD student’s academic and person/social competencies. The project is designed for the professional school counselors to provide internal services to the general education teachers in order to aid in the personal/social and academic success of the full inclusion students diagnosed with ASD.

“E.2.a/b. Monitor and expand personal multicultural and social justice advocacy awareness, knowledge and skills. Professional school counselors strive for exemplary cultural competence by ensuring personal beliefs or values are not imposed on students or other stakeholders. Develop competencies in how prejudice, power, and various forms of oppression, such as ableism, ageism, classism, family-ism, genderism, heterosexism, immigration-ism, linguicism, racism, religion-ism, and sexism, affect self, students, and all stakeholders” (ASCA, 2010).

By providing facts to the general education teachers regarding the high functioning ASD population, the social stigmas and personal beliefs regarding with autism spectrum disorder will be challenged. The graduate thesis project will provide examples of how an ASD student reacts in a general education classroom. The presentation will give strategies to help combat the negative reactions of the ASD student.
“E.2.d/g. Affirm the multiple cultural and linguistic identities of every student and all stakeholders, Advocate for equitable school and school counseling program policies and practices for every student and all stakeholders including use of translators and bilingual/multilingual school counseling program materials that represent all languages used by families in the school community, and advocate for appropriate accommodations and accessibility for students with disabilities. Works as advocates and leaders in the school to create equity-based school counseling programs that help close any achievement opportunity and attainment gaps that deny all students the chance to pursue their educational goals” (ASCA, 2010).

The professional school counselor standards stated by ASCA urge professional school counselors to advocate for the equality of all students. The standards of the ASCA relate to the professional school counselor aiding the high functioning ASD student’s success both academically and socially by providing information and resources to the general education full inclusion teacher. This graduate thesis project will aid the full inclusion general education teacher by instructing teachers to the necessary accommodations for the full inclusion high functioning student diagnosed with ASD in order for the student to succeed academically and socially. The 21st century professional school counselor carries many roles in the school environment, however the end goal is to help students succeed. In order for middle school professional school counselors to assist in all students’ academic success, collaborating with teachers, administrators, and parents is imperative (Beale, 2003).
Professional Development

School-based professional developments, or in-service presentations, have been a standard in school settings since the early 1990’s. In the past, professional developments have centered on licensure requirements or fulfilling continuing education credits. Teachers self-reported only taking enough credits to fulfill requirements for their district or credential (Hill, 2009).

While the United States is beginning to provide professional developments regarding inclusion to the general education teachers, other countries around the world have made inclusion professional developments strongly suggested or mandatory. In the United States school districts are spending approximately 1-6% of district funds on teacher professional developments. However, often the presentations delivered to the general education teachers are provided at the district level only (Hertert, 1997). Recently many of the topics during teacher professional developments revolve around STEM: science, technology, engineering, and math. In fact, over one million dollars was spent between 2002 and 2007 by the United States Department of Education and the National Science Foundation to provide teacher in-service presentations on math and science (NSF, 2007). The governments in New Zealand and Scotland among other countries have funded, implemented, and assessed inclusion professional developments for effectiveness.

The government in Scotland has established standards for the competency of inclusion practices for general education teachers (Florian, 2012). Shortly after the addition of the inclusion standards, Scotland’s government developed and funded a research project regarding the effectiveness of the Inclusive Practice Project, a 36 week
professional development for beginning teachers during their first year of classroom teaching. The program focuses on social and educational inclusion for special education students. The researchers presented the Inclusive Practice Project to the teachers and offered the teachers the opportunity to provide suggestions to further relate the program to the general education teacher’s needs and understandings. Teachers recommended demonstrating the situations that arise in the classroom as dilemmas for the teachers, explicit links to inclusion, and reminding the audience of the potential of all children despite the disability the student has.

Professional developments are used to inform and educate teachers as practices change over time. In order to keep current on issues arising throughout school districts, in-service options are utilized and developing programs that target teacher’s weaknesses or worries can be the most effective (Hill, 2009). Aiding the general education teacher population about inclusion strategies will help teachers feel more confident with teaching the autism spectrum disorder population of students (Florian, 2012).

This literature review has provided information to show a need for a professional development given to the general education middle school teachers regarding full inclusion or mainstreamed students diagnosed with autism spectrum disorder. Students diagnosed with autism spectrum disorder have deficits in communication and flexibility. The characteristics of autism may make a full inclusion or mainstreamed classroom a difficult adjustment for the student and the general education teacher. When given self-surveys, general education teachers have asked for additional information on autism spectrum disorder traits and characteristics as well as how to assist the full inclusion students diagnosed with autism spectrum disorder with communication and behaviors.
Due to this information, a professional development needs to be created to assist the middle school general education teachers with full inclusion or mainstreamed students diagnosed with autism spectrum disorder.
Chapter III: Project Audience and Implementation Factors

Introduction

During my school counseling internship at one junior high school and one middle school in a suburban area of Los Angeles County, there were several general education teachers who came to the professional school counselor for guidance on how to effectively engage and manage full inclusion students, and the same questions from the same teachers were asked of the professional school counselor regarding the high functioning autistic student’s inflexible behavior or acting out in class. Recent research has shown general education teachers report needing additional education and resources to successfully implement behavior management strategies for the full inclusion autism spectrum disorder students (Sansosti & Sansosti, 2012; Teffs & Whitbread, 2009). The purpose of this graduate thesis project is to create a guide for a professional development presentation for middle school professional school counselors to utilize ideally in conjunction with a school psychologist, to deliver to middle school general education teachers. Professional school counselor standards guide the professional school counselor to assist or collaborate with other professionals in developing educational procedures and programs to meet the student’s developmental needs (ASCA, 2010). By utilizing resources from outside communities, collaborating with support staff on school campuses, and applying counseling knowledge, the professional school counselor provides information and support to the general education teachers regarding the full inclusion autism spectrum disorder students. The purpose of this graduate thesis project is to provide information and strategies to general education middle school teachers to
use regarding the mainstreamed or full inclusion high functioning autism spectrum disorder students in their classrooms.

Development of Project

While developing my graduate thesis project, I relied heavily on the information and studies discussed in Chapter 2. I found it important to have a slide in the power point presentation dedicated to myths and facts of with autism spectrum disorder. The results of Teffs and Whitbread’s (2009) study of 655 public school general education teachers showed 52.4% of the participant teachers requested additional information about the characteristics of autism spectrum disorder. In a similar study by Gao and Mager (2011) results of the survey provided to teachers displayed 52% of the participants requested additional information on characteristics of ASD.

Literature on autism spectrum disorders indicate the ASD individual has a lack of social interaction skills, the ASD individual has difficulty with non-verbal language, and the ASD individual requires additional prompts above the needs of their general education peers (Autism Speaks, 2012; The American Psychiatric Association, 2013; DSM V, 2013; Plavinick & Hume, 2013). The American Psychiatric Association (2013) as well as Autism Speaks (2012) indicates a need for verbal and/or non-verbal prompts to be delivered to the individual before changing activities. In a classroom there is a progression of moving from one subject or activity to another. When an ASD student is asked to stop an activity, the student may display frustration through tantrums and anger (American Psychiatric Association, 2013). The need to provide prompts to the ASD student was discussed throughout the professional development presentation.
Suggestions and examples were provided to give the general education teachers an understanding of what strategies may work with students diagnosed with ASD.

Autism spectrum disorder students also display difficulty with communication interactions (Autism Speaks, 2012; The American Psychiatric Association, 2013; DSM V, 2013). Students diagnosed with autism spectrum disorder may not understand non-verbal facial or body language. The need to be explicit in verbal language to the student diagnosed with ASD can help the student understand what the teacher’s expectations are of the student. Students diagnosed with autism spectrum disorder also focus intently on their preferred topic of interest, so conversations may be difficult for the student diagnosed with ASD as the natural progression of one topic to another is not displayed. In two recent studies over 70% of teachers participants requested additional support in the area of communication (Gao & Mager, 2011; Teffs & Whitbread, 2009). The professional development presentation of this graduate project provides examples, case scenarios, and strategies to utilize when assisting the student diagnosed with ASD with communication.

The negative behaviors that may be displayed in a classroom setting are discussed throughout the professional development presentation. Examples of behaviors that may occur are provided as well as discussing how the ASD student’s deficits in communication and flexibility can be related to negative behaviors. The review of the literature on autism spectrum disorders as well as teacher perceptions guided the material included in the professional development power point presentation.
Intended Audience

The intended audience for this professional development power point presentation is middle school professional school counselors who may have full inclusion or mainstreamed autism spectrum disorder students in their school. The presentation is developed for the middle school professional school counselor to present to the general education teachers regarding students diagnosed with full inclusion high functioning autism spectrum disorder.

Personal Qualifications

The professional to present this professional development would ideally be a professional school counselor in conjunction with the school psychologist. Professional school counselors are required to have completed a Master’s degree in the field of counseling or a related field.

Environment & Equipment

The Professional Development is designed to be held during a teacher in service time in either a meeting room or a multi-purpose room within the middle school. The room should have enough room to be able to hold the general education teachers comfortably. Provide snacks and drinks to the teachers before and after the presentation. The allotted time for this presentation is 60-90 minutes depending on additional information added, questions, and comments. On average, approximately 5-7 minutes should be spent per slide.

Necessary equipment is the projector or other smart board projecting device, a white surface to project the presentation on, power outlets for the projector, and the
presentation whether it is on a flash drive, laptop, or CD, and writing utensils for the survey.

**Project Outline**

The presentation slides are included in the *Appendix* portion of this project. The presenter(s) should read the facilitator’s guide thoroughly before beginning and customize it for their particular school setting and school needs.
Chapter IV: Summary

Summary

In this graduate project, the idea was introduced of the need for professional school counselors in conjunction with school psychologist to assist middle school general education teachers with strategies to help the full inclusion diagnosed autistic spectrum disorder students in the classroom. Chapter 2 reviewed the literature on professional school counselors, autistic students, pre-adolescence, in-service presentations, and middle school. In addition, chapter 2 also expanded on the education, training, and ethical standards of the professional school counselor. The development of the in-service was discussed in chapter 3. The intended audience, how the program was developed, the facilitator qualifications were discussed. The professional development presentation is designed to be given by a professional school counselor to the general education middle school teachers. The presentation is meant to assist the general education teachers with strategies to help the full inclusion high functioning autistic students in their classroom settings.

Evaluative Summary

An evaluation of this project was provided by three school counselors in Los Angeles County, in the Santa Clarita Valley: two professional school counselors are employed at a junior high school and the other professional school counselor is employed at a middle school.

All three middle school or junior high school counseling evaluators were given a survey regarding Behavior Strategies for use by Classroom Teachers to Assist Full Inclusion and Mainstreamed Middle School Students in the Classroom based on a Likert
Scale of 1-5. The ratings were labeled as follows: (1) Strongly Disagree, (2) Somewhat Disagree, (3) Neutral, (4) Somewhat Agree, (5) Strongly Agree. The survey asked the professional school counselors to respond to the following: (1) This presentation provides useful information for general education teachers regarding full inclusion autistic students; (2) This presentation provides useful strategies for general education teachers regarding full inclusion autistic students; (3) The length of the presentation is feasible to present to the general education teachers; (4) I would present this material to the general education teachers. There was also a place for the counselors to write in feedback or comments regarding the project. On question one, all three professional school counselors strongly agreed that this presentation provided useful strategies for general education teachers regarding full inclusion autistic students. Question two asked if the presentation provided useful strategies for general education teachers regarding full inclusion autistic students, and two counselors strongly agreed and one counselor somewhat agreed. Question three asked if the length of the presentation was feasible to present to the general education teachers, and two counselors strongly agreed and one counselor somewhat agreed. Question four, asked the counselors if they would present this material to the general education teachers, and all three counselors strongly agreed with question four.

Suggestions and feedback were also provided by all three counselors. Two professional school counselors suggested removing the words “are” or “will be” in referring to autistic behaviors and replace with “may be” as teachers may assume all behaviors mentioned apply to every autistic student. This was a valid suggestion and the changes were made to the curriculum. Another counselor suggested having a “buy-in”
slide for the general education teachers to feel like students diagnosed with ASD belong in general education classrooms and not always in special education rooms. Additional comments from all three counselors stated that this was highly useful information for general education teachers to learn about students diagnosed with ASD and how to manage behaviors that may be present in the general education classroom.

Suggestions from school counselors as well as teachers were to make sure the teacher did not feel attacked. To remedy this, the professional school counselor should have a good rapport with the general education teachers before providing this presentation. The general education teachers need to know the professional school counselor is on their side.

**Future Work/Research**

In the future I would like to present this graduate project to middle school general education teachers. Future research could be focused on the effectiveness of the strategies suggested in the presentation as teachers utilize the strategies. In addition, future presentations of this material could be modified for the elementary level general education teachers as well as the high school level general education teachers.

**Discussion**

After reading research studies, discussing the professional development with professional school counselors, as well as discussing this topic with general education teachers, I have become intently interested in the effectiveness of a presentation provided to the general education teachers by a professional school counselor on campus.

In addition, the power point should be given in a collaborative atmosphere. The professional school counselor will be able to give more information to the general
education teachers when giving the power point as a discussion rather than a lesson on how to run a classroom. The professional school counselor should emphasize that the presentation is to provide resources and strategies, backed up with research, to help with the full inclusion classroom.

The purpose of the Behavior Strategies for Use by Classroom Teachers to Assist Full Inclusion and Mainstreamed Middle School Students in the Classroom is to assist the middle school general education teacher with the influx of full inclusion or mainstreamed students into their classrooms. I believe with a calm, helpful demeanor from the professional school counselor, this presentation can help teachers, and promote collaboration between the professional school counselor and the teachers on campus.
References


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Appendix A

Facilitator’s Guide for the Professional Development

Dear Professional School Counselor,

Attached you will find a power point presentation for you to utilize on the topic of mainstreamed and full inclusion autism spectrum disorder students via conducting a professional development for general education middle school teachers. This presentation outlines common behaviors in autistic students, what behaviors may be demonstrated in the classroom, and what strategies teachers can utilize to best serve the high functioning autism spectrum disorder student in the full inclusion or mainstreamed general education classroom.

As the facilitator, you may wish to collaborate with your district school psychologist to add or remove any of the information suggested in this presentation in order to personalize the presentation to your school demographics. You will find the power point presentation outlined with the behavior an ASD student may display, what it looks like, and examples to utilize of strategies. On each page of the professional development you will find suggested Presenter’s Notes to aid you with discussion through the professional development presentation. Feel free to print out the strategies as handouts for the general education teachers to take with them and to utilize right away.

This presentation should take on average 60-90 minutes depending on time allotted for questions and comments. There is one survey provided here. You may choose to utilize this with your audience/participants at the beginning of the presentation and at the end of the presentation to measure baseline and outcome knowledge of autism spectrum disorder and classroom behavior management strategies.
There is a need for a professional development presentation for general education middle school teachers regarding full inclusion and mainstreamed students diagnosed with ASD. Research indicates that, general education teachers are asking for support in the areas of social skills, behavior, communication, and characteristics of autism spectrum disorder students. Each school and staff are unique, please feel free to adapt the presentation, scenarios, and examples to your school’s individual needs.
Survey

1. I know what autism spectrum disorder is.
   Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

2. Children with an autism spectrum disorder should not be in general education.
   Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

3. Children with an autism spectrum disorder are as intelligent as other students.
   Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

4. I know strategies to utilize with autism spectrum disorder students.
   Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

5. I feel confident in having an autism spectrum disorder student included in my classroom.
   Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

6. Comments:________________________________________________________

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
Appendix B

Professional Development

Presenter’s Notes - Slide 1

Behavior Strategies for use by Classroom Teachers to Assist Full Inclusion and Mainstreamed Middle School Students in the Classroom.

Hand out survey provided in the Facilitator’s Guide that you may use for baseline data on teacher knowledge regarding autistic middle school students and behavioral strategies to implement in the classroom.

Ask the teachers:

- What past experiences do you have with full inclusion or mainstreamed autistic students? Discuss with the person seated next to you and then report to the group.
  - Follow up questions:
    - Were your experiences positive or negative?
    - What did you find worked with the autism spectrum disorder student?
    - What did you find did not work with the autism spectrum disorder student?
WHAT YOU WILL LEARN IN THIS PROFESSIONAL DEVELOPMENT

- Behaviors of high functioning autistic students that may be present in middle school.
- What the behaviors look like in the classroom.
- How teachers can help full inclusion or mainstreamed autistic students adjust to the general education classroom.
- What interventions can be used in the classroom.

Presenter’s Notes - Slide 2

What You Will Learn in this Professional Development

- Read the objectives out loud or select a teacher to read them to the group.
- Relate experiences the teachers shared from previous slide, to objectives stated in this slide.
MYTHS ABOUT AUTISM SPECTRUM DISORDER CHILDREN AND ADOLESCENTS

- Myth: Autism spectrum disorder students need to be in special education.
  - Fact: “Modeling” is helpful for autism spectrum disorder students.
- Myth: Everyone with autism spectrum disorder needs the same strategies to succeed.
  - Fact: Every autism spectrum disorders student is an individual with unique needs.
- Myth: Autism is a childhood disease that the student will grow out of.
  - Fact: Autism is a neurological disease that will affect the individual for a lifetime. However, with interventions the symptoms can decrease over time.
- Myth: People with autism are intellectually disabled.
  - Fact: People with autism often have average to high IQ’s.

Presenter’s Notes - Slide 3

Myths About Autism Spectrum Disorder Children and Adolescents

Ask the teachers:

- What theories or beliefs have you heard about autism spectrum disorder?
- How might being in an inclusion classroom be of benefit to the ASD student?
  - Example: Social skills by modeling from their peers.
Social Deficits in Autistic Students

Utilize one of the following activities in order to have the teachers better understand the importance of interpreting body language:

- **Activity 1:** Ask the teachers to find a partner next to them. One partner is to close their eyes while the other partner needs to tell them a story about a vacation they once took. After this exercise, come back to together as a group and discuss the experiences of both teachers. Reflection questions:
  - Was it hard to understand the meaning of the story with his/her eyes closed? Was it hard to communicate when the other person was not making eye contact?

- **Activity 2:** Hand out small slips of paper with a subject written on it. Instruct the teachers to partner up. Instruct the teachers to only talk about the subject on their sheet of paper, even if their partner has another topic.
  - Example: One sheet of paper will say: “Dogs” and the other sheet of paper will say, “Hats”. Person 1 will start the conversation about dogs however, the second person can only talk about hats.
Presenter’s Notes - Slide 5

How Social Deficits Manifest in Middle School

- Read the information out loud to the teachers in the professional development or have a teacher read them to the group.
- Ask teachers:
  - How do your experiences from the activity on the previous slide activity illustrate how an autism spectrum disorder student would behave in these situations?
Strategies to Utilize with Students who have Social Deficits

Ask teachers:

- What strategies have you tried or do you think would work to combat the social deficits discussed on the previous slide?
- What is an example of structure for a typically un-structured activity and common social classroom activities?
  - Example: “During the next activity, you will need to stand up out of your chair, walk over to a classmate, and ask the question written on the paper I just handed you.”

Read the scenario and follow up question below to the teachers.

- Your students regularly play ‘Jeopardy’ as a study strategy when studying for tests. You have the rules printed on either on a piece of construction paper or you wrote the rules of the game on the board. What rules can be included to prompt the autism spectrum disorder student during this in class activity?
  - Example: Please raise your hand when you would like to answer the question. Please remain in your seat, sitting properly (hands to yourself, feet on the ground, head facing the front of the room).
Presenter’s Notes - Slide 7

Inflexibility and Change in Autistic Students

Ask the teachers:

- What situations have you experienced in regards to inflexibility with autism spectrum disorder students?
- What strategies have you tried when experiencing inflexibility in your autism spectrum disorder student?
WHAT INFLEXIBILITY LOOKS LIKE IN THE MIDDLE SCHOOL

Situations with flexibility that can cause confusion, frustration, tantrums, and anger in the classroom.

• Changes in the classroom schedule.
• When other students (or teacher) break the rules taught to the class.
• Transitioning from one activity to another without warning or prompts, especially if it is a preferred activity to the autism spectrum disorder student.

Presenter’s Notes - Slide 8

What Inflexibility Looks Like in the Middle School

Ask the teachers:

• What kinds of typical changes are made in the classroom schedule during the school day?

• What is an example of classroom behavior management strategies for general education students that might not work for autism spectrum disorder students?
  o Example: covering clock with “It’s time to learn”.

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Presenter’s Notes - Slide 9

Strategies for Teachers

Ask the teachers:

- Who has implemented some of these strategies whether for general education or full inclusion students?
- Have the strategies implemented shown success with the autism spectrum disorder student in the classroom?

Example of agenda for the day that teachers might post in the classroom:

- 8:30-9am English reading, 9-9:20 recess, etc.
Presenter’s Notes - Slide 10

Strategies for Teachers
Ask the teachers:

- What is an example of a verbal or non-verbal prompt or warning you can give to an autism spectrum disorder student in order to assist the student with changing an activity?
  - Example: “Richard, we are ending our math worksheet in 2 minutes. After the math worksheet, we will be working on correcting our English homework.”

Activity

- Ask the teachers to discuss the following scenario with one or two people seated next to them and then discuss as a group:
  - Scenario: Johnny’s favorite subject is math. During a timed test, he has not made it to the end of the worksheet and the buzzer is 30 seconds away from sounding. How can you, as Johnny’s teacher, help ease the anxiety he will feel by not finishing the test?
Presenter’s Notes - Slide 11

Behaviors that May Be Displayed in Autistic Middle School Students

Activity:

- Provide the case study below and have the teachers discuss within the group:
  - In the case above regarding Johnny and the math timed test, you try to prompt Johnny about the time he has left to complete the timed math test. However, Johnny does not finish and gets frustrated. He begins to hit his head with his fist over and over. What can you do to assist Johnny to manage his frustration?

  **Strategies:**

  - Talk to the student individually; do not call out his behavior in front of the class.
  - Offer a calm quiet place to cool down until he is ready to re-join the class. Give him the choice of staying in class or going to his calm down place.
  - When Johnny calms down, reward him with praise.
Presenter’s Notes - Slide 12

Why Negative Behaviors are Demonstrated in the Classroom

Ask the teachers:

- What situations in the classroom could cause the autism spectrum disorder student feel overwhelmed or stressed?
- How can the student be given choices in the classroom regarding activities or classwork without giving him/her special privileges over the rest of the class?

WHY NEGATIVE BEHAVIORS ARE DEMONSTRATED IN THE CLASSROOM

- Feeling overwhelmed or stressed.
  - This can happen when moving from one task to another without sufficient warning.
- The ASD student does not understand what the teacher or other students are implying through non-verbal and verbal communication.
  - This can apply to sarcasm, body language, facial expressions, etc.
- Rules are broken.
  - Societal rules or classroom rules are broken by the other students or by the teacher.

Strategies to Implement When Negative Behaviors Occur in the Classroom

Scenario:

- Billy is in your class and on the autism spectrum. You are currently teaching a math lesson and Billy is having difficulty grasping the material. You call across the classroom that he needs to take a break and go to his cool down place. His classmates giggle at this comment and Billy storms out of the classroom.
  - What strategies could have been used to avoid Billy’s outburst?
    - Example: A secret gesture established with Billy before class began. This could be a tap on the desk to discreetly alert Billy that he needs to take a break.
Summary of Behavior Strategies for use by Classroom Teachers to Assist Full Inclusion and Mainstreamed Middle School Students in the Classroom.

Ask teachers what was the most helpful information they learned from today’s professional development.
REFERENCEs


Presenter’s Notes - Slide 15

References

Hand out the survey to assess outcome knowledge gained after the presentation. Collect after teachers have filled out the survey.

- Thank teachers for their time and participation in the professional development.
- Ask for any additional questions.