The Aspect Comprehensive Approach for Education

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The Aspect Comprehensive Approach for Education (ACAE) is derived from over forty years’ experience of operating services for children with autism spectrum disorders (ASDs). The term ‘comprehensive’ refers to ASD specialised programs that include a skill development focus together with therapeutic interventions, delivered by a multi-disciplinary Learning Support Team (LST) that includes the school executive and parents (Herin & Simpson, 1998; Perry & Condillac, 2003). Intervention takes place in multiple settings including home, school and the community. The Aspect evidence-based approach recognises the value of referring to multiple sources of information including empirical research, theoretical papers, models of best practice, and autobiographical perspectives to provide high quality education for students with ASDs.

Why a comprehensive approach?

The nature of ASDs indicates that although there is a need for specialised educational intervention, a ‘one size fits all approach’ is not appropriate for the range of individual needs of all students at all times (Australian Advisory Board on Autism Spectrum Disorders, 2010). The ACAE acknowledges that within a set of standard procedures and core curriculum, different teaching tools, interventions and techniques may be used at different times during a child’s development. The approach also recognises the transactional and interactive nature of ASDs, whereby the learning environment, curriculum, and persons interacting with the individual all influence their development (Wetherby & Prizant, 2000).

Aims of the Aspect Comprehensive Approach for Education

The Aspect Comprehensive Approach for Education aims to:

- Develop a student’s skills to facilitate participation and ongoing education in the wider community
- Maximise each individual’s learning potential and adaptive functioning
- Develop students’ self-regulatory abilities and independence.

Principles

Five principles underpin the ACAE:

1. It is inclusive of all variants of autism spectrum disorders.
2. Interventions support all areas of the child’s development and are based on an assessment and evaluation of individual needs.
3. The approach is a positive supportive model rather than a deficit approach, acknowledging the learning style, strengths and interests of children with ASDs.
4. The approach involves co-operation and collaboration between parents, carers and professionals
5. The approach is based on ongoing reference to research and clinical literature and may therefore be inclusive of other interventions.

Elements of the Aspect Comprehensive Approach for Education

The Aspect Comprehensive Approach for Education includes a specialised curriculum and a focus on skills training underpinned by individual assessment and planning. The approach recognises the important role of transactional supports and includes environmental supports, structured learning, and positive behaviour supports. System supports include professional development, a multi-disciplinary team approach and family involvement. Aspect endorses a collaborative approach to transition to more inclusive educational placements that prepares both the students and the receiving school.
1. Individualised Planning

Aspect recognises the importance of Individual Plans (IPs) in promoting and maximizing the potential of every learner. Their importance has been highlighted in recent research (Iovanonne, Dunlap, & Kincaid, 2003; Rubin & Lennon, 2004; Siegel, 2003). The broadening of the concept of autism to a spectrum disorder involved recognition that a ‘one size fits all approach’ is not appropriate (Australian Advisory Board on Autism Spectrum Disorders, 2010). Individualised Plans (IPs) form the cornerstone of service provision across all Aspect educational services.

For schools, Individual Education Plans (IEPs) provide long- and short-term learning goals across curriculum areas according to the age and support needs of the students (National Autism Center, 2009). Long-term goals and outcomes, indicators of progress, assessments, strategies and teaching resources are documented on an IEP planning form.

Programs are based on developmental and/or functional assessment and may be implemented on a one to one basis or during class group activities. Functional programming refers to the development of functional skills for current and future learning needs. Functional programs complement developmental learning and consider self-care, leisure, and life skills. Functional planning (for example using a computer or cooking) starts early, with the aim of increasing independence and inclusion in the community, and gradually increases as students become older.

Research highlights the benefits of carefully documenting a child’s individual profile of strengths, support needs and response to intervention (National Autism Center, 2009). IEPs are developed collaboratively with parents and professionals, and are evaluated and modified according to ongoing data collection and regular review. IEP meetings are conducted annually, with formal evaluation and reporting of learning goals occurring at three monthly intervals and informal evaluation occurring daily and weekly. As students become older, there is an increased focus on person-centred planning and self-determination.

2. Curriculum

Four core curriculum competency areas inform the content of Aspect’s individual educational and class group programs. The term core competency refers to the core challenges and specialised learning needs of students with ASDs. For school-aged
children, core curriculum competencies are integrated into the New South Wales Board of Studies mainstream curriculum.

**Sensory:** Clinical and biographical reports describe atypical patterns of sensory processing, including hypo/hyper sensory responses/sensitivities and problems with filtering sensory input (Baranek, Parham, & Bodfish, 2005; Keane, 2004). Survey research has confirmed the elevated levels of atypical sensory responding in children with ASDs in comparison with their typically developing peers (Dunn, Saiter & Rinner, 2002; Taylay-Ongan & Wood, 2000). Program priorities include identification, assessment and remediation of sensory challenges. Support in the form of occupational therapy is provided as necessary. Strategies may include environmental modification, visually supported learning, increasing tolerance to sensory stimuli, and sensory related activities (Baranek, 2002; Baranek et al., 2005; Koegel, Openden, & Koegel, 2004).

**Social:** Overwhelming research evidence indicates atypical social development as the most defining aspect of ASDs. These difficulties commence early in life (Chawraska & Volkmar, 2005) and affect children across the spectrum (Carter, Ornstein Davis, Klin, & Volkmar, 2005). Aspect programs are informed by careful assessment of individual needs and transactional supports (Laurent & Rubin, 2004). Areas addressed may include recognition and expression of emotions, sharing attention, early interaction, play, social understanding, peer interaction, self-regulation and perspective taking (Baron-Cohen, 2000a; Dawson, Toth, Abbot, Osterling, Munson, Estes, & Liaw, 2004; Hobson, 2002; Jackson, Fein, Wolf, Jones, Hauck, Waterhouse, & Feinstein, 2003; Mundy & Stella, 2000). Aspect staff utilise a range of interventions including play, cognitive strategies, peer support, using strengths and interests, and social skills groups (Grandin, 1995; Keane, 2008; Rogers, 2000; Rubin & Lennon, 2004; Wolfberg, 2003).

**Communication:** In ASDs, communication is characterised by atypical semantics (meanings), pragmatics (social use), and paraverbal (facial expression, gesture and voice tone) communication (Howlin, 1998a; Prizant, 1983; Twatchman-Cullen, 1998; Wetherby & Prizant, 2000). In order to foster their students’ comprehension, staff may adjust their communication style, use modified facial expression or gesture, allow time for students to process information, and utilise clear, concise language. The Aspect approach to assessment and teaching recognises the range of communicative competencies: from individuals with little or no verbal communication...
to those who are highly verbal yet experience problems with abstract processing and social communication (Paul, 2005). A broad range of assessments and interventions are utilised to develop comprehension, expression and pragmatics.

**Learning & Behaviour:** Individuals with ASDs often have uneven patterns of cognitive development. They often display relative strengths in the areas of visual processing and/or rote memory skills and difficulties in terms of goal-directed behaviours, abstracting and manipulating information, and flexible thinking (Marans, Rubin, & Laurent, 2005; Ohta, 1987; Wing & Gould, 1979). Difficulties with organising information, skill generalisation, and problem solving (Hughes, 2001; Lawson, 2001; Sainsbury, 2000) arise from this atypical learning style. Further, ASDs are characterised by a tendency to circumscribed patterns of behaviour and activity (American Psychiatric Association, 2000). Programming focuses on developing supportive and structured learning environments, assessing learning strengths to assist curricula access, and developing problem solving abilities (Cumine et al., 1998; Janzen, 2003). As suggested in biographical accounts, particularly for young children, allowing the child to initially participate in activities around their areas of strength and interest may develop trust and facilitate positive learning outcomes (Koegal, Koegal, & Parks, 1995). In older children, special skills or interests may be developed as leisure or future vocational options (Grandin, 1996; Sainsbury, 2000).

**Key Learning Areas:** For school-aged children the core competencies are integrated with the New South Wales Board of Studies mainstream curriculum Key Learning Areas (KLAs). The KLAs provide the framework for the class program through which the IEPs are implemented. Teachers plan a class program based on the regular curricula, which includes English, mathematics, science and technology, human society and its environment (HSIE), personal development, health and physical education (PDHPE), and creative and practical arts. Content and delivery may be modified to enhance communication, social understanding, learning and behaviour. Individual goals based on the regular school curricula are developed where the class group program does not sufficiently address specific learning needs. Typical examples are for reading difficulties, receptive language or motor co-ordination problems.

3. **Environmental Supports**

ASDs have been increasingly conceptualised as a different way of processing and understanding rather than a set of deficits, with individuals having learning strengths
as well as difficulties (Baron-Cohen, 2000b; Grandin, 1992). Research highlights the importance of educational approaches modified for the needs of students with ASDs (Jordan, 2005). Environmental supports take into account ecological conditions, a structured approach to programming, and the provision of learning supports. Environmental supports provide a secure and comprehensible physical setting, provide choice-making opportunities, encourage independence, enhance social competence, and assist positive behaviour support (Iovannone et al., 2003).

Ecological considerations underpinning the Aspect approach draw on theoretical research on the learning style in autism, the TEACCH approach (Mesibov, Shea & Schopler, 2004), and biographical recollections of school-experience (e.g. Sainsbury, 2000). Ecological considerations are concerned with the physical layout of the room. This includes the use of clearly designated areas, seating arrangements and areas for access and non-access to equipment and resources. Audits of sensory factors such as lighting, heating, and acoustics are conducted (Batten, Corbett, Rosenblatt, Withers, & Yuille, 2006). This is in line with biographical accounts which recommend minimising distracters and the importance of a quiet, calm learning environment (Sainsbury, 2000).

The learning challenges of children with ASDs associated with difficulties in organisation and planning indicate a need for a structured yet flexible approach to program planning (Olley, 2005). Classroom strategies include provision of routines, graded change, and a planned and organised approach to program implementation.

The third element of a supportive learning environment involves the provision of learning supports to accommodate both group and individual needs. Examples of classroom learning supports include visual presentation of social rules and students’ work samples, auditory signals such as songs or a bell, and the use of timers to signal the end of free choice activities. Examples of individualised strategies include task segmentation for a student with concentration problems, screens for a student with poor sensory filtering, a visual outline of a class activity for a child with poor verbal comprehension, or clear verbal instructions for a child with good language and memory abilities. Low level supports, such as a homework diary for older students in high school satellite classes, are also used. The development of individualised supports is underpinned by observation and assessment, as research confirms that students with ASDs present with a range of learning strengths and support needs (Arick, Krug, Fullerton, Loss, & Falco, 2005).
4. Structured Teaching Approaches

With environmental considerations, curriculum content and individual and group planning in place, structured learning considers how programs are delivered. Structured learning involves systematic instruction and adaptive teaching approaches with the aim of organising information and experiences to match learner needs. This process involves the careful planning of content, strategies, data collection, teaching style, and the utilisation of learning strengths and interests.

Evidence from research and practice confirms the value of using rules, routines, and procedures to ensure that the day and the week have a predictable order with any changes forewarned and explained (Iovannone et al., 2003; Mesibov & Howley, 2003). Evidence suggests that a purely behavioural or a solely naturalistic approach to instruction is inadequate (Howlin, 1998a; Koegel, 2000). Therefore, a structured approach uses either or both of these for different learners or learning situations. Accordingly, teachers utilise different strategies according to need. Individual strategies may include task analysis, priming (preparing for an activity/experience), modelling, and reinforcement. Systematic instruction also involves data based programming, which facilitates identification of appropriate learning objectives, planning, and describing instructional procedures. Teaching is sequenced according to the learning stages of acquisition, practice, generalisation, and maintenance.

Aspect staff are encouraged to adopt a carefully considered, positive teaching style, to facilitate attending, responding, and engagement. To prepare for new or challenging activities techniques such as priming, verbal rehearsal, and social stories may be used (Dodd, 2005; Simpson, 2005). Care is also taken with instructional sequences (e.g. step-by-step approaches, providing scaffolds or framework for tasks) and assisting students with social perception. Response is monitored in situ, so that tasks and strategies can be adapted according to response.

5. Positive Behaviour Support

It is now generally accepted that problem behaviours in children with ASDs arise from underlying difficulties with sensory processing, communication, social competence, theory of mind, and executive functioning. Evidence of increased levels of anxiety in children with ASDs (Chalfant, Rapee, & Carroll, 2006; Janzen, 2003; Keane, 2008) reflects the daily challenges in socio-emotional relating, comprehension, communication and learning. Recent research also indicates
functioning may be further challenged by disordered development of emotional regulation (Laurent & Rubin, 2004). Aspect supports a positive approach to intervention for problem behaviour. Positive behaviour support (PBS) is underpinned by assessment and interventions that focus on skills development and replacement behaviours rather than simply attempting to eliminate particular problem behaviour (Horner, Carr, Strain, Rodd, & Reed, 2002). Aspect has a PBS policy that outlines key contexts for its implementation.

Positive behaviour support is delivered as part of a whole school approach along a continuum of intensity of support (Sugai & Horner, 2002). Each school has a Learning Support Team that makes decisions about behaviour strategies based on data collected and monitors the implementation of PBS strategies.

The primary or ‘universal’ level of behaviour support applies to all students, all staff, and all settings. The focus of the universal intervention is to prevent problems by defining and teaching consistent behavioural expectations across the school while also recognizing students for expected and appropriate behaviours. It also incorporates many good practice autism-specific teaching strategies outlined in the ACAE, such as environmental and communication supports and structured teaching.

The secondary ‘targeted’ intervention level provides additional support to those students who demonstrate patterns of behaviour that maintain despite primary supports (often around 15 per cent of students). Targeted interventions usually involve individual adaptations outlined in an individual’s learning support plan. Interventions might include specific curriculum or environmental adaptations, individualised sensory supports’ or the development of new behaviours such as social skills or emotional regulation skills; typically delivered in a small-group intervention format.

At the tertiary ‘intensive intervention’ level of support, students receive individualised support, which typically consists of a functional assessment and comprehensive
positive behaviour support plan. From the beginning of the development of these plans, the Aspect school Learning Support Team seeks the involvement of the student’s parents in developing the plan. A Behaviour Support Plan typically includes multiple interventions that prevent problem behaviour from occurring, provide for the teaching of appropriate replacement behaviours, and change the way others respond to appropriate and problem behaviours. Aspect also offers parent training on autism-specific positive behaviour support and monitors any behaviour support strategies that are ‘restricted practices’ through Aspect’s termly restricted practice panel.

6. Professional Development

Staff learning, development and support are a key feature of the ACAE. Advocates have suggested that educating students with ASDs requires an understanding of their social, communication, learning, and behavioural support needs (Mesibov & Shea, 1996; Simpson, De Boer-Ott, & Smith-Myles, 2003). The need for such knowledge is strongly supported in autobiographical accounts in which understanding teachers are suggested as being a critical factor in effective support (Sainsbury, 2000). Teachers have also reported that prior experience and knowledge of ASDs are beneficial for positive attitude, confidence and developing teaching strategies (LeBlanc, Richardson, & Burns, 2009; Robertson, Chamberlain & Kasari, 2003).

All new Aspect staff members are provided with induction training including ASD-specific courses and workshops. Initially, early intervention staff accompany experienced team members for several weeks prior to undertaking cases independently. Similarly, in schools new staff are provided with in situ guidance from experienced colleagues and Learning Support Team members. Online training is conducted for new staff in remote classes. It is suggested that ongoing and comprehensive training is essential for all staff (McGee & Morrier, 2005). Ongoing training is provided on professional development days, at Aspect staff conferences, and in seminars on ASD-specific topics presented during regular staff meetings.

Teachers’ knowledge of ASDs and adequate levels of support are critical factors in whichever educational setting students are placed (Batten et al., 2006; Jones, 2002; Mesibov & Shea, 1996). Teachers in Aspect satellite classes liaise with staff at the base school where they are also able to access specialist resources. Staff training and support is closely allied with a multidisciplinary approach with McGee & Morrier stating, “the skills of all their providers must cumulatively combine to create the capacity for a full range of intervention services (2005: 1133)".
7. Learning Support Team

The ACAE acknowledges the diverse nature of development and support needs of children with ASDs. The team approach endorsed by Aspect is supported by research and best practice (e.g. Jordan, 2001; Shulman, Zimin, & Mishori, 2001).

Cloninger (2004) summarises four common team models – multidisciplinary, interdisciplinary, transdisciplinary and collaborative – with the collaborative team considered the superior model. Aspect schools have developed their Learning Support Teams based around a collaborative model, in which each team member brings their own perspectives to the team but purposely allows these to be shaped and changed by working with other team members. There is a respect for and an open sharing of expertise which leads to a sense of trust, equality, shared responsibility and accountability as the team works towards agreed educational outcomes.

At Aspect schools, the Learning Support Team (LST) and early intervention team provide support for students, their families, and teachers. The Aspect Educational Outreach Service works closely with the speech and occupational therapists and psychologists on school LSTs. In schools, teachers’ aides are valuable members of the LST. A collaborative team approach between teachers and aides, with clear role designation and information sharing has been revealed to be an important factor to ensure positive outcomes for students (Robertson et al., 2003; Simpson et al., 2003).

8. Family involvement and support

Parents are acknowledged as the most stable, influential and valuable people in a child’s environment. Research demonstrates that family and child outcomes improve when direct service workers collaborate with parents and caregivers to determine and support child and family needs (Howlin, 1989b; Marcus et al., 2005; National Autism Center, 2009). The Aspect philosophy is underpinned by a high degree of family involvement in intervention planning and delivery. Key concepts include relationship attunement, emotional communication, strength building and supportive networks.

Providing education and training and building support networks is fundamental to family functioning and child development outcomes (Marcus et al., 2005; Wetherby & Woods, 2006). Aspect’s approach to family education and support ensures learning
and networking opportunities are available to all families. The Building Blocks® Early Intervention program delivers a range of consultancy and education support programs for families. Aspect schools organise regular training and support sessions and provide a family counsellor to assist in home-based support needs. Parents are involved with the development of IEPs, liaise daily with staff via their child’s communication book, and are able to meet or talk to staff as required.

Aspect’s Building Links™ and Recipe for Success™ programs provide workshops for families in different locations around New South Wales. The Aspect Educational Outreach, Diagnostic Assessment, and Behaviour Intervention Services provide individualised professional support and consultancy for parents. The Someone To Turn To™ program facilitates parent to parent support. Sibling camps offer support, provide information on ASDs and are a valuable opportunity to meet others who are siblings of children with ASDs.

9. **Supported Transition and Inclusion**

The Aspect philosophy endorses a model of service provision that focuses on inclusion in the general community. Supporting transition into more inclusive educational settings is therefore a key element of the ACAE.

Aspect recognises that in order for learning to be effective, skills should be generalised beyond the classroom and home and into the general community. When taught in natural settings, some targeted skills become more meaningful and have higher likelihood of generalising to real life situations. Community access programs facilitate functional programming, whether it is play development for young children, educational excursions for older children, or living skills for adolescents. Community access assists in overcoming fears and phobias, visiting places of interest, and preparing for future learning environments. Community access also provides opportunities to expand leisure activities and learn new skills such as a sport or using public transport.

The decision to transition a student from an Aspect school into a more inclusive educational setting is made by the staff of Aspect in consultation with the child’s family. Transition can be stressful for any student and for the student with autism can be particularly challenging. When a child shows indicators of readiness, strategies to prepare for transition are introduced. Strategies include a reduction of supports and prompts, an increase in unpredictability and an expectation of independent
functioning. All transitions involve careful, detailed and collaborative planning. Research indicates that successful transitions involve a collaborative approach that prepares both the child and receiving school (Keane, 2008). Aspect takes responsibility for the transition process in terms of both personnel and staff and will organise the initial preparation of the receiving school. The ACAE involves planned transition and follow-up support. Consultative support is provided to the receiving schools by the Aspect school for 12 months after the student has exited the Aspect school. After this period continued support is available from the Aspect Educational Outreach Team in negotiation with both parents and school personnel.

Summary

No single approach can meet the needs of all children with autism spectrum disorders. Research endorses the efficacy of individualised, comprehensive, educational intervention as the primary approach for children with ASDs. The Aspect Comprehensive Approach for Education forms the foundation for all Aspect educational services.
References


