



ALTOGETHER AUTISM

JOURNAL

SPRING 2015

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AUTISM

QUIRKY GIRLS

INTERESTS OPEN DOORS TO THE WORLD

BALLET BOY SALEM FOXX

A SHIFT IN PERSPECTIVE: EMPATHY & AUTISM



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SUBMISSION TO PARLIAMENT

We recently invited Altogether Autism and Parent to Parent professionals and parents to share their stories relating to autism, dyslexia and dyspraxia.

These stories were summarised in a submission to the Education and Science Select Committee on the challenges of supporting children with autism spectrum disorders, dyslexia and dyspraxia.

We will follow the inquiry with interest and hope it leads to more support for our families with school-aged kids. Check out Radio NZ's One in Five piece on the inquiry at <http://www.radionz.co.nz/national/programmes/oneinfive>

To read the submission visit www.parliament.nz/en-nz and type *support for kids* in the advanced search bar and select *Inquiry Into the Identification and Support for Students*.

IN THIS ISSUE

- 4 Interests open doors
- 6 Ballet boy: Salem Foxx
- 7 Altogether Autism Researchers
- 8 A Shift in Perspective: Empathy and autism
- 11 Mentoring Programme Blossoms
- 12 Transforming Futures at APAC15
- 14 Quirky girls
- 16 Diversity and Inclusion
- 17 Practicalities and peer support for autism diagnosticians
- 18 Books
- 19 Prism for Professionals

WELCOME

Things move fast around here! Last edition I introduced myself as the new Journal editor, and now I am pleased to greet you as the new national manager for Altogether Autism. For those who were at our conference, this is old news, but for our other valued readers, I moved into this new position on 1 August.

The biennial (once every two years) conference held in July was an excellent gathering of the autism community of Aotearoa New Zealand. Some of the presentations are available on our website, so check these out. Many people commented on the well-balanced programme, with lived experience and professional points of view shared in both the keynotes and break-outs. The plenaries were full to capacity – many thanks to our six keynote presenters. Thank you to all who gave us feedback on our 2015 conference and planning is already underway for our next conference. We are working on some exciting new initiatives to make our 2017 Conference even better. As soon as the location and date is decided, we will let you know. Watch this space!

In this edition, we are delighted to introduce you to our two new researchers. Rebecca Armstrong and Tegan Andrews have filled the vacancies left by myself and Surrey Jackson; Surrey has left us to take up an internship with Explore Behaviour Support Services.

In our last edition of the Altogether Autism Journal (featuring the strengths and challenges of high functioning autism), we considered the difficulties around the words we use to describe autism and the autistic experience. Shortly after that went to print, a new research paper was published in the Autism journal. The findings of this UK research confirmed that there is no single term that is preferred by everyone. However, the study recommended moving to language that is more assertive and positive. This was particularly strong in communities where autism is seen as part of the person.

Altogether Autism is aware of members of our consumer reference group and our autism community showing an increasing preference for self-description as an 'autistic person, or an 'autist'. The inclusion of the term 'disorder' in ASD is often seen as unnecessary and inaccurate.

We recognise that language is both a reflection of the present and has power to shape the future. We will therefore gradually increase using 'autistic', particularly when talking about and to adults. We shall continue to use 'on the autism spectrum' as the preferred default description. Language is not static and we expect the words we use to continue to change and we welcome your views. Feel free to post on our Facebook page – and while you are there, remember to Like us!

Read the full research paper at www.altogetherautism.org.nz



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INTERESTS OPEN

Obsession, fixation, preoccupation are words often used when talking about someone with autism pursuing an interest.

The ranges of interests that they apply to are as different and varied as the individuals themselves. What doesn't change so much is the intensity with which these interests are pursued.

For children particularly, freedom to do so is often controlled by others – family, caregivers, peers, educators. Others may accept, understand, and even share with and contribute to that interest, but all too often it is perceived as obsessive, weird, something that needs intervention that can only come once “everything else is done”. Access needs to be limited and restricted to prevent it “getting in the way”.

The uniqueness of interests is often viewed as isolating, but in fact can provide a bridge to connecting with others who are so very different, and because of that, can be the key to success.

Throughout the autistic community examples of Jacob Barnett, Temple Grandin, Satoshi Tajiri and Adam Young demonstrate how interests, pursued with determination and supported by those around can lead to great things. These examples may be extreme, but there are many everyday examples: The child who was allowed to pursue their passion to become a chef and used cooking to learn maths (through developing and analysing surveys to gain feedback and recording results on graphs), literacy (by researching and writing up recipes), geography (through exploring food around the world) and more; the child who loved dinosaurs who's curriculum was adapted with everything linked to their interest and who went from being disinterested in completing any task set, to being engaged with their learning.

Being diagnosed as an adult didn't prevent “obsessed” being used often by my family, teachers and peers regarding me growing up. My “obsessions” weren't all that typical of my peers, but I was fortunate in that, although a little odd and not understood, they were “acceptable”. They did somewhat take over my life at times. Looking back, my strongest connections and biggest successes were when those interests were acknowledged, allowed and used.

Now people often comment on my “intensity”, but there is no way I would be where I am today (literally – in New Zealand, as well as more generally in life) if I had not been allowed, or had not allowed myself to pursue those interests. A different way of thinking, commented on as “somewhat aloof, rigid or stubborn”



and perhaps with less need to conform than my peers, provided a shield and allowed me to continue on the somewhat more unusual paths I followed.

My first word was “duck” – at that young age, and somewhat supported by those around me, everything became about ducks – the stories I enjoyed, my favourite toys, my favourite clothes, everything! Until I left home I collected ducks. As I progressed through school, interests were often linked to my learning – my teacher taught one lesson on a topic that grabbed my interest and I became focused on finding out all I could. We studied space when I was eight – so I sent a letter to NASA (and got a reply with all sorts of goodies), built a scale model of Apollo 11 and of our solar system. When I was 10, it was all about World War II – and I interviewed every old person I knew to find out about their wartime experiences and read Goodnight Mr Tom over and over. Other interests were more hobby-based; origami - the house was full of it, and everyone I knew got handmade origami birthday cards. Silk painting came after, with a similar story.

DOORS TO THE WORLD



From quite a young age my interests became my identity – for many years I was a ballet dancer – take away ballet and I couldn't have told you who I was – it was how I dressed, how I stood and moved, the only thing I could have a conversation about. I wasn't talented, but it was my life.

As I progressed through high school my interests only became more important to who I was, and looking back the difference they made is what has got me to where I am today. New Zealand – a country as far away from where I grew up as could be – was where I wanted to be (and not for that reason). Every school project that allowed – art, geography, English – I related somehow to New Zealand. I declined repeated school trips overseas because I was saving my money to move to New Zealand. When at 19, that happened, I bought a one-way ticket "home".

My other interests have given me skills, a sense of purpose and belonging, and have linked me to opportunities, employment, awards and recognition (although I'm still not convinced that is a good thing!).

At about 12 years old I found out that the Chernobyl nuclear disaster happened just one week after I was born – I set about researching all I could. At 14, I completed a creative writing piece of coursework for GCSE (creative writing being something I had always struggled at). My teacher Mr Heslop (I remember him because of this) saw my struggles with the suggested titles and asked me what I would like to write about. My answer "Chernobyl" – I achieved 54/54, A* grade – English had never been a strength. I sent that piece of work to our local link of Chernobyl Children's Lifeline – an organisation I had discovered in my research for writing the piece, and was invited to become involved.

I worked with our link to fundraise, help with visiting groups of children (including things like discos and outings to bowling – things I couldn't and still can't otherwise do). I learned Russian and visited Belarus, staying in orphanages and with children and their families for three weeks at the age of 16 (then, and still now, I have significant anxiety over food, meeting new people, going to new places, but none of that mattered then).

Five years with Chernobyl Children's Lifeline taught me many of the skills I use now, combined with my passion and own experience, to run a charity. That is something I do as a volunteer, but it has opened doors for me in terms of employment.

It never ceases to amaze me (and confuse others) that I achieve so much more – do things that are otherwise so difficult – when it is through my interests and when I know it is helping others.

With diagnosis I have become increasingly conscious of the strength of interests in developing resilience to the challenges of autism. Not only that, pursuing an interest in such depth, with such intensity is great fun, and can lead to friendships or at least companionship (for me it resulted in marriage), and so many opportunities.

So, rather than obsessions, fixations and preoccupations, let's support, embrace and celebrate interests, passion and knowledge. This will lead to ambitions, goals and dreams, which become identity and give purpose, pride and achievement. Our interests are what connect us to the world. ■

- Written by someone on the spectrum who would prefer to remain anonymous.

Ballet boy: SALEM FOXX

SALEM FOXX



The Attitude Awards are national awards celebrating the achievements of people who live with disability. They aim to shine a spotlight on the disability sector, and draw attention to the one in four New Zealanders who live with disability.

First held in 2008 and run by a charitable trust, the event salutes artists, sportsmen and women, people with intellectual disabilities, physical disabilities, mental health issues, young and old. It also pays tribute to employers who work alongside people with disabilities to ensure they are able to contribute their skills to society and live full and satisfying lives.

The 2015 event is held at Auckland Viaduct Events Centre on 3 December, and is a black tie gala evening with three-course dinner, entertainment and the announcement of winners across eight categories of awards, plus the Supreme Winner, from 21 finalists from all over New Zealand.

Wellington 15-year-old Salem Foxx is a finalist for a second year at the Attitude Awards 2015 held on 3 December – World Disability Day – one of three finalists in the Artistic Achievement Award.

“The Attitude film crew came to my grade one class at Hayley Johnson Academy of Dancing ...” says Salem. “I’m dying to know how the filming turns out and what they will be using for my piece at the awards. My grade ones and their parents are dying to see it too!”

Salem, who has Asperger’s syndrome, has been dancing since before he was three, and not only does he have a deep passion for dancing and choreography, but sees himself as a trailblazer.

“I hope to encourage other boys to at least try ballet and really see how much strength a male dancer has/needs ... and that ballet is not just for girls.”

Practising what he preaches, Salem has been learning to dance en pointe (balancing on tiptoes) which is usually the domain of female dancers. “I just don’t want to be restricted in how I move. I want to express myself how I want.” – New Zealand Woman’s Day, June 2015

“Along with ballet, I also do jazz, contemporary, lyrical, acrobatic dance and have added tap to my list.

“I have Asperger syndrome, which can make things a little harder for me, so I try even harder to reach my goals ... I’ve just had three big exams; for the two jazz (elementary and intermediate) I received 96% passes for both, and for the contemporary I received 100%.”

Salem has performed in Royal New Zealand Ballet productions Cinderella, Giselle, Sleeping Beauty and The Nutcracker, and his goal is a career as a dancer in a company either here or overseas.

“I also want to eventually work as a choreographer and my BIG, BIG dream is to have my own ballet school and provide specialist boys technique classes.

“I am very lucky to be taught ballet by both Sir Jon Trimmer and Lady Jacqui Trimmer. They see me having a career in dance – in a company and then leading on to being a choreographer and teaching.

“Along with being taught by the Trimmers, I go to Hayley Johnson Academy of Dancing in Tawa. I practise six days a week for at least two hours, and on top of all my dance lessons I am teacher’s assistant for grade ones and twos, which I enjoy.”

Salem was the recipient of the 2015 International Naturally Autistic People “Performing Arts (Youth)” Award at the ANCA World Autism Festival Awards which was held in Canada on 4 October, and he has just performed at the 2015 Pride Awards in Wellington.

He is now fundraising to go to The National Boy’s Ballet Summer School, Sydney, in 2015/16. Busking in Wellington parks, he’s hoping to cover his fees and travel expenses for this all-boys’ summer school which concentrates on ballet, contemporary and jazz dance. ■

To help Salem reach his \$3000 goal visit <http://givealittle.co.nz/cause/balletforaboy2015#>

ALTOGETHER AUTISM RESEARCHERS

We are delighted to introduce Altogether Autism's new researchers. Rebecca Armstrong and Tegan Andrews have filled vacancies created by Catherine Trezona's appointment as National Manager and Surrey Jackson who has left to undertake an internship with Explore Behaviour Support Services. Glenn Lambert-Vickers talks to Rebecca and Tegan to learn more about our new team members.

What attracted you to working at Altogether Autism?

Rebecca: I thought it would be a wonderful opportunity to use my skills and further develop my knowledge as well. It's highly rewarding to be working for a service that provides quality information and support to individuals, families and professionals.

Tegan: I value evidenced-based information and practices, which aligns with Altogether Autism's goal of providing good quality and credible information.

What are your goals in your role as researcher?

Rebecca: Personal and professional growth through knowledge and skill development.

Tegan: To keep learning more about autism and keep up to date with current research; to help individuals, families and professionals by providing quality information.



What is your background?

Rebecca: I have a Bachelor of Social Sciences (Hons) in psychology and human development, and a Masters of Applied Psychology (Behaviour Analysis).

Tegan: I completed my Masters in Applied Psychology in 2014. I have also tutored at Waikato University across a range of psychology papers and in research methods.

What is your experience with autism?

Rebecca: I have worked with a child on the spectrum in a mainstream school for the past two years and I also did a practicum at Patricia Ave School as part of my studies.

Tegan: I worked as behavioural play therapist, working with children and teenagers with autism while completing my Masters. I worked both in the home and in school helping the children develop skills such as task compliance, social skills and communication.

What do you do outside work?

Rebecca: I'm pretty busy outside of work! I tutor research and cognitive papers at the University of Waikato. I enjoy travelling, spending time with my children and reading. I love getting outdoors and volunteer for Camp Quality NZ helping with camps for children living with cancer.

Tegan: I am in the first year of my PhD, researching factors that could affect decision-making in young people, and I'm also coordinating a third year paper at Waikato University. When I get free time I enjoy tabletop gaming – my favourite game is Takenoko.



A SHIFT IN PERSPECTIVE:

empathy and autism

By Rebecca Armstrong

Empathy is simply defined as the ability to identify and understand another person's situation and feelings; it is commonly spoken of as "walking in someone else's shoes".

It allows us to tune into how someone else is feeling, or what they may be thinking. It allows us to understand the intentions of others, predict their behavior and experience an emotion triggered by their emotions. In short, empathy allows us to interact effectively in the social world.

Empathy is a complex construct and can be broken down into two definitions; cognitive empathy which refers to mental perspective taking, and emotional empathy which refers to vicarious sharing of emotions. This article is going to provide an overview of the complex topic of empathy in relation to gender and autism, particularly highlighting problems with measuring empathy and the misconceptions that result from these measurements.

EMPATHY AND AUTISM

One of the main characteristics of autism is impairment in social functioning and communication. Some research, for example that of Baron-Cohen, has concluded that those living with autism are lacking in the ability to identify and understand the thoughts and feelings of others and therefore do not tend to respond to these with appropriate emotion. While it is true that autistic people often have a harder time reading social cues, this does not necessarily demonstrate lack of empathy. This research has resulted in the significant conclusion that people living with autism do not care, and consequently lack a fundamental aspect of being a compassionate human. However, lived experiences and recent research is challenging this perspective.

THEORY OF MIND AND EXTREME MALE BRAIN

To understand the current understandings of empathy and autism, it is important to view it in context of its history. One particularly influential theory developed by Baron-Cohen and used to understand autism, is "theory of mind" or "mind blindness". Theory of mind, like cognitive empathy, is conceptualised as the ability to attribute mental states to self and others. As a result of these attributions individuals with an intact theory of mind are able to understand the motivations and predict the actions of others. It has been proposed that impaired theory of mind is a central deficit in autism and that many symptoms characteristic of people on the autism spectrum can be explained by the inability to comprehend others (Krahn & Fenton, 2012).

This led to the theory of the extreme male brain (Baron-Cohen, 2002). This theory states that people with autism simply match an extreme of the male profile, with a particular intense drive to systemise, and an unusually low drive to empathise. The former

is traditionally associated with capacities typically found in males, whereas the latter is traditionally associated with females.

EMPATHY AND GENDER

It is widely accepted that boys and girls show significant differences in their neuroanatomy, cognition and behavior from an early age (Knickmeyer & Baron-Cohen, 2005). Females frequently score higher on standard tests of empathy, social sensitivity and emotion recognition than males. Gender differences in the precursors of empathy are also seen from birth. There is evidence (cited in an article by Auyeung et al., 2009) of female babies looking at faces more often (Connellan et al., 2002), making more eye contact (Hittelman & Dickes, 1979) and exhibiting more comforting, sad expressions or making more sympathetic vocalisations when witnessing another's distress (Hoffman, 1977). It is also reported that girls show better social relationships as early as four years old (Auyeung et al., 2009).

These similar patterns are observed in adults as well, with women being more likely to report more intimate relationships, having a confidant and receiving social support and visits from family and friends (Baron-Cohen & Wheelwright, 2003). Measurements that directly assess aspects of empathy have highlighted that girls are better than boys at evaluating the

"If Aspies stopped being labelled as un-empathetic then maybe our type of empathy can be accepted and valued by the majority and not just those who know us very personally"
– Dr Emma Goodall

feelings and intentions of characters in a story (Bosacki & Astington, 1999) and differentiating between the appearance and reality of emotion recognition (Banjaree, 1997 – all cited in Auyeung, 2009). While studies investigating play difference between boys and girls identify a more mechanical and constructional form of play in boys, and more systemising skills utilised such as making and reading maps (Barenbaum & Hines, 1992, as cited in Auyeung et al., 2009).

MEASURING EMPATHY

Two common measurements in the empathy, autism and gender literature are the Systemising Quotient (SQ) and Empathising Quotient (EQ). These tools are self-report questionnaires with a likert format that were developed to examine trends in gender typical behavior in adults. They contain a list of statements about real life situations, experiences and interests where empathising or systemising skills are required. Findings have found significant gender differences with women scoring higher than men on the EQ and men scoring significantly higher than women on the SQ (Auyeung et al., 2009). Additionally, those identified as autistic score lower on the EQ than typically developing peers, and regardless of gender show a drive for systemising over empathising (Auyeung et al., 2009). It is important to note that the phrasing of some of the questions in the EQ questionnaire reflect a neurotypical mind-set, and possibly skew the results for people on the spectrum – e.g. "I find it easy to put myself in somebody else's shoes" – this question may be interpreted literally by an autistic person, and thus generate a response that has more to do with shoe size than empathy.

WHAT THE EXTREME MALE BRAIN THEORY MEANS FOR GIRLS

It is evident that the extreme male brain theory is based on gender stereotypes and influenced by how boys and girls are socialised. These presentations of behavioural, cognitive or emotional gender differences can be highly misleading.

Baron-Cohen described brain profiles in regards to where people fall on a spectrum for empathising and systemising; however, it makes little sense to gender them since males and females did not exclusively fit into the male type brains or female type brains respectively. It would have been more beneficial to have identified and stated correlations of behaviours and brain types and then label them more gender neutrally. As a consequence of extreme male brain theory, the very language that is used to describe autism is loaded with certain gender expectation and connotations. The way in which autism has been discussed in the past three decades evokes cultural understandings of gender and doesn't take into account the abundance of individual development factors.

This may also contribute to the high male to female ratio of autism and may assist in explaining why fewer girls are diagnosed. Young girls with autism who have mild to no intellectual impairment report less social and communication deficits than boys with autism (Smith, 2009). Girls with autism may be experiencing socialisation pressures that in a sense are similar to early intervention. People around girls living with autism may effectively provide a means for them to engage with others due to increased expectations of girls to behave in an empathetic or nurturing manner. Comparatively, boys with autism may be mis-served by the lack of expectations and social pressures for empathy from boys.

LIVED EXPERIENCES

There is evidence that there is a difference between neurotypical people and those living with autism, and males and females in measures of theory of mind or cognitive empathy. However, big conclusions have been drawn based on these differences. Alternatively, other models have shifted the focus away from cognitive empathy and propose that children with autism have overwhelming emotional empathy and thus find it difficult to interact with others; these models are "empathy imbalance" and "intense world" (Smith, 2009). Smith emphasises that people with autism may have stronger emotional empathy than typically developed matched samples. The faces of children with autism and typically developing children were observed in a paradigm designed to elicit emotional

empathy in the children. It was concluded that the children with autism displayed more empathetic facial affect than the other children (Capps et al, 1993). Magnee et al. (2007) reported that the faces of adults with autism showed heightened electromyography responsiveness (measurements of electrical activity) to the emotional expressions of others. Bird et al (2007) showed that adults with ASD show heightened automatic mimicry of the hand movements of others. In another piece of work conducted using neuroimaging, the participants were required to watch movies

of facial expressions of emotions. Adults with autism activated their neural mirror systems (NMS) more strongly than participants with typical development (cited in Smith, 2009). This research suggests that the reason people with autism may find the social world challenging is more due to the fact that it may be overwhelming to those on the spectrum rather than the previous theory of the social world failing to engage them.

Emma Goodall, PhD, has extensive knowledge on autism and experience in the field. Goodall has a diagnosis

of Asperger's, worked for the Ministry of Education and as a resource teacher of learning and behavior (RTLb), and set up an autism and Asperger's consultancy. In her book *Understanding Value and Facilitating the Achievement of Autistic Potential* she discloses

her own personal experiences of empathy. She highlights that the expression of emotions in those with autism is atypical rather than non-existent and typically developing people may mis-read the emotions. There tends to be less expressive face movement and different body language but in fact the emotions are felt rather intensely (Smith, 2009). This intense experience coupled with atypical expression has resulted in others suggesting those with autism do not understand the feelings of others. In fact, another explanation may be that neurotypical developing people may not understand the feelings of those with autism.

There are many possible explanations for lack of measured empathy. Those on the spectrum have had to adjust behaviors to be more socially acceptable which means they may lose some expression in the process. Many people on the spectrum have processing issues and therefore may have delayed responses or may seem a little standoffish (Smith, 2009; Goodall, 2013). Or it may be because of a concept that Goodall called "emotional priority". She used the example of

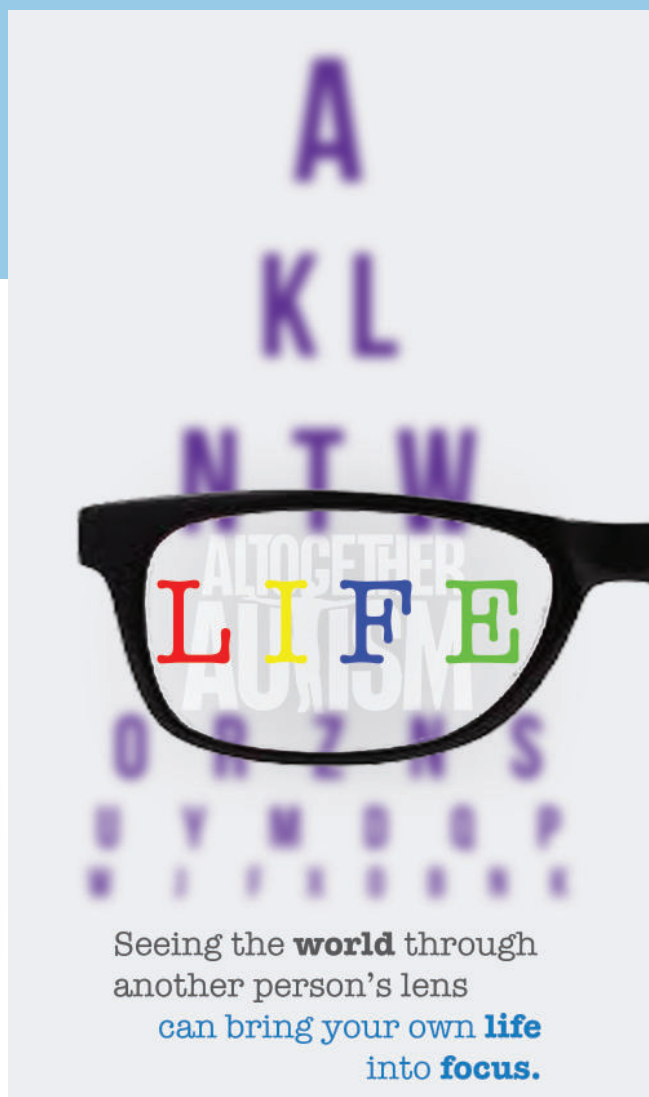
someone dying after a period of suffering. Autistic people may be more empathetic with the suffering and relieved it is over, rather than the death itself. They may not understand others' emotional state because of the logic of them knowing the person was ill and going to die (Goodall, 2013).



Every person living with autism is unique; some may struggle with empathy while others may feel completely overwhelmed by other people's feelings, and then there is everyone in between. It seems that autistic expression of empathy may be atypical. There is a need for further understanding and a shift from labelling this expression as a lack of empathy. Emma Goodall stated it nicely in her book when she says. "If Aspies stopped being labelled as un-empathetic then maybe our type of empathy can be accepted and valued by the majority and not just those who know us very personally" (p.126). ■

REFERENCES

- Auyeung, B., Wheelwright, S., Allison, C., Atkinson, M., Samarawickrema, N., & Baron-Cohen, S. (2009). The children's empathy quotient and systemizing quotient: Sex differences in typical development and in autism spectrum conditions. *Journal of Autism and Developmental Disorders*, 39, issue 509-1521.
- Baron-Cohen, S. (2002). The extreme male brain theory of autism. *Trends in Cognitive Sciences* 6(6), 248-254.
- Baron-Cohen, S. & Wheelwright, S. (2004). The empathy quotient: an investigation of adults with Asperger syndrome or high functioning autism and normal sex differences. *Journal of Autism and Developmental Disorders*, 34, issue 163-175
- Goodall, E. (2013). Understanding and facilitating the achievement of autistic potential (2nd Edition).
- Knickmeyer, R. C. & Baron-Cohen, S. (2005). Fetal testosterone and sex differences in typical social development and autism. *Journal of Child Neurology*, issue 825-845.
- Krahn, T. M. & Fenton, A. (2012). The extreme male brain theory of autism and the potential adverse effects for boys and girls with autism. *Bioethical Enquiry*, 9, issue 93-103.
- Smith, A. (2009). Emotional empathy in autism spectrum conditions: Weak, intact or heightened? *Journal of Autism Developmental Disorder*, 39, issue 1747-1748





MENTORING PROGRAMME BLOSSOMS

▲ Mentors and mentees at APAC15. Dr Goodall is fifth from the right.

By Dr Emma Goodall

As a facilitating mentor, I was involved in some of the organisation of the Asia Pacific Autism Conference 2015 programmes, along with three other adult autistics. A dedicated mentoring programme, linked into the conference was designed to help delegates feel supported and relaxed. This was structured to enable a high level of participation, with extra support and quiet spaces around breaks, meals and emotional or social overload that can occur when attending such an intensive three-day event.

The quiet space was well located and provided a great area to just hang out, but also to share life stories, swap ideas and engage in some more obvious mentoring. A number of speakers were invited to share lunch with the mentees and mentors over the three days and these sessions provided some lively debate, which may not have been expected by the invited speakers!

I was particularly struck by the contrast between the understanding of autism and autistics between cofounder of the I Can network Chris Varney, Australian psychologist Tony Attwood, and Belgian researcher Peter Vermeulen. As an aspie, my attention to semantics may have annoyed some and been a breath of fresh air for others, but the semantics of subclinical autism spectrum and the word I refuse to use that begins with D and follows AS in the DSM-5 formed a particularly lively discussion.

It was great to see mentees and first-time mentors blossom within the autistic grouping and start to ask questions and question assumptions as well as set themselves new challenges. With people from regional/rural Australia making connections and growing in confidence, I hope that the experience will make a long-term difference to many more autistics both young and old, than just those who attended. On a practical note, it was sad that no funding could be secured to enable any New Zealand and/or Pacific Island mentees to attend, and I hope that this will change in 2017 to enable young autistic adults from these communities to participate.

Participants left APAC15 with more confidence in their right to be heard and validated and a stronger awareness of the huge potential of all people on the autism spectrum, which is fantastic. ■

Well known “Aspie” Dr Emma Goodall started work in October as South Australia’s senior autism adviser for the Department of Education and Child Development (DECD). Her PhD researched teaching students on the autism spectrum. She is passionate about enabling families and educators to understand and work with autistic spectrum children and adults in a positive way. Altogether Autism congratulates Emma on her appointment.



TRANSFORMING FUTURES AT APAC15

By Katy Kenah

More than 1200 delegates met in Brisbane last month to focus on 'transforming futures' for people on the autism spectrum at the Asia Pacific Autism Conference held 9-11 September 2015.

The theme of the conference was 'Transforming Futures' – over three days, adults on the spectrum, parents and carers of children on the spectrum, teachers, researchers and professionals came together to consider the latest research, and gain inspiration with a focus on successful and positive outcomes for those on the spectrum.

In addition to plenaries, symposiums and concurrent sessions, there was a large exhibition hall, poster presentations and a virtual gallery with art from emerging and established artists on the spectrum.

APAC17 is from the 7-9 September 2017 at the International Convention Centre, Sydney.

Among the many great presentations presented during the three days at APAC15, a couple in particular stood out.

'AUTISTICALLY HAPPY'

Peter Vermeulen, PhD, has worked as an autism consultant/lecturer at Autisme Centraal, Belgium, since 1998. He has published more than 15 books and several articles on autism. Peter's brother-in-law is on the autism spectrum.

Peter presented in two symposiums; his first was on ASD & Relationships: Clarifying the Challenge and the Challenge of Clarifying. Peter discussed how the challenges in building and navigating social relationships are not in a lack of social skills – social scripts and skills can be learned, neither are they in difficulty with theory of mind, but, they are linked to the specific way the autistic brain processes information, which is referred to as 'context blindness'.

"Life is one big exception" – rules are not absolute, honesty is not always the same as politeness – and therefore what is needed is contextual sensitivity. Relationship skills taught should not only be those that are

traditionally considered 'nice', but also those that are 'effective'.

Peter's second symposium presentation was titled The outcome of ASD in adulthood: Time to make a U-turn in our approach and focus on well-being as a desired outcome. Peter shared his observation that emotional wellbeing and happiness has received very little attention in the field of autism – the criteria by which outcomes are judged tend to include employment, relations/friends, health, cognitive function, living situation and autism 'symptoms'. The effectiveness of 'treatment' and so called 'outcome research' rarely considers emotional wellbeing as a desired outcome, yet in contrast there has been much recognition of the 'lack of wellbeing' in autism. Peter reminded the audience that the more we focus on the negative, the more negative we make autism.

An imbalance of (predominantly) negative feelings leads to stress, anxiety and depression. Negative feelings can contribute to rigidity in thinking, and a detail focus. A goal of balance does not work either because with a 'crisis' that balance is easily tipped back to the negative.

"As a society we tend to define wellbeing as the absence of mental health problems, but what if we were to go a step further and define wellbeing as the majority of good feelings? What impact might it have if we were to reframe our focus to the presence of happiness?" Peter acknowledged that with autism resilience is often decreased. Rather than focusing on what makes those on the spectrum feel 'bad' (as is so often the tendency), why not focus on what makes an individual happy, and monitor those positive feelings (there are some assessment tools available to help do this)? Positive feelings have been observed to increase cognitive function, flexibility, and adaptability.

"Happiness should be a goal."

Peter acknowledged that many of the tools used to assess wellbeing are not 'autistically friendly' – overlaps between the 'symptoms' of mental health problems and the characteristics of autism make identification challenging. Peter shared that "I don't



know what people with autism are thinking, but I know how they think”.

One of the primary influences on Peter's work/perspective is Belgium culture – rather than the medical and social models of disability more prevalent in New Zealand, Belgium works from a citizenship model, which considers all individuals, regardless of ability, as citizens with the same rights to a good quality of life – whatever is needed for that to be achieved should be available.

“Enable people do to things they can be proud of, and to be able to contribute” – this will lead to positive self-esteem.

“Less autistic does not necessarily mean happier.” Peter asked, should the goals of ‘treatment’ be for a higher IQ? For a lower score on symptoms measurement? For normalisation? Or should they perhaps be on wellbeing? Peter concluded with suggesting that the ultimate goal should be “not less autistic, but ‘autistically happy’”.

It was greatly appreciated that Peter took time on Friday lunchtime to meet with the young people involved in the mentoring programme who were excited by, and supportive of, his refreshing perspective and focus.

WHEN ANCIENT WISDOM CHANGES ATTITUDES

Dr Yuan Gao is an Honorary Fellow at Olga Tennison Autism Research, La Trobe University, Australia. He is a trainer, policy advocator and specialist of infectious disease prevention and control – but most significantly he is the father of 13.5 year old Michael who is on the autism spectrum.

Dr Gao presented from the perspective of a parent, but his message about attitudes was relevant for all – those on the spectrum, teachers and professionals. His presentation in the final day's plenary was titled When Autism Meets Ancient Oriental Wisdoms.

Dr Gao began by sharing, very honestly, stories about Michael as a young child, and the perspectives of Michael's mother and himself towards Michael and his diagnosis, relatable to the early experiences of many families. He saw Michael's autistic experience as wrong, and as needing to be ‘corrected’, and initially worked hard to achieve this.

Dr Gao recalled how Michael used to draw – he would draw triangles and tell his father they were air conditioning units. Dr Gao shared how he told Michael he was wrong – that the shape was wrong. One day, when walking with Michael he looked up – from street level the air conditioning units on the sides of the buildings above them appeared as triangles. This was a turning point for Dr Gao, when he realised that Michael's perspective was not wrong, but simply different.

Dr Gao and his wife acquired some wisdoms from ancient Chinese classics of Confucianism, Buddhism and Taoism. The wisdoms have shifted, and continue to shift their attitudes in what he believes is the right direction.

Dr Gao considered the polarised attitudes that can often be seen among parents and families of children on the spectrum:

- From perceiving the child as a heavy burden, devil or disaster, to perceiving the child as a precious gift, an angel or Buddha
- From often complaining, to always being grateful
- From living in despair for the child's prognosis and future (leading to negative thoughts and actions), to being very hopeful for their prognosis and future (leading to positive thoughts and actions)
- From trying to ‘pull’ the child forward fast and suffering frustration if efforts fail, to giving full supports and enjoying the child
- From training a child to see the world in ‘my’ way, to trying to understand how the child sees the world. Dr Gao's advice to the audience was “to understand a child well, treat him as your teacher”
- From correcting and trying to improve a child's weakness, to focusing on and enhancing a child's unique strengths
- From expecting others to come to the child's rescue, to enabling the child to help others with their limited abilities.



The perception impacts on the attitude towards that child, which in turn impacts on the outcome.

Dr Gao reminded the audience that neurotypicals compete in our world using their strengths, yet in the autistic community we tend to focus on trying to improve weaknesses. A change in approach with Michael – focusing on strengths and almost ignoring weaknesses has given confidence (which has helped to improve weaknesses without effort).

The Disciples Regulation (about 400 years ago) teaches: “Give plenty of time for achieving your goals and work perseveringly towards them everyday. After having put in enough time and efforts, barriers will be overcome and the goals will be achieved naturally.”

Goals are set with Michael, but, only long-term goals – Michael is supported to do a little work towards his goals every day. Polarised attitudes among parents and families range from a focus on short-term goals and worry about the next immediate step, to a focus on future requirements for adulthood and working on them now and every day. Dr Gao asked delegates when considering goals, to consider which scenario looks to be a ‘better’ future for a child – “no traits of ASD, but incapable of being independent (relying on others) or capable of being independent (self supportive) but with some traits of ASD?”.

Michael is a delightful young man who attends school in China with no ‘special assistance’. He has learned English, has a talent for music and Chinese art, and is proud of his achievements. Michael and his family firmly believe there is no limit now to Michael's potential – the only thing they need to do now as parents is give their full support. ■

Katy Kenah works with young adults with autism and intellectual disability in educational and recreational settings.

QUIRKY girls

By Dr Kev Appleton

Epidemiological studies have indicated that autism is more common in boys than girls. The overall level of diagnosis regardless of gender has been increasing and is now thought to be around 1% (one in a hundred) or more. It is still unclear whether this is an increase in actual cases or one based on better recognition, diagnosis and a broader definition.

There is a suggestion that autism is becoming more common, but with no clear evidence as yet, that this is the case. During this period, there has also been an increased recognition of autism in girls and women. Despite this, the diagnosis rate is still skewed significantly towards boys. Once again, it is not clear whether this is a real difference or merely an artefact due to issues with recognition, screening and diagnosis in girls and women compared with boys and men.

Despite the difference in reported numbers, females on the autism spectrum are well represented by women who have written with great insight and clarity about their experiences – Donna Williams and Temple Grandin are just two that spring to mind. They have brought the experience of being on the spectrum to the fore and even popularised awareness and understanding of autism. The ability of women to be able to describe their own experience of autism is perhaps something that distinguishes them favourably from their male counterparts. This has also been very valuable in bringing understanding, support and a reduction in isolation to others.

Early recognition leading to referral for assessment in childhood is usually based on problem behaviour, abnormal social functioning or due to co-morbidities such as ADHD and dyslexia leading to academic problems. Males are much more commonly referred due to their odd, sometimes aggressive or disruptive behaviours and problems with social functioning. This comes to the attention of teachers and parents more readily than in girls. A “quirky” but well-behaved girl with autism may sit day dreaming at the back of the class, under the teacher’s radar and quietly falling between the cracks.

In boys, poor social development and communication skills may manifest themselves as aggressive or antisocial behaviour. There also may be lack of integration with other children. Alternately there may be excessive, dysfunctional and otherwise problematic interactions from a child who wants to have friends but doesn’t know how to make or keep them.

Both in autism and in diagnoses such as inattentive type ADHD, girls may be overlooked compared with their more troublesome male counterparts. This may be because girls are less likely to be referred as being “difficult and disruptive”. In reality they may be missed and overlooked, merely because their behaviours are often easily managed or could go unnoticed within the overcrowded

busy classroom. The natural temperament of girls may mask milder forms of autism.

Girls may present as more quirky, odd or unusual, rather than troublesome and problematic within the classroom. They may be socially isolated and loners, or be socially interested but unusual in the way that they interact. In childhood, such eccentricity may be tolerated by age peers and

even seen as endearing by adults. Some of these girls may prefer and seek out the company of teachers rather than age peers. This may not be seen as anything to worry about at this stage. Subtle difference in social functioning, language and communication may go unnoticed or not seen as significant. Girls may be referred later than boys due to co-morbidity such as ADHD, anxiety, or learning problems.

Researchers in autism genetics are now suggesting that girls and women are more resilient to the presence of underlying genes for autism compared with boys. Girls need to have a higher loading of associated genes for the autism phenotype to be recognised compared with boys. This is perhaps because boys and men are seen as more naturally autistic in the first place.

Women and girls on the autism spectrum also have a much higher level of co-morbid symptoms of anorexia nervosa. It is even suggested by some that eating disorders are a manifestation of autism in girls.

In infancy, there may be very little that distinguishes male and female in relation to early signs of autism. Family history including the possibility of maternal autism or the lesser phenotype may give a heads up and even affect bonding and attachment. This may occur either via the effect of autism itself on mother’s parenting style or via a co-morbid condition such as depression or anxiety. Early difficulties with eye contact, social smiling, shared attention, and interest in being picked up and cuddled are not known to be specific to one or other gender but are indications of the more severe end of the spectrum.

On entering the social environment for the first time, i.e. at kindergarten or playgroup, we may see some gender specific differences in children who go on to, or already have, a diagnosis. Both boys and girls may react to other children by playing in parallel rather than interactively. They may watch with interest or sometimes wariness, or may be completely oblivious and uninterested in their peers. Others may seek out the company of adults as an escape from social contact with peers. Girls generally tend to remain more passive while boys may show excessive interest in peers while having little or no ability to interact socially. These kids may be aggressive to others. They may need rigid adherence to rules based on their own understanding and an inability to compromise, adapt, or give and take. This may indeed lead to hitting, biting or pinching others and complaints from parents. This is uncommon in girls. This may raise concerns and boys tend to have a higher rate of referral for opinion by educational services at this stage than girls.



Girls in general engage to a greater degree in fantasy and imaginary play than boys. They are less occupied generally with banging, hitting, slamming and throwing things than boys. With autism their play may be repetitive but not raise suspicions if it remains in the realms of gender specific toys and activities. Girls sometimes develop narrow and obsessive interests in collecting insects, stones, leaves or a variety of other random objects or items. They may show interest in more male typical themes such as dinosaurs, cars, or figures. They may become obsessional about collecting dolls. Like boys, they may become interested in symmetry, ordering and lining things up, a dislike of disorder or distress at what appears to be disorder in their bedroom being touched or interfered with or tidied. Being more female stereotyped trait these may be seen as less unusual in girls than boys. Once again gender differences may hide or disguise presenting symptoms.

Girls with autism may be just as rigid, concrete, repetitive, and value routine as boys on the spectrum. They may display unusual movements, grimaces, facial expressions, tics. While girls are naturally more socially skilled and forgiving than boys, their difficulties in this area may be harder to pick up if not accompanied by the male tendency to get into behavioural issues. Little girls may also be naturally more articulate. Quirky pseudo mature conversations of little professors with a large vocabulary of the high functioning autistic child may be seen as cute and appealing to adults rather than problematic. Both boys and girls sometimes acquire American accents from TV shows when they have never actually been to the USA.

As kids get older their peers become less forgiving and accepting of atypical personalities, language and social skills. The onset of puberty and adolescence brings new social challenges and need to conform. Interests, language style, and dress, may change at a rate that the young person with autism may not be able to keep up with. The greater acceptance of difference of younger children is replaced by a requirement to conform to fashion and trends. High demands being placed on social networking both in real life and on line. Girls on the spectrum may persist with their quirky and repetitive interests past their usual age range. Girls may become even more obsessed with their special interest e.g., horse riding or pets as an escape from the stress of comparing themselves to their rapidly changing peers.

The onset of puberty, the start of periods and the need to have some understanding of sexual issues and relationships may pose further particular challenges. A flight into isolation or special interest may be the maladaptive response. Increasing awareness of other boys, girls or whatever is the relationship preference places further stresses. There may be confusion around gender and sexuality. At this point co-morbidity of depression may become more evident as girls struggle to understand the confusing changes of teenage years. Alienation and bullying may become more likely to occur. The struggle for identity, to say and do the right thing, and wear the right clothes may all be too stressful and overwhelming. The more adaptive individuals may learn to mimic their peers in fashion, interests and language style. Some young women (and boys) find refuge in a youth cult such as punk, gothic or emo identities. These expect social deviance and alienation as part of the identity. This may normalise their own experience through appearing (and feeling) different and thus reduce dissonance and their inner conflicts.

Co-morbid anxiety or mood problems may lead to self harm, for example cutting. This is quite endemic in our schools. Drugs or alcohol may be used as self medication, to reduce social anxiety and avoidance in those who seek out relationships. In teenage girls this increases vulnerability and risk. Autism may predispose individuals to inappropriate relationships and exploitation. On the other hand, they may be attracted to others on the spectrum. In some cases,



the severity of social awkwardness and fear along with oddness in personality and behaviour may make it almost impossible to form romantic relationships with others. Here, there is ample opportunity for low self esteem to take root. Bad experiences may exacerbate anxiety and mood problems. The risks of frankly abusive relationships or sexual assault are increased.

On the positive side, girls who are high functioning and bright and are from loving and supportive families may have many protective and normalising factors. In an academic setting a young woman on the autism spectrum may achieve excellence in science, languages, arts or music and go on to higher education. If they have escaped alienation, bullying, low self esteem and co-morbid depression their traits may go undiagnosed altogether. If functioning and quality of life are good, the question of whether they may or may not have autism may not be raised at all. There must be many on the spectrum in academia, IT, the arts, medicine, engineering, and science who are highly successful and happy. Relationships, once established, may have their own challenges and this will be the topic of a further article to follow. ■



Dr Kev Appleton is Consultant Child and Adolescent Psychiatrist. He is also Honorary Senior Lecturer in Psychological Medicine at Auckland University. He was on the New Zealand Guidelines Group for ASD and also ADHD.

DIVERSITY and INCLUSION

By Glenn Lambert-Vickers

The Altogether Autism Conference held in July was an excellent gathering of the autism community of Aotearoa New Zealand. It attracted 240 delegates, including people on the spectrum, their families, and professionals, while MP Hon Ruth Dyson and media representatives also attended sessions.

The biennial (once every two years) conference showcased lived experience and professional expertise with a mixture of workshops and keynote presentations. Two extended workshops were popular highlights for many delegates: *Using psychological tests* facilitated by Tanya Breen and Jenny Gibbs, and *Know your legal rights and responsibilities* with Nan Jensen.

National manager Catherine Trezona believes the diversity of the conference reflects the Altogether Autism community. "Our key goals for the conference were diversity and inclusion, and this was reflected in the range of lived, family and professional experience across the sessions."

Māori and Pasifika perspectives were a key focus, with sessions aimed at sharing lived experience from families and community leaders. Bernie Wastney delivered a keynote presentation sharing a Māori whānau experience of autism, with advice for professionals on building partnerships with families. Dorothy Taare-Smith provided attendees with a kaupapa Māori alternative for supporting Māori learners with autism, while Betty Pulefolau-Kolose discussed bringing autism awareness to the Pasifika community.

Attendees at the Applied Theatre Specialist workshop were treated to a live demonstration by Mind Over Manner of sensory processing differences and neural anxiety through a hypothetical family scenario. Facilitator Susan Haldane guided the audience

Feedback from delegates was overwhelmingly positive, with many commenting on the well-balanced programme, and appreciating the lived experience and professional points of view shared in both the keynotes and break-outs. The plenaries were full to capacity reflecting the popularity of the sessions.

Our sincere thanks to the keynote presenters, facilitators, and all involved for making the 2015 Altogether Autism AUT'Be conference such a success. ■

A selection of presentations are available on the Altogether Autism website to download. <http://www.altogetherautism.org.nz/conference/conference-speaker-presentations/>

▼ **POSITIVE CONFERENCE (Pictured left to right)**
Altogether Autism national manager Catherine Trezona, Labour MP Hon Ruth Dyson and LIFE Unlimited CEO Mark Brown.

AUT T'BE



PRACTICALITIES AND PEER SUPPORT FOR AUTISM DIAGNOSTICIANS

By Tanya Breen

Diagnosticians from across the country met to share information on processes and experiences at the Altogether Autism Conference in July. To stimulate discussion, mini presentations were given by Marleen Verhoeven (Counties Manukau DHB), Andrea Hannah (Hawke's Bay DHB), Catherine Swan, (Canterbury DHB), Jenny Gibbs (Waikato DHB), and Tanya Breen (private practice). Discussion was robust, and by the end of the two-hour workshop the following points were clear:

The assessment recommended in the New Zealand Autism Spectrum Disorder Guideline is aspirational, and extremely hard to implement within DHB services and private practice. Consequently, "good enough" assessment processes have been developed.

Demand for diagnostic assessment is huge and waiting lists can be very long. In some areas a child referred today for diagnostic assessment will wait for 18 months to be seen. Even in private practice there can be months between referral and assessment.

Experienced diagnosticians are still a limited commodity, and holidays, sick leave, or professional development leave can have a huge impact, as can people changing jobs and organisations restructuring.

People with very obvious symptoms of autism are more likely to be diagnosed quickly than people with less obvious symptoms and/or complicating conditions, because sufficient information to make diagnosis can be gathered without requiring testing and multiple sources of information.

Clients often underestimate the amount of time needed for diagnostic assessment. Even a brief assessment of someone with very clear symptoms of autism is likely to require several hours

to interview, consider, discuss with peers, write up, and disclose. Children and their parents seen at clinics may be there for only an hour, but three professionals could be involved in observation, testing and interviewing, meeting afterwards to discuss the case, then each would need to write up their findings, and one would compile the overall report. So what is a one-hour contact for the person under investigation, could easily translate to eight or more professional hours.

A wide range of autism tests are used, including those that are clinician-administered, self-reported, or completed by significant others. No one test was used by all presenters.

Some autism tests are too expensive, either in how much they cost, or the time they take to administer. Given that no autism test is diagnostic in its own right, and that test results are always only part of a bigger process, using autism tests is not essential and tests may only be needed when presentation is complex and/or the assessment needs to be highly robust (e.g., needed for legal purposes).

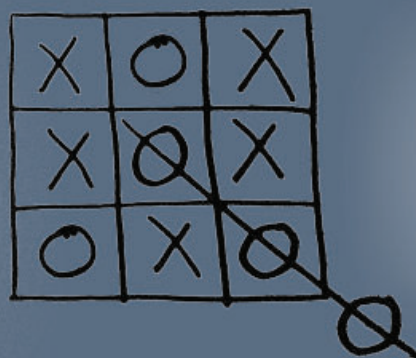
Training in the use of some autism tests is expensive, with only rare opportunities occurring within New Zealand, rendering overseas travel a necessity and depleting training budgets and study leave allocations.

Finally, diagnosticians want to network, so that they can share local processes and solutions, develop agreement on what assessment is "good enough", seek and receive advice from peers working in other areas, share tests and test information, create NZ-based learning opportunities, and support one another. Altogether Autism committed to taking this forward, has e-mailed all people who attended the workshop, and is developing a more formal process to support networking. To that end, we invite any diagnosticians who are interested in being part of this network to contact us, letting us know their name, professional training, and contact details. ■

Tanya Breen is a clinical psychologist in private practice and also is a consultant for Altogether Autism.



THINK
OUTSIDE
THE
BOX



ALTOGETHER
AUTISM

The Spark: A mother's story of nurturing, genius and autism, by Kristine Barnett. 2013, Penguin. RRP \$10.99 (paperback); \$9.99 (Kindle). Reviewed by Catherine Trezona.

The Education and Science Select Committee has recently opened an inquiry into the identification and support for students with dyslexia, dyspraxia and autism in primary and secondary schools.

This process has invited families to share their frustrations and aspirations for their children in New Zealand schools, and the stories shared with Altogether Autism are powerful and a testimony of parental perseverance.

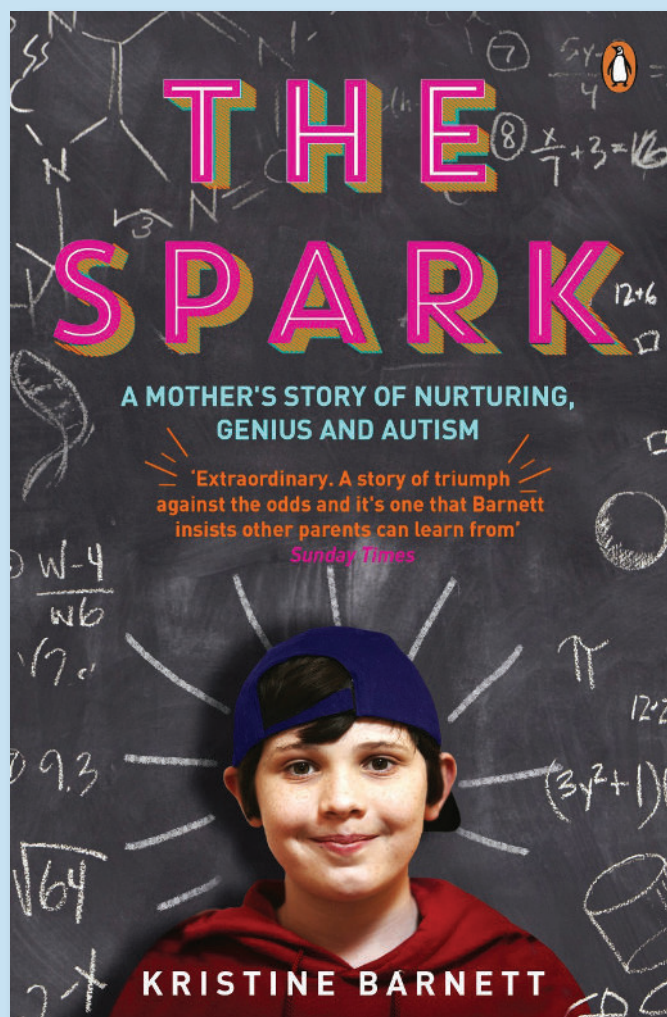
In *The Spark*, one mother shares her frustration with the US school system and special education framework which she encountered when her son Jake was diagnosed with autism at age two. This book is named after a pivotal moment in Jake's life, when his special education teacher recommended he leave his beloved alphabet cards at home, because she did not believe Jake would ever learn to read. This moment motivated his mother Kristine to buck the 'experts' – to remove Jake from the special education class and homeschool him, in an environment that would 'lean into his passions'. In this environment, Jake had as many alphabet cards as he wanted, as well as maps and puzzles. Soon Kristine was preparing not only Jake but other autistic children to successfully enter mainstream schools, through Little Light, the learning centre she ran out of the family garage.

Even as a baby, Jake was fascinated by light, patterns and colour, spending hours staring at shadows on the wall. At age three he loved to arrange hundreds of crayons in the order of the colour spectrum. This fascination hinted at the later discovery that Jake has an IQ higher than Einstein's.

At nine years of age he began developing a theory in astrophysics that may see him awarded the Nobel Prize. He became a university researcher in quantum mechanics at age 12. In 2013 he was admitted as the youngest student ever to the prestigious Perimeter Scholars International, where he completed a programme in 2014 and is now a doctoral student at the Perimeter Institute.

The Spark is a cautionary tale of one boy whose savant abilities were 'almost obliterated by the system'. This book is an inspiration and a tribute to all mothers who battle to give their children, not just those with exceptional abilities, the environment and support they need to achieve their potential. ■

***The Spark* is available for free rental from the Parent to Parent library <http://www.parent2parent.org.nz/library/nationallibrary/> Check out Jake's presentation at TEDx Teen, recorded in 2012, entitled "Forget what you know" <http://tedxteen.com/talks/tedxteen-2012/111-jacob-barnett-forget-what-you-know>**



BEYOND DIAGNOSIS: WELCOME TO THE AUTISM SPECTRUM

Written by adults on the autism spectrum who are members of the ASK Trust, the Welcome Booklet was initially aimed at the newly diagnosed adult.

The 44 page book explains, cautions and empowers.

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AVAILABLE FROM ALTOGETHER AUTISM AND WWW.ASKNZ.NET

PRISM FOR PROFESSIONALS

By Glenn Lambert-Vickers

Altogether Autism has developed the Prism Professional Development series to provide professionals with the knowledge they need to understand autism and effectively support individuals.

Altogether Autism has developed the Prism Professional Development Series to provide professionals with the knowledge they need to understand autism and effectively support individuals.

Each workshop is customised and participants can choose from a range of topics including strategies for managing change and stress, creating autism friendly environments, and positive behaviour supports.

Prism delivers evidence-based training that is relevant to New Zealand work settings -at an appropriate level for professionals. The information presented in the Prism series has been developed by experts working in the field, in consultation with people on the spectrum, and is presented by specialist facilitators who have an in depth knowledge of autism and associated issues.

Altogether Autism National Manager Catherine Trezona says "Prism draws from current best practice as well as the lived experience of our Consumer Reference Group, bringing a unique depth of understanding to the training. Feedback from professionals

suggested a strong interest in offering these workshops to individuals as well as organisations.. The appointment of our new researchers means that we can expand our Prism series to further meet the needs of professionals working with people on the spectrum."

Attending Prism workshops will give professionals a greater understanding of behaviours and assist them to provide positive support for people with autism.

Feedback from professionals who have attended Prism has been overwhelmingly positive, with many mentioning the benefits of being able to share challenges and find solutions in a supportive environment. ■

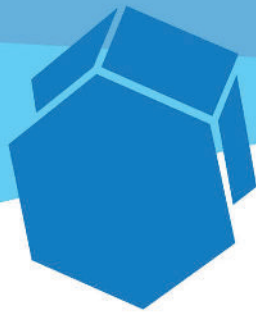
For more information on the Prism Professional Development Series contact Altogether Autism 0800 273 463 or visit www.altogetherautism.org.nz

Amanda Phillips, one of our specialist Prism facilitators in action.



Balls in flow activity with Catherine Trezona and Prism participants from Community Connections.

PRISM



PROFESSIONAL DEVELOPMENT SERIES

PRISM Professional Development Series is for anyone who works supporting people on the autism spectrum. Developed by Altogether Autism, it is based on theoretical, academic and clinical knowledge, and delivered by specialist facilitators.

All workshops are interactive and present information in ways to appeal to different people, including role-plays, videos, group exercises and discussion. Participants are provided with a comprehensive workbook and ongoing access to tailor made information. In addition, every Prism graduate is invited to join our bi-monthly virtual forum for professionals

UPCOMING WORKSHOPS

CHRISTCHURCH

Monday 23 November

9.30am – 4pm

CCS Disability Action
224 Lichfield st
Christchurch

WELLINGTON

Tuesday 24 November

9.30am – 4pm

Angus Inn
Corner Waterloo Road &
Cornwall Street,
Lower Hutt

AUCKLAND

Wednesday 25 November

9.30am – 4pm

Yarnton House
14 Erson Avenue
Royal Oak

Please note that this workshop may be rescheduled if minimum numbers are not reached. A full refund or the option to transfer to a rescheduled workshop date will be offered.

\$230 incl GST per person includes morning/afternoon tea and lunch.

CONTACT AILEEN • 0800 273 463

