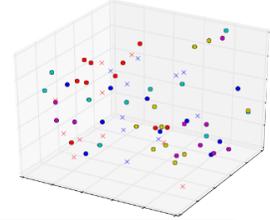


**What is Autism Spectrum Disorder (ASD)?**

Autism Spectrum Disorder is a neurodevelopmental disorder that impacts the way individuals communicate and interpret the environment. Individuals with ASD can experience challenges with social skills, repetitive behaviours, speech and nonverbal communication.



The term “spectrum” may suggest a linear presentation (e.g., less or more) while “constellation”<sup>1</sup> may better describe symptom variety and range. Ultimately, each person with ASD has unique dimensional strengths and differences.



**What are the causes and risk factors of ASD?**

There is no single known cause of ASD, and it affects individuals from every race, nationality, and socioeconomic status. Known risk factors, include<sup>2,3</sup>:

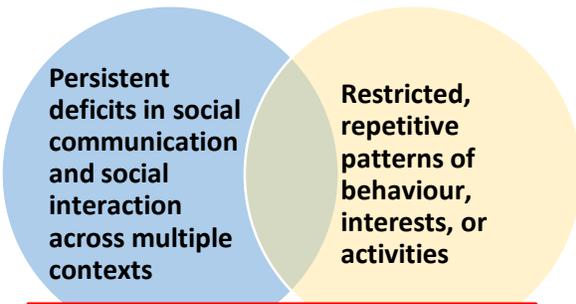
- Family history of ASD
- Older paternal age
- Pre-existing medical conditions (e.g., Fragile X Syndrome, Rett Syndrome)
- Extremely preterm babies (i.e., babies born before 26 weeks gestation)

Recent gender research<sup>3</sup> suggests that while male diagnosis is five times that of females, this may reflect research and criteria that has usually excluded females. A distinct female presentation<sup>4</sup> is emerging (e.g., fewer repetitive behaviours, masking).



**How is ASD diagnosed?**

Psychiatrists, psychologists, or pediatricians can diagnose ASD according to criteria outlined in the Diagnostic and Statistical Manual of Mental Disorders – Fifth Edition (DSM-5). The diagnostic process is usually a comprehensive, multi-disciplinary approach that involves gathering information through direct observations, information from both parents/guardians and school staff, as well as standardized assessment.



**DEFINING FEATURES OF ASD**

- ASD is characterized by **both** defining features
- Symptoms must be present in early development
- Reliable diagnosis is rare before the age of 3, when social behaviour differences surface
- Severity levels serve best as descriptors of the support required



### **How is ASD treated?**

**Early diagnosis and intervention** are most helpful for improving behaviour, skills, and communication; however, intervention at any age is beneficial and parents/caregivers should not feel pressure to “cure” or “normalize” children with ASD with early intervention.

As with the diagnostic process, a multi-disciplinary approach is key for supporting individuals with ASD in communication, adaptive behaviours, and social interaction.

### **How are children and teens with ASD supported at school?<sup>5</sup>**

#### Encourage parental/caregiver communication and involvement

- Parents/caregivers are experts in their child’s strengths, challenges, and interests and this information is crucial when planning for the success of students. Positive home/school communication allows for skills to be learned and reinforced at school and home.

#### Create an environment for learning

- All students benefit from a comfortable learning environment. Consider the size, space, and arrangement of the physical and visual objects in the student’s learning environment. Students with ASD can be hyper-sensitive to sensory stimulation, which can be distracting to their learning. Conversely, other students with ASD can be hypo-sensitive and will seek out sensory experiences.

#### Support transitions

- Some students with ASD struggle transitioning between environments, while others struggle moving from one task to another. Support transitions by incorporating visual timers and visual schedules, providing transition activities (e.g., “clean up time”), or giving verbal reminders.

#### Create an inclusive classroom

- All students, including diverse learners, benefit from opportunities to learn social and communication skills with same-aged peers in their natural learning environment.

#### Provide opportunities to build individual skills

- Some students with ASD may benefit from targeted small-group or individualized skill instruction. Focus skill instruction based on student input, if possible and provide opportunities for the student to practice their skills in everyday, natural settings to enhance generalization.

#### Incorporate high interest areas into learning

- Use the student’s interests, strengths, and areas of expertise as tools for teaching and provide opportunities for the student to teach about their area of interest and expertise.

1. See Caroline Hearst for origin of constellation model <https://www.autangel.org.uk/resources/>  
2. Autism spectrum disorder: Mayo clinic <https://www.mayoclinic.org/diseases-conditions/autism-spectrum-disorder/symptoms-causes/syc-20352928>  
3. Autism: A New Introduction to Psychological Theory and Current Debate (2019)  
4. Camouflage: The Hidden Lives of Autistic Women (2019)  
5. Reading Rockets: <https://www.readingrockets.org/article/supporting-students-autism-10-ideas-inclusive-classrooms>