Asperger’s Syndrome
By Tony Attwood

Characteristics of Asperger’s Syndrome:

1. Do not seem able to read people’s body language.
2. Intense fascination with special interests such as transportation, animals or science.
3. The child may have a remarkable long-term memory, exceptional concentration when engaged in their special interest and have an original method of problem solving.
4. In contrast there can be a lack of motivation and attention for activities that would enthral the others in a class, assessments that indicate specific learning difficulties, and motor clumsiness.
5. There may also be some concern that the child is socially withdrawn in the classroom, playground, and prone to teasing by other children.
6. Both teachers and parents agree that this child who looks normal and has normal intellectual ability, for some inexplicable reason does not seem able to understand and relate to their people at the level one would expect for their age.
7. They often seem to lack what could be called social common sense.
8. Asperger’s Syndrome is not caused by emotional trauma, neglect or failing to love a child. The research studies have clearly established that Asperger’s Syndrome is a developmental disorder due to a dysfunction of specific structures and systems in the brain. These structures may not have fully developed due to chromosomal abnormalities.
9. Asperger’s Syndrome is considered as part of the autistic continuum or spectrum and there is one language disorder that borders or overlaps this continuum.
10. It is also important to recognize that the child with Asperger’s Syndrome does not simply have a mild form of autism, but a different expression of the condition.
11. The major source of stress in life for the person with Asperger’s Syndrome is social contact, and increased stress generally leads to anxiety disorders and depression.
12. One of the features of Asperger’s Syndrome is a difficulty understanding the thoughts of others. A consequence can be to falsely attribute malicious intent. The incident may have been an accident but interpreted as personal and intentional.
13. Another feature of Asperger’s Syndrome is delayed emotional maturity.
14. In a nutshell: “a child with Asperger’s Syndrome has a neurological condition which means that they are learning how to socialize and understand the thoughts and feelings of other people, have difficulty with a natural conversation, and can develop an intense fascination in a particular area of interest and be a little clumsy. These problems are best described as a combination of developmental delay and an unusual profile of abilities. Over time the child improves.”
15. Other qualities of personality in a child with Asperger’s Syndrome include being honest, loyal, reliable, and forthright and having a strong moral code and sense of justice. Their cognitive qualities include an exceptional memory, enthusiasm and knowledge about their special interest, an original way of thinking, good imagination and remarkable ability to think using pictures.
16. It is important to exercise discretion with such confidential information!
Main Clinical Features:

1. Lack of empathy
2. Naïve, inappropriate, one-sided interaction
3. Little or no ability to form friendships
4. Pedantic, repetitive speech
5. Poor non-verbal communication
6. Intense absorption in certain subjects
7. Clumsy and ill-coordinated movements and odd postures.

Social Behavior

1. Being detached from or having difficulty sensing the feelings of others; not looking at others; the inability to ‘give messages with their eyes’; and coming too close to others. Young children are less aware of the concept of personal space, and when this is encroached, the degree of discomfort.
2. When involved in joint play, there can be a tendency to impose or dictate the activity. Social contact is tolerated as long as the other children play their game according to their rules. Sometimes social interaction is avoided not simply because of lack of social play skills, but because of a desire to have complete control over the activity.
3. To include other children is to risk an alternative script, interpretation or conclusion – that is, you have to share and cope with different ideas. The child is not interested in doing the activities other children want to do and is not inclined to explain what they are doing.
4. They often prefer to be left alone to continue their activity uninterrupted.
5. There is a strong preference to interact with adults who are far more interesting, knowledgeable and more tolerant and accommodating of their lack of social awareness.
6. Older children become aware of their isolation and, in time, are genuinely motivated to socialize with other children of their age. However, it becomes apparent that their social play skills are immature and rigid and other children often rebuff them.
7. Eye contact breaks their concentration. There is also a failure to comprehend that the eyes convey information on a person’s mental state or feelings. Clearly, the child with Asperger’s syndrome needs to learn the importance of looking at the face and eyes of the other person, not just locate them but to recognize and respond to the subtle cues given in facial expressions. The person may eventually learn when and how to use eye contact, but some only learn to make the attribute less obvious.
8. Their manner can be misperceived as aggressive, aloof or indifferent and this can be a source of anxiety, especially for adults with Asperger’s Syndrome.
9. A common feature of Asperger’s Syndrome is a difficulty with self-disclosure, that is, talking about one’s inner feelings. The child may clearly be upset but does not have the ability or the words to explain their feelings. A parent is left frustrated that they do not know why the child the child has such obvious anguish, and is therefore unable to provide appropriate sympathy and guidance.
Codes of Conduct

1. The child of Asperger’s Syndrome does not seem to be aware of the unwritten rules of social conduct and will inadvertently say or do things that may offend or annoy other people. (I.e. They may observe loudly on the crookedness of other person’s teeth.)

2. Other children are determined to bend or break the rules, but the child with Asperger’s Syndrome is intent on enforcing them.

3. The child may appear ill-mannered; for example a child trying to get his mother’s attention said, ‘Hey you!’ Apparently unaware of more appropriate means of addressing his mother in public. The child, being impulsive and not aware of the consequences, says the first thing that came into their mind.

4. It is essential that other people understand that the child is not being rude, but did not know a more tactful alternative or appreciate the effect on other people.

5. What can a teacher do?

   1. Use other children as cues to indicate what to do. The child may be disruptive or intrusive as they are not aware of the codes of conduct for the classroom. When errors occur, remember to ask the child to first look at what the other children are doing – for example, sitting still, working silently or waiting in an orderly line. Inform the child that what they must do is observe the other children and copy what they are doing; assuming what they are doing is appropriate.

   2. Encourage cooperative games. There is a range of classroom activities that involve small groups of children working as a team. The child may need supervision and guidance on turn taking, allowing others a first opportunity and incorporating their suggestions.

   3. Model how to relate to the child. Other children in the class are often unsure how to react to the child’s unusual social behavior. They will look to the teacher as their first model. Therefore it is essential that the teacher demonstrate tolerance, tuition in social skills and encouragement, as their approach will be amplified within the classroom. It is also important to recognize and acclaim occasions when classmates are particularly supportive.

   4. Explain alternative means of seeking help. The young child can consider the teacher as the only source of knowledge and assistance. It is important to explain that when a problem arises, help can be requested and obtained from other children rather than always referring to the teacher.

   5. Encourage prospective friendships. Children in the classroom have their own personality and it may take considerable time for the child with Asperger’s Syndrome to learn how to interact with each one. It may help initially to identify and encourage interaction with a restricted number of children who are keen to help the child learn how to play with them. They may become their guardians when teased or bullied by other children. They are likely to include them in their games, act as their advocate in the classroom, and remind or instruct the person on what to-do or say when the teacher is not available. It is remarkable how supportive and tolerant some young children can be.

6. Provide supervision at break times and in the playground. For most ordinary children, the best time in the school day is free play in the playground. However, a lack of
structure and supervision and an atmosphere of intense socializing and noise are often not enjoyable for the child with Asperger’s Syndrome. At this time they are least skilled and most vulnerable. They playground supervisors will need to know the difficulties faced by the child and encourage their inclusion or respect their need for solitude. The person may also be vulnerable while traveling on transport to and from school and need supervision during these times.

7. **Be aware of two characters.** The child may be very conscious of the necessity to follow the codes of conduct in the classroom and try to be inconspicuous and behave like other children. This pressure to conform and retain self-control can lead to enormous emotions tension, which, like a compressed spring, is release when the child reaches home. There the child is a different character, almost a Jekyll and Hyde. This is a feature of some children with Asperger’s Syndrome and not necessarily an indication of the parents being unable to manage their child. It will help for the classroom teacher to have a range of relaxing or solitary activities for the child just before they return home. Parents may also consider a period of relaxation or energetic activities when the child some home to dissolve ether tension from a long day at school.

8. **Teacher aid time.** As many of the skills outlined in this book are rarely taught as specific component so the school curriculum, it is essential that the young child with Asperger’s Syndrome has access to a teacher aid to facilitate individual and small group tuition to improve social behavior. The amount of hours necessary depends on the child, but the aide will require guidance on the nature of Asperger’s Syndrome and remedial programs.

9. **There is also the problem of other children taking advantage of their naivety.** It is important that teachers are aware that there may be no mischievous intent and ask the child, “Did anyone tell you to do this?” before considering punishment.

10. **Ask the child to repeat aloud your instruction if you suspect your speech was perceived as unintelligible.**

11. A common dilemma faced by parents and teachers is the **child’s lack of motivation** for any activity they suggest. However, the child has enormous motivation and attention when engaged in their special interest. The strategy here is to incorporate the interest in the activity that is non-motivating or perceived as boring. Also, the child can gain access to the special interest by complying.

12. Several months before the end of the last term, the **new teacher should observe** the child in the class and the strategies used by their current teacher.

13. **Some children will not try a new activity** if they have the slightest suspicion they will fail or there is the slightest hint of disappointment. The teacher needs to adopt an encouraging attitude, avoiding any suggestions of criticism. When an error occurs it is also best to avoid the emotion of compassion but quietly and assertively provide guidance, explaining it is not the child’s fault, the task really is difficult.

14. It is important that teachers are **aware of auditory sensitivity** and try to minimize the level of sudden noises, reduce the background conversation of others and avoid specific sounds known to be perceived as unbearably intense. **This will reduce the person’s level of anxiety and enable them to concentrate and socialize.**

15. **Children with Asperger’s Syndrome seem to evoke the maternal or predatory instinct in others.** Children with this syndrome often lack subtlety in retaliating. Other children would wait for an appropriate moment to respond without being caught. The child with Asperger’s Syndrome can also lack sufficient empathy and self-control to moderate the degree of injury. They are in blind fury that gets them into trouble. The
teacher sees the child being aggressive and may not be aware of the taunt that precipitated the anger.

16. Self-control can be strengthened by the traditional approaches of stopping and courting to ten, talking a deep breath and reminding oneself to be calm. Words not actions are appropriate to express anger, etc.

17. A teacher aid may be required for a child. Their role is crucial and complex but their main responsibilities are to:

- Encourage the child to be sociable, flexible, and cooperative when playing or working with other children.
- Help the child to recognize the codes of conduct
- Provide tuition on feelings and friendships.
- Encourage conversation skills
- Help the child to develop and apply special interests as a means of improving motivation, talent and knowledge
- Implement a program to improve gross and fine motor skills
- Encourage the understanding of the perspectives and thoughts of others.
- Provide remedial tuition for specific learning problems
- Enable the child to cope with their auditory sensitivity

What should we look for in a school and teacher?

1. The most important attributes are the personality and ability of the class teacher, and their access to support and resources. The child with Asperger’s Syndrome is quite a challenge.
2. Teachers need to have a calm disposition, be predictable in their emotional reactions, flexible with their curriculum, and see the positive side of the child.
3. A keen sense of humor will also help. At time the child is likely to enchant them, and a moment later totally confuse them.
4. An interesting feature of Asperger’s Syndrome is the variability in expression of the signs from day to day. On a good day the child concentrates, conforms, and socializes and learns reasonable well. But on other days they seem to be self-absorbed, and lack confidence and ability. On such days its best to concentrate on revision of well-practiced and successful activities, and be patient until the ‘tide recedes’ and the child can progress once more.
5. What is important is the size of the classroom. Open plan and noisy classrooms are best avoided. The children respond well to a quiet, well-ordered class with an atmosphere of encouragement rather than criticism.
6. If the teacher and child are compatible, then this will reflect in the attitude of other children in the class. If the teacher is supportive then the other children will amplify this approach. If they are critical and would prefer the child were excluded, other children will adopt and express this attitude.
Friendship

1. It is important that the young child with Asperger’s Syndrome be encouraged to share, invite someone to join their activity, and make positive initiatives of what to do.
2. The next natural state occurs between the ages of five and eight years. Children start to understand that there is an element of reciprocity needed to maintain a friendship. Children with Asperger’s Syndrome who are at this stage of development of the concept of friendship need to learn to make compliments about their prospective friend, to show caring and concern and to help others in both practical matters and activities at school such as peer tutoring.
3. The third stage is in the pre-adolescent period from nine to thirteen years. Around this stage there is a clear gender split and friendships is based on similarity, shared exploration, emotional support and increasing awareness of how they might be viewed by others.
4. The fourth stage occurs during adolescents where friendship is based on trust, higher levels of self-disclosure and greater emphasis on mutual or admired aspects of personality.
5. They usually need advice on the changing needs and demands of friendships and need to identify with their own heroes and small circle of potential friends.
6. They can become withdrawn and solitary when in a group.
7. However, it is not impossible for adolescents with Asperger’s Syndrome to find and maintain friendships that can last a lifetime. That they require is opportunity and support.
8. The person may have to memorize or write down key facts about each friend, such that when they see them or talk to hem on the telephone they have a ready script of topics of conversation, with questions as “how is...?”
9. One way of making friends is to join clubs or association based on the person’s special interest.
10. Guidelines for relating to an adolescent Asperger’s child: “never to assume without asking that I thought, felt, or understood anything merely because she would have such thoughts, feelings, or understanding in connection with my circumstances or behavior; and never to assume without asking that I didn’t think, feel or understand merely because I was not acting the way she would act in connection with such thoughts, feelings, or understanding. In other words, she learned to ask instead of trying to guess.”
11. They do not realize that there are different behavioral codes for various levels of relationships. The person my not comprehend why we behave differently according to the company.

What can parents do?

1. Play with the child, practicing social games. The idea is not only to improve competence with the activity, but also to model what is supposed to be said and done, and how to include the other person. Sometimes even the most basic rules have to be explained.
2. The next stage is to observe the child when playing with other children and make a note of specific skills that will have to be taught. Some common ones are:
   • How to start, maintain and end the play
• Flexibility, cooperation and sharing
• How to avoid social play
• Explain what you should have done
• Invite a friend to the house
• Enroll the child in clubs

3. Social Skills Groups are helpful for adolescents (pg 40)
4. There is a large variety of school projects, books, and activities that encourage children to explore the concept of what makes a good friend, and these are an essential part of the curriculum for children with Asperger's Syndrome. It is also important to identify natural instances of friendship, with the comment, ‘that was a friendly thing to do’ – or ask the child, ‘what should a friend do in such a circumstance’.
5. Regularly model self-disclosure, that is, tell the person of their emotional reactions and thoughts during the day, and then use leading questions such as ‘Did you feel angry at school today?’ or ‘Did you feel disappointed?’ This will provide an appropriate context and vocabulary to prompt self-disclosure.
6. Given the opportunity to listen to music several times a day can significantly reduce abnormal responses to sound.
7. It’s important to increase the person’s work experience from an early age, perhaps with a newspaper or leaflet delivery, and voluntary work.
8. Employers also need to understand the difficulties faced by the person with Asperger’s Syndrome so that their workload and workspace accommodates their characteristics.
9. For those who have a successful outcome, the following have been some important factors:

• A mentor, that is, a teacher, relative, or professional who understands the persona and provides guidance and inspiration.
• A partner who provides support, affection, and commitment to the person. They compensate for their peculiarities and camouflage their difficulties.
• Success at work or in their special interest, thus offsetting the challenges in the person’s social life. Social success eventually becomes less important in one’s life. Success is not measure by companionship but by achievement.
• Eventually coming to terms with their strengths and deficits and no longer wanting to become someone they cannot be, and realizing they have qualities others admire.
• A natural recovery. As much as there are late walkers or talkers, there can be late socializes, although late can be by several decades.

Emotions

1. Lack of sympathy: An Asperger’s Syndrome does not completely lack the ability to care for others. It is more that they can be confused by the emotions of others or has difficulty expressing their own feelings.
2. Children with Asperger’s Syndrome are often very stoic, enduring pain with little evidence in their body language and speech that they may actually be experience agony.
3. A confusing feature of Asperger’s Syndrome is that sometimes a mild distress is expressed as giggling, as in saying ‘you either laugh or you cry’. Here the child does not have a perverted sense of humor, just an expressive system that lacks subtlety and
occasionally the inappropriate laughter appears quite bazaar, perhaps upon hearing a certain word or phrase that produces almost hysterical laughter.

**Language**

18. The differences are primarily in specific areas of pragmatics (ie. How language is used in a social context); semantics (ie. Not recognizing there may be several meanings); and prosody (ie. An unusual pitch, stress, or rhythm).

19. The child may talk too much or too little, lack cohesion to the conversation and have an idiosyncratic use of words and patterns of speech.

20. Pragmatics or Art of Conversation: The young child requires tuition in the art of conversation. This includes conventional opening statements or comments and questions appropriate to the context.

21. Other areas where the child may have difficulty:
   - Repairing a conversation
   - Coping with uncertainty or mistakes
   - Overcoming a tendency to make irrelevant comments
   - Knowing when not to interrupt

22. Here the child needs to learn how to explain their confusion and seek clarification.

23. The person with Asperger’s Syndrome also has a strong desire not to appear stupid.

24. One of the potentially infuriating aspects of Asperger’s Syndrome is a tendency to interrupt. The person has difficulty identifying the cues for when to start talking.

25. The child’s curriculum also needs to include guidance using stories that illustrate the cues for comments of sympathy or a change of the script.

26. For adolescents, the curriculum for speech and drama classes can be modified to isolate, illustrate and practice the key elements of good conversation skills.

27. Role-plays and speech and drama exercises can be used to explain how and shy the emphasis changes.

28. Abstractions and a lack of precision are rarely tolerated, and one learns to avoid comments or replies using words such as maybe, perhaps, sometimes or later. (“Uncertainty causes a lot of inner distress.”)

29. Some children talk to themselves or “vocalize their thoughts”. First the child may be less influenced by peers to be quiet, or less concerned at appearing different. The vocalizations may also be a constructive purpose or be reassuring. It’s important to find out why the person talks to himself or herself.

30. Being lost for words may be due to a high level of anxiety. There the problem is not strictly impairment in language skills, but the effect of emotion on the ability to speak.

**Motor Clumsiness**

1. When the child attends school, the teacher may be concerned about their poor handwriting and lack of aptitude in school sports. In adolescence a small minority develop facial tics, that is, involuntary spasm of muscles of the face, or rapid blinking and occasional grimaces.

2. Ungainly or ‘puppet’ like walking or running can be quite conspicuous and other children may tease the child, leading to a reluctance to participate in running sports and physical education at school.
3. One of the consequences of not being good at ball games is the exclusion of the child from some of the most popular social games in the playground. They may avoid such activities because they know they lack competence, or are deliberately excluded because they are a liability to the team. From an early age, parents need to provide tuition and practice in ball skills, not to be an exceptional sportsperson, but to ensure the child has basic competence to be included in the games.

4. Balance may affect the child’s ability to use some adventure playground equipment, and activities in the gymnasium. The child may need practice and encouragement with activities that require balancing.

5. The child is also aware of the poor quality of their handwriting and may be reluctant to engage in activities that involve extensive writing.

6. They child may well require assessment by an occupational therapist and remedial exercises, but modern technology can help minimize this problem. Children with Asperger’s Syndrome are often very skilled at using the computers and keyboard and the child could have special dispensation to type rather than write homework and examination.

7. Also have lax joint and rhythm problems.

8. There is increasing evidence that some children and adults with autism and Asperger’s Syndrome develop signs of Tourette Syndrome. The signs fall into three major categories: motor, vocal and behavioral. Should any of these characteristics become apparent then it is essential that the person be referred to a psychiatrist or neuologist for diagnosis of this syndrome.

**Interest and Routines**

1. There appears to be a developmental sequence in the nature of the interests, and the next stage is a fascination with a topic rather than an object. Common topics are transport (especially trains and trucks), dinosaurs, electronics, and science.

2. “Set routines, times, particular routes and rituals all help to get order into an unbearable chaotic life.”

3. A common aspiration for people with Asperger’s Syndrome is not to appear stupid. One way to indicate intelligence is to deliver a monologue that includes technical terms unfamiliar to the listener.

4. People with Asperger’s Syndrome often have difficulty establishing and coping with the changing patterns and expectations in daily life.

5. One of the reasons computers are so appealing is not only that you do not have to talk to or socialize with them, but that they are logical, consistent, and not prone to moods. Thus, they are an ideal interest for the person with Asperger’s Syndrome.

6. Greater success has been achieved by limiting the time spent engaged in the activity using a clock or timer. When the timer goes off, the activity must cease. However, it is essential that the person is then encouraged to do some other activity.

7. The child may also benefit from having a personal tutor in their area of interest.

8. Routine appears to be imposed to make life predictable and to impose order, as novelty, chaos or uncertainty are intolerable. It also acts as a means of reducing anxiety. Thus, the establishment of a routine ensures there is no opportunity for change.
Cognition

1. Cognition is the process of knowing and includes thinking, learning, memory, and imagination.
2. People with Asperger’s Syndrome appear to have some difficulty conceptualizing and appreciating the thoughts and feelings of another person.
3. Prefer factual, nonfiction reading.
4. They have the lack of ‘central drive for coherence’ that is, an inability to see the relevance of different types of knowledge to a particular problem. For example, having taken the favorite toy of another child without permission and then asked how they think the there child will fee, the child can give an appropriate answer, yet this thought appeared not to be in their mind when they took the toy. Thus, the knowledge was available, but was not recognized as relevant.
5. When the child undertakes a formal intellectual assessment their overall IQ can be disappointingly lower than expected. This is due to their relative weakness on other test items, especially comprehension, picture arrangement and absurdities. The child can be remarkably competent with recalling information and defining words, but relatively less able at problem solving. As the child ages, tests, of intelligence and schoolwork increasingly rely on problem solving abilities.
6. They may have only one approach to a problem and need tuition in thinking of alternatives. Game: ‘What else could it be?’ or ‘Is there another way you could do that?’
7. One of the unfortunate characteristics associate with this inflexibility is being less able to learn from mistakes. Parents and teachers may report that the child continues to preserver with the activity, have a ‘mental block’ and not changing their strategies if they are not working. An often hear phrase is ‘he doesn’t learn from his consequences’. The child must be encouraged to stop and think of another way or ask for assistance from the teacher or another child.
8. Once the person’s mind is on a particular ‘track’, they appear unable to change, even if the track is clearly wrong or going nowhere. On these occasions it is best to just agree to have a different opinion.
9. Children with Asperger’s Syndrome are primarily individuals rather than natural team members. Team situations can be particularly stressful.
10. Solitary imaginative play can appear remarkably creative, but there are occasions when careful observation identifies that the action and dialogue can be a perfect duplication of the original source.
11. People with Asperger’s Syndrome appear to have a predominantly visual style of thinking. The disadvantage of this way of thinking is that so much of schoolwork is presented for a verbal way of thinking.

Sensory Sensitivity

1. For some time we have known that children with autism can be very sensitive to particular sounds and forms of touch yet lack sensitivity to low levels of pain.
2. One or several sensory systems are affected such that ordinary sensations are perceived as unbearably intense. The mere anticipation of an experience can lead to intense anxiety or panic.
3. Three types of noise that are perceived as extremely intense
   - Sudden, unexpected noises such as dog barking, telephone ringing, coughing
- High-pitched, continuous noise from small electronic motors used in kitchen, bathroom, garden equipment
- Confusing, complex or multiple sounds such as occur in shopping centers or noisy social gatherings.

**Examples**

1. An adolescent with Asperger’s Syndrome described how he was unable to appreciate the feeling of triumph in team sports as he could not comprehend how or why one would have a sense of satisfaction in knowing that your opponents felt inferior.
2. Problem at lunch time: Conversations with the child about the even may reveal that they are confused as to the reasons for lining up for lunch, why they have to form a line, where to join the line and how to behave when waiting.
3. A girl fell, and ran crying to her mother for comfort. As she approached the Asperger child turned to his mother and said, ‘What face do I make?’ Clearly he recognized the signals, but did not know how to express his concern. There can be occasions when the person simply lacks the precise spoken vocabulary to express accurately the subtleties of emotional expression.
4. “It seems that for success in science and art, a dash of autism is essential. For success, the necessary ingredient may be an ability to turn away from the everyday world, from the simply practical, an ability to re-think a subject with originality to as to create in new untrodden ways, with all abilities canalized into the one specialty.” Great advances in science and art have been attributed to people with Asperger’s Syndrome.

**Games to teach about emotions**

1. You can find pictures for a scrapbook or collage that illustrate happy faces as well as events that make people or the child happy.
2. List all the words that describe the different levels of happiness.
3. Older children can ask their classmates and adults what makes them happy, demonstrating individual preferences and differences.
4. The concept can also extend to drawings, choice of colors, music etc.
5. Mr. Face Game, which comprises a blank face and selection of different eyes, eyebrows and mouths that are attached to the face with Velcro. (Elmo Computer Game) The child has to choose the components to portray a designated emotion.
6. Worksheets can be constructed based on the book by Rozanne Lanczak (1987) For example, a drawing or photograph of someone opening their Christmas presents, where the child has to complete a question and answer exercise.
7. The teacher or parent models a particular level of happiness in their body language, tone of voice, face, etc. And ask the child, ‘How do I feel? And ‘Do I feel a little bit happy or very happy?’ This activity explores the different levels of expression.
8. How would you know when someone is sad? What could you do or say to help them feel better? Here the child learns to read cues and what to do when you recognize them. The ‘sad’ scrapbook can also be used to determine why the child may be sad, when there is a lack of verbal fluency to use speech to describe feelings.
9. Once this format is understood, other emotional states can be introduced, particularly anger, anxiety and frustration as well as more positive emotions such as pride, jealousy or embarrassment. A workbook can be designed to explore the events and thoughts that elicit a particular emotion in the child, and alternative responses. “What makes you feel...? What can you do when you feel? I am angry because...?”

10. A game of feeling hats can be used as a group activity. An emotion is written on a card that is pinned to a hat. Each child chooses and puts on a hat with its associated emotions and shares times when they have had those feelings.

11. Another game uses feeling masks with each participant acting the motion portrayed on a mask, or the game Simon Says, adapted to include feelings.

12. Make a workbook to explore the appropriate emotional and linguistic responses to specific situations. How would you feel and what can you say or do if:
   - Someone makes fun of your clothes
   - Someone criticizes your handwriting
   - You study hard for a test and get low marks
   - You smile and say hello, but the other person ignores you
   - You forget your lunch but a friend offers to share his lunch with you
   - A friend says you know so much about computers.

**Phrases to teach:**

1. “I’m sorry, I’m not sure what you want me to do.”
2. “I did not mean to upset you.”
3. “I’m sorry.”

**Questions to ask Meyer’s Clinic:**

1. Do you have speech pathologies or audiologist assess the child’s skills with the processing of auditory information? (Auditory discrimination and distortion)
2. Auditory training developed by Guy Berard in France (10 hours of listening to specially modulated music.)
3. Cognitive Behavior Therapy to treat anxiety and panic attacks, as well as fear and anxiety associated with exams

**Books:**

1. Rozanne Lanczak (1987) relevant activities for children of primary school age about friends
2. Mr. Men series of books (Mr. Happy and songs)
3. Carol Gray (1994) Comic Strip Conversations
4. Carol Gray (1996) has designed a workbook entitled Pictures of me, which can be used to introduce the child to their diagnosis.
5. What’s Wrong cards produced by Learning Development Aids (Duke Street, Wisbech, Cambridge, UK)