# CSD 742 Autism Spectrum Disorders Fall Semester 2017 Mondays/Wednesdays 1:00-2:15 in CPS 024

# **Instructor Info**

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# Autism Spectrum Disorder



Retrieved from: http://www.aspergerssyndromeparent.com/images/pic-asdspectrum.gif

## **Course Description**

Although the term "autism" ("self-ism") was first used in Europe in the early 1900s, autism wasn't a diagnosis in the United States until the 1940s and was considered to be a psychiatric problem linked to schizophrenia. One of the first written descriptions of autism was in Leo Kanner's seminal 1943 paper in which he described five-year-old Donald.

## "He paid no attention to persons around him. When taken into a room, he completely disregarded the people and instantly went for objects, preferably those that could be spun...He gave no heed to the presence of other children but went about his favorite pastimes, walking off from the children if they were so bold as to join him."

Currently, 1 out of 68 children born in the U.S. are diagnosed with an autism spectrum disorder. Additionally, new diagnostic criteria were released in May 2013 edition of the DSM 5, which removed the labels of Pervasive Developmental Disorder-Not Otherwise Specified (PDD-NOS) and Asperger syndrome. Autism Spectrum Disorder (ASD) Level 1, 2, or 3 became the official diagnosis.

In this class you will discover the various characteristics of ASDs and how they affect communication, social interactions, family bonding, behavior, cognition, sensations/sensory integration, play, education, and employment. You will learn how to diagnose ASDs across the spectrum and throughout the lifespan. You will study various theoretical and clinical approaches to intervention, including evidence-based practices, as well as pseudoscience. Along the way, you will develop your critical thinking skills and practice, making sound evidence-based decision using internal evidence (client and clinical preferences and values) and external evidence (scientific research). Finally, you will be able to develop well-rounded intervention for a child or adult across the spectrum of autism. Each class will involve a variety of teaching and learning strategies including lecture, multi-media, small group discussion, debate, case studies, and other guided practice.



Retrieved from: http://scienceblogs.com/insole nce/2009/07/21/jennymccarthy-and-oprah-winfreycartoon/

Monday		Wednesday	
n/a		9/6	Course Overview
9/11 Mindset	The History of ASDs Prizant: Intro and Ch.1	9/13 Mindset	<i>Temple Grandin</i> movie Prizant: Ch. 8 & 9
9/18 Mindset	<i>Temple Grandin</i> movie Prizant: Ch. 10 & 11	9/20 Mindset	DSM-5 (on D2L) Prizant: Ch. 7
9/25 Mindset	Framing a Diagnosis D2L Readings	9/27 Mindset	Framing Intervention D2L Readings
10/2 Sensory-Motor	Prelock/McCauley: Ch. 6— Treating Challenging Behaviors Prizant: Ch. 4	10/4 Sensory- Motor	Attwood: Ch 10—Movement and Coordination; Ch. 11—Sensory Sensitivity Prizant: Ch. 5
10/9 Play	Prelock (D2L): Ch. 5— Understanding & Assessing the Play of Children with ASD <b>Case Study Part 1: Overview</b>	10/11 Play	Prelock (D2L): Ch. 10—Interventions to Support the Play of Children with ASD
10/16 Comm.	Pronouns and Prosody—D2L readings Prizant: Ch. 2	10/18 Comm.	Echolalia—D2L readings Debate 1: For/Against Autism=Disorder
10/23 Comm.	Joint Attention—D2L readings	10/25 Comm.	Prelock/McCauley: Ch. 4—Behavioral Intervention; Ch. 6—Pivotal Response <b>Debate 2: Behaviorism vs.</b> Naturalistic Intervention
10/30 Comm.	Prelock/McCauley: Ch. 4— Behavioral Intervention; Ch. 6— Pivotal Response	11/1 Comm.	Prelock/McCauley: Ch. 5—DIR; Ch. 8— Enhanced Milieu Debate 3: For/Against Autism in Media
11/6 Comm.	Prelock/McCauley: Ch. 5—DIR; Ch. 8—Enhanced Milieu	11/8 Comm.	Catch-Up Buffer Debate 4: For/Against Alternative Therapies Case Study Part 2: DX
11/13 Comm.	Ch. 10—Peer-Mediated Tx	11/15 Comm.	Ch. 14—Video Modeling Debate 5: For/Against Sensory Integration Therapy
11/21 Comm.	Attwood: Ch. 3—Social Understanding and Friendship; Ch. 5—Theory of Mind	11/23 ToM & Social Thinking	Prelock/McCauley: Ch. 13—Social Stories D2L Readings
11/27 ToM & Social Thinking	Social Thinking Intervention—D2L readings Prizant: Ch. 6	11/29 Aspergers	Attwood: Ch. 1—What is Asperger Syndrome? TPGTA: pp. 215-217; 219-221 D2L Readings
12/4 Aspergers	Attwood: Ch. 2—The Diagnosis	12/6 Aspergers	Attwood: Ch. 4—Teasing and Bullying; Ch. 7—Special Interests Prizant: Ch. 3
12/11 Aspergers 12/19	Attwood: Ch. 8—Language; Ch. 9— Cognitive Abilities <b>FINAL EXAM</b>	12/13 Aspergers	Attwood: Ch. 12—Life After School; Ch. 13Relationships
12:30-2:30	Case Study Part 3: TX		

# **Learning Outcomes**

Students will identify, define, and analyze DSM-5 characteristics of ASDs across the lifespan.

Students will develop an assessment and anticipate potential modifications to diagnostic materials, testing environment, and sensory input, as needed.

Students will interpret assessment information/data, differentially diagnose, and defend their analysis/conclusion.

Students will distinguish between various treatment approaches and their theoretical foundations, including pseudo-science and non-evidence based interventions.

Students will construct a treatment plan and justify their treatment approach and intervention techniques.

Students will identify potential areas of counseling specifically related to ASDs across the lifespan and the impact of ASDs on family members.

- 1. **Debate-**-15%: You will be on a team composed of 3-4 members and will engage in a debate with another team on a predetermined topic. Each team will have an opportunity to present their argument, oppose the other team's argument, and offer a final rebuttal and summary. Journal articles, current media, and other sources should be used to support your argument.
- 2. **Participation**--5%: There will be sporadic "check-ins" which may include written one-minute summaries, self-generated questions, reflections, etc.
- 3. **Case studies and video analysis**--15%: You will have an opportunity to complete brief case studies and video analyses.
- 4. **Cumulative project** (65%): This will be a semester-long project in three phases, in which you apply what you have learned to evaluate, diagnose, and develop a treatment plan for fictitious clients with varying levels of autism and at various life stages.
  - a. **Overview**--15%: You will identify basic information about three different case studies (e.g., characteristics of autism, specific language impairment, social impairments, etc.)
  - b. **Diagnosis**--25%: You will be assigned one of the three case studies to investigate more thoroughly and you will develop a diagnostic plan and provide justification for your decision.
  - c. **Intervention**-25%: You will continue with the same case study and develop a thorough and well-rounded intervention program considering the home, social, educational, and/or employment environments of the client.

## EXPECTATIONS

Students are expected to:

- Complete assigned readings before class.
- Come to class promptly and prepared to actively participate in discussion and in-class assignments.
- Answer questions asked by the instructor.
- Ask the instructor for clarification when needed.
- Display appropriate respect and courtesy to other students, guest lecturers, and instructor. (This includes sleeping in class, texting, packing up early, etc.)

The instructor is expected to:

- Be thoroughly prepared for class with handouts, questions, knowledge of assigned readings
- Have a solid rationale for why she is teaching the material
- Begin and end class on time
- Announce any changes to the syllabus during the semester, including date changes, in advance
- Answer any student questions. If I don't know the answer, I will find it out.
- Meet with students outside of class to discuss concerns or questions about the course requirements or the student's performance
- Treat all students with courtesy, have set office hours, provide constructive feedback, and return assignments efficiently.

## Policy for Late Assignments

#### **Disability Statement**

# Academic Misconduct

All assignments are due at the beginning of class. Unexcused late assignments turned by 5 p.m. on the due date will receive a penalty of minus 5 percentage points. Unexcused assignments turned in the following day (and only due to extenuating circumstances) will receive a penalty of minus 10 percentage points. Assignments will not be accepted after the second day and the student will receive a grade of zero.

I realize that life goes on while you are in school. You get sick, car accidents occur, etc. Excused late assignments will be allowed (without penalty) for illness, emergency, funerals, etc. In order for a late assignment to be excused, you must discuss this with me BEFORE it is due.

Between email and my office phone, which are listed at the top of this syllabus, as well as my cell phone (715-572-2548) there is no reason that you should not be able to contact me. You may be asked to provide documentation of excused reasons.

I will accommodate religious beliefs according to UWS 22.03 if you notify me within the first 3 weeks of the semester regarding specific dates that you will need to change course requirements. If you have a disability that requires accommodation so that you may fully participate in class activities or meet course requirements, please contact me within the first week of class. Refer to http://www.uwsp.edu/special/ disability/studentinfo.htm for further assistance.

# Please refer to http://www.uwsp.ed

http://www.uwsp.edu/admin/stua ffairs/rights/rightsChap14.pdf for university policy regarding academic honesty and integrity.

#### **EMERGENCIES**

In the event of a medical emergency, call 911 or use red emergency phone located in clinic hallways. Offer assistance if trained and willing to do so. Guide emergency responders to victim.

In the event of a tornado warning, proceed to CPS COMD Clinic hallways. Avoid wide-span rooms and buildings.

In the event of a fire alarm, evacuate the building in a calm manner. Meet in front of HEC building. Notify instructor or emergency command personnel of any missing individuals. Active Shooter – Run/Escape, Hide, Fight. If trapped hide, lock doors, turn off lights, spread out and remain quiet. Follow instructions of emergency responders.

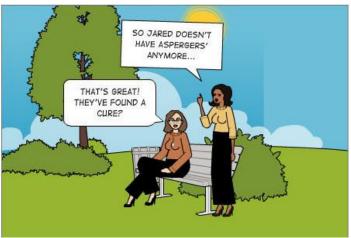
See UWSP Emergency Management Plan at <u>www.uwsp.edu/rmgt</u> for more details.

# The thing about being autistic is that you gradually get less and less autistic, because you keep learning; you keep learning how to behave. It's like being in a play; I'm always in a play. - Temple Grandin

## Requesting A Revision, Extra Credit, or Make-up Work to Improve a Grade on a Graded Assignment

If you earned a grade below 84% on any exam or assignment, and if you would like to improve your understanding of the concepts and perhaps improve your grade, you may propose a make-up assignment. Here are the procedures/guidelines:

- You must initiate this process, and you must propose/design the make-up assignment.
- <u>If you complete the make-up assignment satisfactorily</u>, your grade on the original assignment will be changed to a maximum of 84%.
- As soon as you decide you would like to propose a make-up assignment, I recommend that you inform me, either in person or over email or telephone.
- You must design your own make-up assignment, but it is subject to approval and/or modification by me. You must send me (via email) the tentative make-up assignment that you designed (referred to as your make-up assignment proposal), and you must send me this proposal <u>within one week</u> of the day I return or upload your graded assignment. If I do not receive your proposal within one week, then you may not complete a make-up assignment.
- When you submit your proposal for a make-up assignment, you must include a brief explanation of how/why your proposed assignment will allow you to learn the material better.
- I will review your proposal and notify you (typically within 2-3 business days of when I receive your proposal) if I will accept it, and/or if I will make any modifications, and/or if I will require you to make any modifications.
- I will inform you via email once your make-up assignment proposal is accepted and finalized.
- Once your make-up assignment <u>proposal</u> is accepted and finalized, you will have <u>one week</u> to complete the make-up assignment.
- The goal for a make-up assignment is to ensure that you learn the material thoroughly and meet the ASHA competency; therefore, your proposed make-up assignment should demonstrate that you understand the mistakes you made originally, and that you now thoroughly understand the material.



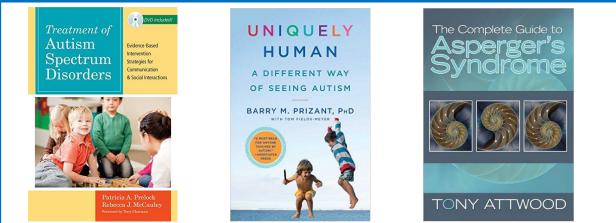


Retrieved from: http://www.ocslp.org/?tag=dsm-5

The following ASHA standards have been listed to serve as a formative assessment of the graduate students' knowledge and skills. If specific standards have not been met the professor and the student may develop a remediation plan as a means of meeting the deficit standard. If one of the learning activities is not completed at an entry-level competency, which in graduate school would be at a B- competency level the student will be required to develop and discuss with the instructor an assignment that will show their competencies or the instructor will develop an alternate learning activity to me the entry-level competency requirement. No additional points will be given for the repeated assignment.

Standard III-C Language and Cognition	Knowledge and Skill	Activities/ Evidence
Item- 2E.	Explain what is meant by implementing intervention taking a life-span perspective.	Readings Lecture Discussion Video analysis Cumulative project Case study analysis
Item- 2F.	Describe the different linguistic characteristics observed in individuals within the different categories of an autism spectrum disorder.	Readings Lecture Discussion Video analysis Cumulative project Case study analysis
Standard III-D Language and Cognition	Knowledge and Skill	Activities/ Evidence
Item- 2 Assessment	Develop an appropriate assessment plan including formal and informal methods	Readings Lecture Discussion Video analysis Cumulative project
Item- 3 Intervention	Develop an appropriate and functionally based intervention that is based on (EBP).	Readings Lecture Discussion Video analysis Cumulative project
Item- 3 Intervention	Compare and contrast different intervention approaches for individuals on the autism spectrum.	Readings Lecture Discussion Video analysis Debates
Standard IV-G1	Knowledge and Skill	Activities/ Evidence
Item- 1d.	Design assessment procedures based on the individual's language, social interaction and functional needs.	Readings Lecture Discussion Video analysis Cumulative project
Standard IV-G2 Item- 2a.	Knowledge and Skill Design a data collection system that appropriately measures achievable goals.	Learning Activities Readings Lecture Discussion Video analysis Cumulative project

I will be using ASHA's Document Guidelines for Speech-Language Pathologies in Diagnosis, Assessment, and Treatment of Autism Spectrum Disorders Across the Life Span and Knowledge and Skills Needed by Speech-Language Pathologist for Diagnosis, Assessment, and Treatment of Autism Spectrum Disorders Across the Life Span. These are summary documents that will provide students the awareness of their role and responsibilities as an SLP working with this complex disorder.



#### Purchase:

- Prelock, P.A., & McCauley, R. J. (2012). *Treatment of autism spectrum disorders: Evidence-based intervention strategies for communication and social interactions.* Towson, MD: Brookes Publishing.
- Prizant, B. M. (2016). *Uniquely human: A different way of seeing autism*. New York: Simon and Schuster.

#### **<u>E-Reserve</u>**:

• Attwood, T. (2008). *The complete guide to Asperger's syndrome*. London: Jessica Kingsley Publishers.

# **Electronics Policy**

The use of electronics in the classroom (phones, tablets, laptops, etc.) is strongly discouraged unless indicated for certain in-class projects and activities. You may be exempt from this policy with proper documentation from Disability Services or if you schedule a meeting with me and explain specifically how using electronics makes you a better learner and participant in the classroom (in the absence of a documented disability).

This means that for class discussion you will either need to print articles or take very thorough notes prior to class. You will need to bring the appropriate texts to class. If you have an e-book, let me know. For evidence-based support for this policy, refer to:

Fried, C. B. (2007). In-class laptop use and its effects on student learning. *Computers and Education*, doi: 10.1016/j.compedu.2006.09.006.

Mueller, P.A., & Oppenheimer, D. M. (2014). The pen is mightier than the keyboard: Advantages of longhand over laptop note taking. *Psychological Science, 25* (6), 1159-1168.

Turkle, S. (2011). *Alone together: Why we expect more from technology and less from each other.* New York: Basic Books.