Autism Spectrum Disorder in Learners with Blindness/Vision Impairments

Comparison of Characteristics (Revised January 2002)

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Learners with autism spectrum disorder and vision impairments will display a wide variation in skill levels. The assessment team will be responsible to select assessment tools that appropriately determine if the child has Autism Spectrum Disorder (ASD). For example, the team will want to ask:

- what are the child's strengths?'
- what are the child's present levels of educational performance?;
- what strategies have worked and not worked effectively with this child?;
- how does the child communicate?;
- how does the child interact with adults/peers?;
- are there behavior deficits or behavioral excesses?;
- what motivates this child to learn new information?;
- what motivates this child to attend?

The following charts may assist teams by describing characteristics of "typical" development, of development of children who are blind/vision impaired, and of children who have ASD and blindness/vision impairment (ASDVI). These charts highlight the four critical areas associated with ASD.

This information was originally published in RE:view in Summer, 1994. The authors updated this information in January, 2002. It is not meant to be exhaustive, nor meant to be used for identification. It can, however, be used to inform and direct the family and the rest of the team for an in-depth look at the possible identification of ASD in children who have a vision impairment.

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Impairments in Communication

Typical Development	Blind/Vision Impaired	ASDVI
Make cooing and gurgling sounds (3-6 months) Copy speech sounds (6-12 months)	Process of acquiring speech and language appears to be same for children with VI as it is with typical children, but the slower physical development, more restricted range of experiences, and lack of visual stimulation may cause the child to be slower in language development (Scholl, 1986)	Language develops slowly or not at all Development is frequently "splintered"; language development may or may not be consistent with typical developmental norms or sequences May show no interest in communicating
Much jargon with emotional content; Able to follow simple commands (18 months) Vocabulary of 150-300 words (24 months)	Echolalic-short duration If experiences are limited, language may be delayed but is not distorted	Exhibit concrete understanding and use of language; experience difficulty with generalizations Echolalic; difficulty breaking this pattern is common. The echolalia often leads to patterns of verbal perseveration with idiosyncratic meanings
	Responds appropriately to language requests; enjoys communication "give and take"	Experience difficulties initiating and engaging in meaningful conversations. The range of "topics of interest" are narrow. Have difficulty maintaining a topic chosen by others; exhibit limited or no conversational reciprocity
Understands most simple questions dealing with own environment and activities (36 months)	Vocabulary is built through concrete experiences Can experience difficulty with abstract	Exhibits use of words without attaching the usual meanings Use non-conventional or non-
Relates experiences so that they can be followed with reason	language because of limited concrete experiences May have pronoun reversals, but are brief	traditional behaviors as a form of communication (gestures, pulling) Long-term difficulties is using pronouns
May briefly exhibit pronoun reversals	in duration. Concept difficulties are common because	appropriately
Takes part in simple conversations (2-3 years)	of lack of visual model; once understood, concepts can be generalized	
	Language development usually follows developmental norms	

Typical Development	Blind/Vision Impaired	ASDVI
		Apparent lack of common sense may be overly active or very passive
		Experience difficulties with abstract concepts, often focus on "irrelevant" information; have literal translation of language; literal/concrete understanding of concepts makes generalizations difficult
		If verbal, may converse but focus on topic of perseverative interest

Impairments in Social Interactions

Typical Development	Blind/Vision Impaired	ASDVI
Responds to name (6-9 months)	Need to learn a world exists beyond reach; may exhibit social interest through changing or shifting posture (leaning, turning)	Appears not to hear, does not orient toward sound
Takes turns while playing with adult (e.g. actions, sounds, facial expressions) (6-12 months)	Engages in social give and take; seeks to share information/experiences with others	Limited social interests, if any Limited understanding of social give and take
Makes simple choices among toys Mimic another child's play (18-24 months)	Play is sometimes observed to be less "imaginative", and more concrete, because of the lack of visual model. Redirection of an activity is possible.	Play repetitively; toys often are not used for intended purpose
Often indulges in make- believe (48 months)	Because of limited visual references, may have difficulty in observing, organizing, and synthesizing the environment; imitative and make-believe play may be delayed, but can be specifically "taught". Requires a variety of opportunities to learn and to generalize; need feedback to understand and comprehend some social situations	Lack of spontaneous or imaginative play; doesn't initiate pretend play. Perseverative behavior is a problem, and redirection of activities can be difficult
Enjoys playing with other children (3-4 years)	Enjoys playing with other childrenInitiating interactions with adults and childrenShows social curiosity; are curious about their environment (e.g. may ask about who may be in the room, where a peer may be, etc)	 Prefers to spend time alone rather than with others; peer relationships are often distorted Difficulty initiating interaction Exhibits little social curiosity; may find interactions with others to be unpleasant
Able to occasionally use feelings to explain reasons (48 months)	Demonstrates empathy; able to comprehend another's feelings	May treat other people as objects; limited ability to understand another's feelings/emotions
Enjoys playing organized games with other children (5-6 years)	Enjoys playing organized games with other childrenDifficulty in observing, organizing, and synthesizing the environment; requires a variety of opportunities	Often are anxious and uncomfortable in and social situations; prefer to follow routines and rituals. Experience difficulties in adapting to change
Demonstrate empathy toward others	Demonstrates empathy; able to comprehend another's perspective	Not aware of other person's feelings, difficulty with perspective taking

Restricted, Repetitive, and Stereotyped Patterns of Behavior

Typical Development	Blind/Vision Impaired	ASDVI
Reach for a toy (3-6 months) Puts in and dumps from containers (12-18 months) Looks at storybook pictures with an adult (18-24 months)	Stereotypic behaviors (rocking, eye-poke) may occur in novel and unfamiliar situations; management of these behaviors can be accomplished with redirection into meaningful activities which provide sensory feedback; child learns to control these behaviors when older Interests may be limited due to limited exposure; demonstrates an interest in a variety of toys/objects once they are experienced Historically, stereotypic behaviors have been attributed to lack of stimulation of the vestibular system. These behaviors occur more in young children, and lessen as the child learns to interact with the environment	 Plays repetitively; toys are not used as intended May perseverate on specific feature of toy (spinning wheel on car), or engage in a repetitive action with toys/objects; Interruption of a favorite activity, or of a stimulatory motor behavior (hand flapping, rocking one foot to another) is often met with extreme resistance
Helps with simple tasks (2- 3 years) Follows two-step directions Uses materials and toys to make things (3-4 years)	Interest may be limited to toys/tasks/objects previously experienced; able to engage in a variety of activities with adults and peers Redirection of an activity is possible; response to changes is more easily possible as experiences occur	Highly restricted interests; experience difficulties in being redirected from high interest toys/objects Exhibits extreme interest with one part of an object, or one type of an object
Shifts attention from one person/item/activity to another	Exhibits typical flexibility in managing changes in routine	Challenging behaviors escalate when experiencing changes in routine or structure; demonstrate inflexibility when transitioning between activities Stereotypic behaviors occur throughout life, and are difficult to break Behaviors increase with anxiety and with stressful situations; they can be very difficult to redirect May perseverate on a single item, idea, or person; may demonstrate rigid performance of seemingly nonfunctional routine May show aggressive or violent behavior or injure self; may throw frequent tantrums for no apparent reason

Responses to Sensory Information

Typical Development	Blind/Vision Impaired	ASDVI
Turns head toward sounds (3-6 months)	Poor posture often seen due to lack of visual model	Unusual reactions to physical sensations, such as being overly sensitive to touch or under responsive to
Feeds self with spoon, drinks from a cup (12-18 months)	Interests may be restricted due to lack of vision; interests expand with experiences Little delay in motor development until	pain; sight, hearing, touch, pain, smell, taste may be affected to a lesser or greater degree
Moves body in time to music (18-24 months)	the onset of locomotion Child can be easily engaged	Unusual postures and hand movements are common; they can be very difficult to redirect
Puts on clothing with a little help (4-5 years)	Lack of visual stimulation, so child often creates own; usually can "redirect" the	Perseveration on various sensory stimuli is common
Jumps, runs, throws, climbs using good balance (3-4	stimulatory behavior	Tactile defensiveness is common, and
years) Tolerates normal range of	Uses residual senses to gain information	usually is not overcome with time Often appears not to hear or focus
touch, movement, sounds, smells		
Attends to relevant stimuli		