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Newsletter

West Virginia Autism Training Center at Marshall University

Summer 2008

News and Views, Summer 2008

West Virginia Autism Training Center

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The West Virginia Autism Training Center

www.marshall.edu/coe/atc

Summer 2008



From the Director

Barbara Becker-Cottrill, Ed.D.

Greetings to all of our West Virginia Autism Training Center (WV ATC) families, colleagues and friends. This new fiscal year promises to be an exciting one as we pre-

pare to expand our program. Yes, good news to share with everyone! The WV Legislature added an additional million dollars to our budget. The need was evident as the numbers of families seeking services continues to grow at higher than ever rates. We will be recruiting new education specialists who will work directly with families and their positive behavior support teams. We know we can significantly reduce the waiting list in the coming year. Our ultimate goal is to completely eliminate our waiting list so that no family, especially a family just receiving the diagnosis of an ASD for their child, has to wait for our services. With the understanding and support of our Senators and Delegates, we know we can achieve that goal.

In other news, we were excited to welcome a film crew to the WV ATC from Good Morning America at the end of March. They were putting together a story on students with Asperger Syndrome (AS) and heard about our College Program for Students with AS from several sources around the nation. They followed two of our students through their day and held many interviews. The national response to the segment was extremely positive. There were 63 comments posted to the GMA website. One viewer wrote, "I finished watching the story with a tear in my eye feeling that there is hope that my son CAN achieve all that he wants." Another wrote, "I pray that other schools will follow the example that Marshall has set forth." We are so proud to have developed a program where students who may need some extra supports can succeed and, indeed, achieve the goals they desire. Under the expert guidance of Program Coordinator, Marc Ellison, our program has served as a model of what is possible.

In closing, I want to express my sincerest thank you to Dr. Jennifer McFarland-Whisman for her exceptional work with the WV ATC for over 16 years. Dr. McFarland resigned from her position as the Associate Director of Training in February. But the good news is she continues to teach the online autism endorsement courses and provides consulting services. She is an exceptional professional and everyone at the WV ATC wishes her all the best.



MARSHALL UNIVERSITY Huntington, WV



William Brown with his pal, William Shakespeare

England and France: A Trip of a Lifetime

by William Brown, Self Advocate

A trip of a lifetime for many West Virginians was accomplished by 35 kids from Huntington and Charleston. Thirty-four were neurotypical kids. I was the only one with autism.

I was chosen from thousands to be a student ambassador through the People to People Ambassador Program and I had a lot to accomplish before the trip even began. To prepare for the trip, we had to write papers on the different sites that we were going to visit and on the news of England and France. The students also had to perform community service in order to go.

The biggest challenge was one that we had to overcome during almost each of our monthly 2-hour orientation meetings. This challenge was packing. Since we were limited to 1 carry-on bag with a limit of 10 lbs, one suitcase with a limit of 44 lbs, and length, width, and height restrictions on all luggage, I felt slightly uneasy on the days before we departed. In order to prepare for packing, we learned new ways to fold clothes to make more room for other necessities; what to pack and what not to pack, which piece of luggage to place which object in, and how much of what to pack. A fun way to learn is through games, and my two leaders from Huntington, Mrs. Susan Pauley and Mrs. Holly Stone, made a race to see which team could pack their pile into their suitcases the quickest and most efficiently.

When I left, I felt uneasiness and homesickness take hold of me, especially on the 7-hour plane ride from Philadelphia to London. We landed at about 4:00

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England and France:

A Trip of a Lifetime

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a.m. (Eastern Standard Time), but it was 9:00 a.m. London time. It turned out that it was not until day 2 that my jet lag, sensory issues, and two hours of sleep caught up with me. Try as I could to be optimistic, I failed. However, by day 4 of my journey, while I was in Stratfordupon-Avon, I was my old happy-That go-lucky self. would change days later on my unpleasant stay in a cold English medieval tent outside Warwick Castle. I was cold and my sleeping bag, winter coat, jeans, and pajamas couldn't help warm me up, so I had trouble going to sleep (that, and my tent mates stayed up until 2 a.m.). The next morning was particularly cold and only the prospect of a warm shower forced me out of bed.

The next time that I was confronted with another barrier was on the yacht across the English Channel. It shoved off at 11:30 p.m. and my delegation leaders didn't let us in our rooms until 11:45. I was exhausted, and I hoped to see a spacious bedroom like in our motels and hotels. I was disappointed and lost my temper at this cramped, 1 floor bed. 1 couch. 2 overhead beds, and a bathroom with more space and electrical outlets than the bedroom! I got 5 hours of sleep and I was cranky the next morning (another factor was probably the 1-hour time difference).

My final challenge was on my day of departure. I had to suffer through a 7-hour plane ride (actually, it was 1 hour). The time difference was 6 hours, so I passed the time watching 7 hours of movies, the History Channel, and 25 of Handel's symphonies, and I found that I left at 1 and landed at 2. And

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then we had a 1 hour plane ride to Charleston. Altogether, I was up literally 24 hours and fell asleep at home at 1:00 a.m. (Eastern Standard Time) and finally woke up at 11:30 a.m. the next day.

After seeing sights such as the Eiffel Tower, the London Eye, the Louvre, and the changing of the guard, I feel that I've grown mentally, spiritually, and physically. Next year, since I'm in People to People's Passport Club, and since I'm a People to People Alumni, I get to choose where I want to go. I hope I can go to Greece or Italy. I guess I'll just find out.

Overall, I found my trip to be one of the most rewarding experiences of my life. I learned a ton and grew in independence and the realization that I'm not ready to be totally independent... yet!

William completed the Autism Training Center's Family Focused Positive Behavior Support Program in 2002.

Autism

by Tara Ward, Mother

• Sad, confused, do not know what to do

• The doctors just told me the cold hard truth

• I did not believe them, not a one

• I did not believe that they were talking about MY son

• They said "It is autism, it is all in his head"

• When they told me the news, thought I was better off dead

• How was I going to teach this very special child?

• To love and to cherish his never ending love

• That cares more than anything for the people he loves



• His joys are my joys although they are at different times than other children

• But I do not know what kind of life it would be if I did not have him

• He brought joy, pain, and sadness right from the very start

• But when he first said his name at five, he tore my heart apart

• With great joy and gladness that I never thought would come

• With a special needs child, my life has just begun

 Walking hand in hand today through life, he teaches me some lessons

• How to forget the problems of the past, because life is just about the blessings

• We need to forget our problems and think about what we might have lost

• For if I had no son I would have to pay the cost of not know-ing how he would be

• With his compassion and his caring touch

 When I am sad he is there to kiss me and wipe my tears

• For now I know, after going down that road, a blessing is now at hand

• Although times will always be difficult and I might not understand

• How this came to be by God's loving hand

• I am glad to walk with him down life's frustrating road, and God as our guide to show us the right way to go

Continued on Page-2

Autism

Continued from Page 1

 Although he is not like other children and as we walk the road alone

• We will not be separated, for God knows the way to go

• To help us stay on the road together for the journey ahead is rough

And never one time did I say
 "No I had enough"

• For he is far too special as any life to me

• For he is a gift from God and a blessing to my family!

 I know things will not always be easy

For that I will always know

• That we can help each other to find the path to go

• For we may go it differently than any other child, but at least we go together, for his small accomplishments have made me proud

• To help him learn and to understand the cruel world together

• With his problems and behavior for which he cannot help

 As we walk the road together just me and my son as we lean on each other

• For there is no one that can help and understand the things that we have been through

But we continue in thanksgiving for God has made us new
I think back and wonder about my special son and the joys he

brought to my life
I would not have it any other

way because we are all on the journey we call life!



A Safe Haven To Travel To The Land of Sleepy Dreams

Trudi Hogg, Mother

This article was submitted by Tim vanWinden, an intern from Tasmania (see Tim's bio on page 13). It was written by a parent of a young child with Asperger Syndrome who lives in Tasmania, Australia.

My four and a half year old daughter has Asperger Syndrome and has always had difficulties with sleep, never really changing her sleep pattern from that of an unsettled newborn. Two weeks ago, this all changed over night and I would like to share our most unexpected "cure" with other parents who may be experiencing sleep difficulties with their child. Taleisha has always shown a need for calming sensory experiences such as covering herself with the cushions off the couch, wrapping her naked body in sarongs, sitting naked in a bucketful of wadding, rolling in ball pits and floating in water. She also loves confined spaces and has a shelf in a cupboard where she seeks solitude and also likes to climb inside the doona cover or make indoor "cubbies" where she can't see out and no-one can see in. Although darkness frightens her, if it is a situation of darkness that she has created herself, it is actually very calming for her. Her coping mechanisms are much more subtle than those of children who rock or hum, though just as necessary and effective. They are not just things she LIKES to do; these are behaviours she NEEDS to do.

I had been attending a Sleep Wise study run by Early Learning and I listened to a mother explaining how all her children slept together on a mattress on the floor because this way everyone got more sleep. I started thinking about Taleisha's bedroom which I had tried to make very pretty, incorporating her toys, her bed and a desk. She likes her room through the day but would refuse to sleep in there at night, saying she liked my bedroom and bed better. I thought of the way she chooses to lie in my bed, (sideways, upside down, diagonally) and how she likes to climb under the sheets to make contact with the wool underlay. I also thought of the layout of my bedroom. It really is just a room with a bed in it. With Taleisha's tendency to break down words into their literal meanings, I thought of the word "bedroom" and realized that, maybe in her mind, her bedroom should just be a bed and a room like mine.

So putting all these things together, I reminded myself that Taleisha does not do anything like other kids do so why should I be so frustrated by the fact that she doesn't sleep like other kids do - i.e. in her room and also for more than 3 hours straight! So I decided that we would make her bedroom a room for sleeping in – a room with a bed in it. Considering the positions she likes to sleep in, I asked her if she would prefer to have a great big bed on the floor. She said "yes", so I packed up her beautiful (expensive) bed into the back shed and put two single mattresses on the floor. I put sheep skin underlays on them. She said that she didn't want sheets, just to sleep on the sheep skin. Taleisha shows a preference for blue in everything and says it is her calm and safe color. I asked her if she would like to sleep "in blue." She said "yes" and I spent \$100 on blue material and created a four sided canopy with a draping roof to cover the mattresses and completely enclose her sleeping space in blue. She came with me and chose the fabric. I suggested some childish prints but she chose a plain blue pastel material saying "this is the one, mum." So home we went and rigged it all up. (I actually bought a pre-made mozzie net and just stitched the blue material to it).

That night I put the heater on in her room, she went to bed naked on the sheep skin, covered by a blue doona and a blue pillow, enclosed in her blue safety net. She called it her "safe haven that takes her to the land of sleepy



dreams." She went to sleep without me in the room, woke up after 3 and a half hours and settled straight away when I went in to talk to her. She slept through until morning and called from her bedroom "good morning Mum. I love my new bed." I was awake, but thought I was dreaming!!! The next night when bed time came she walked down the hallway into her room (I was expecting her to go into my room). She slept right through the night without waking at all, and then again the third night, and the fourth night. In the past two weeks she has mostly slept right through the night. She has woken a couple of nights but only once a night and settled very easily, never attempting or insisting to come into bed with me. I have been able to settle her just by calling out from my room. Up until the creation of her "safe haven to take her to the land of sleepy dreams," my daughter has only slept through the night about three times in her life, and never alone in her bed. I really cannot believe that our pattern of hourly wakings and night terrors (usually two to three times a week) has just stopped.

I know that I am very lucky that my daughter is able to talk to me about what frightens her and, when prompted, she is able to answer yes or no to the things that make her feel safe. Through observation of her behaviours when she is going about her own business, I am able to suggest things for her to help her when times get so tough that she can't even think for herself what is actually upsetting her and what she needs to make it STOP. By making suggestions to her about her bedroom, together we were able to create a space for her in which she feels completely safe and which she also feels she had complete control in creating. She told me what to do and I did it!!! This is the way she would like all things to be in her life (ha ha).

I have learned so much through this sudden change in our lifestyle and it has reminded me of numerous other ongoing difficulties we have encountered that have been overcome suddenly, just by finding the "right" solution for Taleisha. I wonder now why I tried for so long to make her sleep in a conventional manner. I am hoping this experience will always remind me in the future that my daughter is an individual with very specific needs and sensitivities, and that these are REAL needs, not just preferences. Neither her nor I are equipped to always know what these needs are, but together we have proven that, in time, we CAN work them out as long as we throw the "little book of bringing up kids" out the window.

The recent changes in Taleisha's undisturbed sleep pattern is having a compound effect on her daily achievements. She is wanting to be more physically active and she is trying to do a lot more things for herself such as dressing and other daily personal needs. I am so used to hearing her say, "oh I can't do it" in a whiny voice. Of late, I hear several times a day in a proud and proclamatory manner, "I CAN do it, I DID it." Music to my ears. My darling girl is perfect at being herself and happiest when she is allowed and assisted to be just that. The gratitude she has shown me for overcoming her fear of sleeping alone is well worth the 4 ½ years of sleepless nights. I'd do it all again to revisit the pride and self satisfaction she felt in those first three days of sleeping in her "new bed."

The Sleepwise Program is a program designed to promote positive sleep practices for young children with developmental delay. This program will be offered by the WV Autism Training Center starting in the Fall 2008.

Let your love for your little ones take over your senses



See as if you could not hear Listen as if you could not see Smell as if you could not taste or see Taste as if you could not see or feel Touch as if it were the only sense you had Love the learning Enjoy the difference Never give up!



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News & Views

From the Advisory Board Chair...

by Jeannie Elkins, Mother and Advisory Board Chair

The WV ATC Advisory Board's efforts to increase funding that would eliminate the waiting list for families in West Virginia for the Family Focus Positive Behavior Support Program of the WV Autism Training Center continue. Knowing the impact these services can have on the lives in individuals with autism and their families gives the Advisory Board the motivation we need to keep up the struggle.

I I watch my 24 year old son, Alan, eagerly prepare for work and take pride in the recognition and recent pay in-I crease he received for his fourth year of service to Boone Memorial Hospital. Having the support and opportunity needed throughout his life to become all that he can be has made the challenges of autism almost disappear from his L life. This reinforces my determination that we must do all we can to ensure that all individuals have the supports L needed to be included in their schools, communities, and eventually in the workforce.

I Alan first participated with the West Virginia Autism Training Center's Preschool Training Project in 1988. Alan and his family have continued to be involved with WV ATC through the years.

lowcase

by Charlotte Hays, Program Coordinator

High school junior, Dakota Drake (Rhodes) enjoys designing. His favorite creation is a state-of-the-art truck he named "Werewolf Evolution." He sketched out plans for it, developed a parts list, and then built a prototype from materials he found. Dakota even developed a promotional description for his creation (see below). Dakota is a current participant in the Autism Training Center's Family Focused Positive Behavior Support program.

WORLD – meet the planet's first ever Werewolf Evolution, the universe's most durable vehicle ever devised! The entire frame is made of titanium allov as is the driveshaft, running gears, and transmission. The hood, fenders, bumpers, and grille (the crumple zone) are made of stainless steel. As for the engine, it is nuclear. This vehicle is going to revolutionize the auto industry!



Dakota's Creation



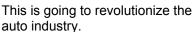
Dakota's dream is to see a full-scale version built by a manufacturer.

Brother Jessie (left) & Dakota (right)

Meet the Designer:

Name: Dakota Drake (Rhodes) Nickname: Wolf Favorite Food: Meat Favorite Game: Grand Theft Auto

- Favorite Movie: Any horror movie
- Interests: Rock collecting, designing, play station games, matchbox cars, trains, legos, and wolves
- Dream Vacation: To visit Alaska Dream Career: Inventing video games



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Dakota's Creation





Zachary Estel is a 6th grader at Paden City Elementary.



Zachary took a scuba diving class this summer and did fantastic. He is now a certified padi seal diver. He still needs to take other classes to be certified in open water but he and his Dad are going to do that together so they can dive together when they go to Cozumel next year. He was a real natural in the water and the instructor was very impressed. **Congratulations Zach** !



Congratulations Matt !

Matt Marino attended his high school prom and graduated this past Spring, 2007.

Matt completed the Autism Training Center's Family Focus Positive Behavior Support Program in 2004.

From the Dominion Post Newspaper:

Morgantown High School (MHS) SENIOR defies prediction, conquers autism

Robert Pride is graduating from MHS because he and his parents would not take "no" for an answer.

"It has been a trial, it's been tough," Bob Pride (*father*) said, "but the Lord has been with us."



Sammie Pride (*mother*) said, "there is hope for our children."

Congratulations Robert !



Robert completed the Autism Training Center's Family Focus Positive Behavior Support Program in 2005.

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Erin Lash & Brian Luchsinger after the game.

This past year was an exciting time for me as a mother. My youngest son, Nathanial, entered high school and was a starting forward for the junior varsity basketball team. Basketball season brought lots of new experiences, but none compared to the experience at the game with Greenbrier West High School in Greenbrier County.

As the team warmed up, a young man from the West team was busily running around the court shaking hands with all of Nathanial's team. The West coach came over to our coach and said that he had a wonderful player named Brian, the hand shaker.

He's NO Court Jester

by Erin Lash, Education Specialist, Sr.

Brian Luchsinger is an 18 year old young man who lives in Quinwood, Greenbrier County. He has played basketball since junior high with this being his first year on the West basketball team. Brian has Down Syndrome. He only plays home games but plays with great enthusiasm.

Brian's teacher, Shannon Gilkeson, said that Brian's IEP team decided to promote participation in a team sport. Ms. Gilkeson talked to the basketball coaches, who welcomed Brian without hesitation. The process began by having Brian attend various sporting events. Robin Palmer, the aide in Brian's classroom, said, "Brian is quite a fixture with everyone at school."

The game was quite competitive. It didn't matter who scored, Brian jumped up from his spot on the bench and cheered! Every time our team ran by he presented his hand for a high-five. Brian entered the game at the



guard position. His excitement was infectious. Brian jumped and waved to the crowd for a few seconds. On offense, the coach moved Brian down low in the corner outside the arc. Our boys played a relaxed defense on him; big mistake! Brian hit three 3-pointers in a row and finished the game with 9 points and 2 rebounds.

Basketball season brought with it a myriad of learning experiences: learning new skills, executing plays and teamwork. The greatest learning experience was the one of unconditional friendship, support and enthusiasm presented by Brian Luchsinger.

Brian plans to play baseball in the spring and to continue to work on his three point shots. Principal Randy Auvil said it best when he said, "Brian is just a regular jock."

*Note: While Brian doesn't have an ASD, his inspiring story shows us anything is possible.



Understanding Waiver

by Angela Bryson, Parent Coordinator

The Title XIX Waiver program is West Virginia's home and community-based service program for individuals who have mental retardation or developmental disabilities, including autism. This is a health care coverage program that reimburses for services to instruct and support individuals with diagnosed needs. Waiver provides services in natural settings (home, job, community) instead of in group homes or institutions.

Eligibility:

In order to be eligible for Waiver, an individual must meet certain criteria. These include having a diagnosis of mental retardation and/or a related condition and needing a level of care that would be provided by a group home or institution. The Mental Retardation and/or Developmental Disability (MR/DD) Waiver office determines the level of care based upon a medical evaluation, a psychological evaluation and other

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Understanding Waiver

Continued from Page-6

documentation. Additional documentation may also be required, such as a student's IEP, a social history, Birth-3 assessments or others.

Where to get an application:

Local Behavioral Health Center

Local Dept. of Health and Human Resources office

State MR/DD Waiver office: 304-558-0627

What is a Service Coordinator?

Your service coordinator is an employee of a local behavioral health center who manages and keeps track of your child's services. They work with you to develop an Individual Program Plan (IPP) for your child. They also schedule meetings, handle documentation and help develop your Waiver budget.

What is an Individual Program Plan (IPP)?

The IPP is a legally binding document outlining the services that the providers and service coordination agency have agreed to provide for your child. The IPP contains goals and objectives that the team has developed for your child. These goals should be descriptive, functional and measurable, and part of a positive behavior support program.

Each year, your child's team will develop a new IPP, which will be scheduled each year within a 30day window.

What services does Waiver provide?

There is a range of services that your child may receive, based

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upon his/her needs. Some of the services are:

Day Habilitation:

Day Habilitation services are programs that assist and support the individual with daily skill development. These programs are written by a Therapeutic Consultant, a person specially trained to develop these programs for your child. The programs are implemented by a support staff person (sometimes called a Direct Care Staff).

Nursing Services:

Based upon the medical need for skilled nursing, the individual may receive up to 24 hours of skilled nursing per day.

Professional Services:

Professional services are those provided by specialists in their particular areas. These may include physical therapy, occupational therapy, speech language therapy, dietary services by a registered dietician, or consultative services to a therapeutic consultant by a licensed psychologist.

Respite Services:

Respite is in-home care for your child so you can take a break, run errands or whatever you want to do (similar to child-care). There is an annual limit on the number of hours of respite that a family can request.

Transportation:

Mileage reimbursement is provided for **up to 700 miles per month.**

Other types of services may also be available, such as intensive support when an individual has severe or unmanageable behaviors that require an intense level of behavioral or psychiatric care or crisis services.

What if my child is denied Waiver?

The decision can be appealed, if the individual is denied waiver. If the appeal is not resolved by the State MR/DD Waiver Program coordinator to the satisfaction of the individual's family, they may appeal in writing to:

Bureau for Medical Services MR/DD Waiver Program 350 Capitol Street, Room 251 Charleston, WV 25301

The Bureau for Medical Services will arrange a hearing to resolve the matter.

Where can I find more information about Waiver?

You can read more about Waiver by going to <u>www.wvdhhr.org/</u> <u>bms</u> and clicking on behavioral health. You can also call 304-558-0627 and ask to speak to a Waiver technician.

References and Resources:

www.apshealthcare.com

www.cms.gov Waiver websites for WV and other states)

http://www.cms.hhs.gov/

independenceplus Centers for Medicaid and Medicaid Services

www.wvdhhr.org

WV ATC FAST FACTS

- * WV ATC serves the entire state of WV
- * WV ATC provides training in autism for approximately 1000 people annually
- * WV ATC services are at no cost to registered families
- * WV ATC, through Marshall University, provides autism teacher endorsement coursework

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On September 15, 2007, our family went to the most amazing camp. This particular weekend was set up to be Autistic Weekend at Victory Junction Gang Camp in Randleman, NC. Sixty-four families were chosen to come and visit their unique camp for one day on either Saturday or Sunday.

The camp is very bright and colorful and is centered on NAS-CAR because it was founded by NASCAR driver Kyle Petty and his wife, Pattie, to honor their late son, Adam. The camp is located on 75 acres and hosts campers ranging from 7-15 years old with serious illnesses or chronic medical conditions. The camp is free of charge to campers and their families. Year-round programming consists of week long summer sessions and specialized weekend programs the remainder of the year.

The camp offers activities such as horseback riding, fishing, archery, petting animals at Jessie's Horsepower Garage, playing in a magnificent tree house, arts and crafts, Ashburn/Davis Love III mini putt-putt, Michael Waltrip Sports



Victory Junction Gang Camp

by Chris Neely, Mother

and Recreational Center, and playing in Adam's Race Shop (where you can actually sit in and drive a simulated race car and actually put on race car drivers' outfits). The Silver Theatre was there for watching a movie, the Body Shop was there for medical attention, the Fuel Stop was available for food and drinks at anytime, Victory Lanes was there for bowling, and the Tony Stewart maze for hiding and finding each other. A humongous water tower and the fabulous Kyle Petty Charity Ride Aquatic Village were the highlights of the day. Cabins were available at all times if families needed to rest. Each child brought home a homemade afghan and teddy bear remember Victory to Junction. Also, crew chiefs were there to assist each child throughout the day. You didn't have to worry about the time-your crew chief took care of getting you to your destinations. We met families from Mis-



Preston at the gas pump

souri, Massachusetts, Virginia, North Carolina, South Carolina and West Virginia. We met so many nice people that volunteered their time to come and allow us to visit this wonderful place.

We hope your family will be able to visit this wonderful camp. It is so nice for our kids to go and have such a wonderful time in the presence of such wonderful people. Be sure to call or get online and check it out! You won't regret doing this. You will have the time of your lives and will receive such a blessing. Hope to see you there!

VictoryJunction.org

1-877-VJG-CAMP



Tori Stump likes to experiment with the camera. The sunlight was coming in the window when she took this picture. Tori completed the PBS Program at WV ATC in 2003.



Vijay Patnaik displays his artwork during the Artwall Gallery Exhibition held at the Jones C. Edwards Playhouse, MU. Vijay and his family have participated in the Family Focus Positive Behavior Support Process.











Tim vanWinden, Early Intervention Teacher

Tasmania Educator Completes Internship at WV ATC

Tim vanWinden recently completed an internship with WV ATC. WV ATC often serves as a site for interns and practicum students from West Virginia University and Marshall University Graduate College. What makes this situation unique is that Tim traveled all the way from Tasmania to complete his internship. Tim and his family lived in Huntington for approximately 12 weeks. Tim traveled with WV ATC staff throughout his stay. Tim chose WV ATC specifically to learn how to apply positive behavior support to families of individuals with autism. It was truly a joy having Tim on board. The staff all agreed we learned as much from Tim as he learned from us.



Donations to support the Autism Training Center can be made on-line at:

www.marshall.edu/coe/atc

News & Views

First Beckley Autism Walk May 26, 2008



Dr. Barbara Becker-Cottrill accepts a generous donation for the WV ATC from Tammie League, Beckley Walk Coordinator. (*Continued next column*)

Derek Puskas received the award for being the 5th Grade Student of the Quarter!

By Cindy Puskas, Parent



Derek Puskas, Mannington Middle School Marion County

Congratulations Derek !

Derek also participated in Math Field Day where he won 4th place in the competition.

He and his brother, Tyler, both had 4.0 grade averages as well.

"We are proud of all three of our sons."

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First Beckley Autism Walk Continued

Thank you to Tammy League and Park Middle School. The first annual Beckley Walk for Autism raised over \$4,000 for the WV ATC.





Help Find the Genetic Factors in ASD

The Miami Institute for Human Genomics (MIHG) is conducting research into the genetics of autism and related disorders. The WV ATC is an outreach site for this important study. The goal of these research efforts is to discover the genetic factors that contribute to the cause of autism and related disorders.

Please join us in our research efforts to find the gene(s) that contribute to autism spectrum disorders. In order to detect these genes, many families are needed to participate in this study.

For more information in the WV, OH and KY area, please contact Scott Short toll free at:

1-866-308-3032 or sshort@med.miami.edu



On upcoming trainings provided by WV ATC. See www.marshall.edu\coe\atc

The College Program for Students with Asperger Syndrome

Fourteen full-time students, each living on the campus of Marshall University, receive support from the Autism Training Center through its College Program for Students with Asperger Syndrome. With diverse backgrounds and interests, students arrive in Huntington from all over the country to continue their educational pursuits and goals. College Program staff provide

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person-centered supports that are based in the PBS model to enrolled students. Although highly individualized, supports tend to center on three main areas: (a) academic organization and mentoring; (b) social networking and training; and (c) assistance with basic living skills.

Please contact Marc Ellison, Program Coordinator, at 304-696-2332 or ellison13 @marshall.edu for application deadlines, an application packet or additional information.



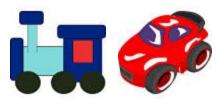
Marc Ellison, Coordinator of the College Program for Students with Asperger Syndrome

Rebecca Hansen, Assistant Coordinator of the College Program for Students with Asperger Syndrome



Play and Autism, Part I

by Erin Lash, Education Specialist, Sr.



Play is the universal language of childhood. It is through play that children learn to interact, relate to peers and establish friendships. Play is a learning, a social and an emotional process.

The diagnostic & statistical manual (DSM-IV) diagnostic criteria for autism include "a lack of spontaneous varied. makebelieve play or social initative play appropriate to the developmental level" as one of the indicators of autism. Some children with autism do not give any indication that they want to play with other children; this may indicate that they prefer to play alone or it may be that they do not have the social or communicative skills to seek out play interactions with others. Solitary play in children with autism is often accompanied by a strong resistance to those who attempt to participate or disrupt their patterns or rituals.

The play skills of children with autism serve as a window into their understanding. Toys and objects may be used in a rote or inflexible way. For example, a child with autism may be preoccupied with spinning the wheels of a toy car as opposed to playing with the car in a conventional manner. This type of repetitive play is indicative of the

child's limited understanding of how to use the toy creatively.

Because each of the following activities can be done the same way over and over again, children with autism may find them appealing. Even in videos, the same information can be seen in the same way repeatedly.

- Playing physical games
- Using a computer
- Watching videos
- Looking at books
- Completing puzzles
- Using small manipulatives

Teaching children with autism to play with peers is vital for their social success. The ability to be successful and to have meaningful social interactions depends upon the ability to understand the social behavior of our peers. Play allows all children to practice newly acquired skills in a safe supportive environment. Play is the norm in early childhood. A lack of play skills can contribute to social isolation. Play also provides the child with autism the opportunity to learn and practice social and communicative skills.

Predictability is an important factor in play. Research has shown that the predictability of interactions with adults serves to increase the communication effectiveness of children with autism. Peers are less likely to adapt their play and communication styles. However, peers can be taught to adapt their behavior to be play partners with the child with autism. Research has also shown that during play sessions the social responsiveness of children with autism improved when they were able to predict the sequence of events involved in the

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Play and Autism, Part I Continued from Page-10

play activity. When play is not predictable, children with autism tend to become disorganized in their social behavior.

For children with autism, play skills development cannot be left to chance. Play skills must be taught just like any other skill. It is important that the child's interests are taken into consideration when deciding what toys and activities to use as you design and implement a play skills program. Activities that are useful for building play skills include (Quill, 2000):

Exploratory toys/activities
 (e.g. cause-effect toys, bubbles)

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Physical toys and activities

 Manipulative toys (e.g. puzzles, peg boards)

- Constructive toys (e.g. blocks)
- Games (board games)
- Social games (Hide-and-
- Seek)

Children with autism have deficits in play skills that impact their social and communication skills, their cognitive and emotional development and their imagination and creativity. Play is a critical skill and building block for our children with autism.

In the second part of this series, I will explore designing play areas and planning for intervention.

References and Resources

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Websites: www.playsteps.com

www.centerforcreativeplay.org

K. J. My Brother with Autism

by Nikki Simmons Sister and Fairmont State University Student

I am 18 years old and learning new things everyday. One thing that has made an impact on my life, and my family's, is my brother K. J. We found out he had autism when he was two, which is when autistic traits usually show up in children. K. J's actions were very different from his twin sister, Emily. He started saying a few words then suddenly stopped and started humming and holding his ears. Autism is a learning disorder which has many different forms. Every child has their own symptoms and ways of learning.

Our family had teachers that came to our house to help us teach K. J. new skills by his way of learning. He also receives speech therapy. He is now four years old and starting to say a few words here and there.

This past year I took a biology class in high school. I had to do a project on a topic that had to do with the body. My topic was autism. I wanted to know more about this disorder since more and more people are getting it. I also wanted to make others aware of autism in my community. I put K. J's picture on my board and then, beside his, I put Emily's. I wanted to show people that you couldn't tell which one had autism by their appearance.

Nobody knows the cause of autism. There are many assumptions, which

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On-line Autism Endorsement Coursework

Marshall University offers two on-line courses needed for the autism teaching endorsement. Courses available include:

Summer 3 and Fall, 2008 CISP 527 Introduction to Autism

Summer 4, 2008 and Spring, 2009 CISP 662E, Instructional Characteristics of Autism

Also, available during the fall and spring semesters, CISP 664, Practicum in Autism.

To learn more: www.marshall.edu\coe\atc

To register: www.marshall.edu/registrar

K. J. My Brother with Autism

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lead to many debates. But no matter what caused autism, now I focus on dealing with it and helping my little brother make it through life. I hope everyone reading this learned a little something about autism, and will be cautious around those who have it.

K.J. completed the Autism Training Center's Positive Behavior Support Program in 2007.

A True Life Changing Experience

by Desiree Britton, Sister

Everyone has that one thing that changes them forever... well, mine is my youngest sister, Kaycee. At 2 $\frac{1}{2}$, she was diagnosed with autism. Immediately after her diagnosis, her journey towards recovery began.

On February 16th, 2006, Kaycee received a score of 115 on the Gilliam Autism Rating Scale (G.A.R.S.), which indicated severe autism. Kaycee's biggest hurdles to overcome were things like visual stemming, spinning, toe walking, lack of eye



Kaycee (left) and her sister Maci (right)

Nikki's high school biology project

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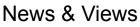
contact, the inability to do hand gestures, and to respond to her own name. Kaycee preferred to be alone and play by herself as opposed to having a play mate. It seemed like she had her own little world. In reality, the only obvious thing to do was to get her the help that she needed.

She immediately began a free in-home therapy service for special needs children known as West Virginia Birth to Three They offer occupa-Program. tional, speech, and physical therapy, at no cost, until the age of However, when Kaycee three. turned three, she was no longer eligible for the Birth to Three program so we sought help through Therapy Ser-There, she receives ocvices. cupational therapy once a week, speech twice a week, and physical therapy once a week. Although therapy plays a big part in recovery, she needed to have as normal a childhood as possible. Kaycee also needed to build relationships with others, so my parents signed her up for Gymnastic/Jazz/Ballet classes, the summer reading program at the Doddridge County Library, Therapy Services summer day camp, and public preschool, which she attends three days a week. She also started working with the WV Autism Training Center.

With everyone's help, Kaycee now responds to her own name, has excellent eye contact, waves hello and good-bye, and even plays with others. Fourteen months later, it was time for Kaycee's re-evaluation. As a result of her hard work, her G.A.R.S. dropped from a score of 115 to a score of 68! This score indicates that my sister no longer met the criteria for autism. She went from a diagnosis of severe autism to PDD-NOS. (Pervasive Developmental Disorder. Not Otherwise Specified).

Being a teenager myself, I'll admit that it is difficult doing the things that typical teenagers do when there is an appointment on the schedule almost everyday. However, I just want everyone to know that no matter how hard it is having a special needs sibling ... I wouldn't change mine for the world. When I look at Kaycee I don't see her labels or diagnosis, I see her. I see my little sister that I love with all of my heart and to me she is far more important than any football game or shopping trip could ever be.

Kaycee is currently participating in the Family Focus Positive Behavior Support Program with the WV Autism Training Center.



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Seventh Annual Autism Awareness Event

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The seventh annual 5K Walk/ 5K Run/ 25 Mile BikeTour sponsored by (HAAS) Huntington Area Autism Society, Autism Services Center, and the WV Autism Training Center was a huge success. The proceeds from this event are divided by each of the sponsoring agencies and are used for education, training and other services for individuals with autism and their families. Thanks to Elaine Harvey, Walk Committee Chair, and everyone on the committee for their hard work in making this the biggest walk event yet! The WV ATC Walk Committee representatives were Gloria Sage, Program Coordinator Senior; Angela Bryson, Parent Support Coordinator; and Ivan Swanson, Educational Specialist. Mark your calendar for April 25, 2009, for next year's walk. Don't miss this exciting autism event!



Don't Miss These Upcoming Events

Association for Behavior

Analysis 34th Annual Convention May 23-27, 2008 Chicago, IL

Autism Society of America

39th National Conference and Exposition on Autism Spectrum Disorders July 9-12, 2008 Orlando, FL

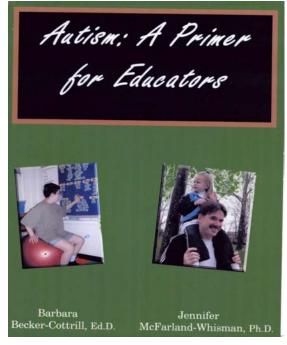
NATTAP Conference (Network of Autism Training & Technical Assistance Programs) 2nd Annual NATTAP Conference November 19-21, 2008 Columbus, OH

For more information on these events: www.marshall.edu/coe/atc



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