

AUTISM NEWS

Newsletter of Autism Tasmania Inc.

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WHAT'S ON!

REPRINT LIST

BRANCH BUSINESS

FROM THE PRESIDENT

Welcome to the first newsletter of the new century.......is it actually the first for the new millenium? Whatever you believe, we are well into the New Year with lots of interesting activities for the next six months. In this newsletter you will see our calendar with seminars we are presenting up until July. We welcome your suggestions for future activities during the year.

Autism Victoria has had confirmation that they will host the Inaugural World Autism Congress in Melbourne in November 2002. This major event will be the result of a collaborative effort between Autism Victoria, other State Autism Associations, the World Autism Organisation and Autism Europe. The target is 1500 delegates attending over the four days of the conference. Autism Tasmania will keep you up to date with details.

As many of our children grow up they move into a new sector of service provision which is not always as readily available as it should be. Over the next couple of months a small team of people will be investigating what service provision exists for adolescents and adults in Tasmania. We would appreciate any information or feedback from anyone who has already had access to services in this area. As information comes to hand we will include it in future newsletters.

Please note the Centrelink news in this edition as well as the article from Family Based Care.

Best wishes to all our readers, especially those receiving the newsletter for the first time.

Rose Clark

Disclaimer

The opinions expressed in this Newsletter are those of the writer and do not necessarily reflect the views of Autism Tasmania Inc.

Any mention of products or treatments does not constitute an endorsement.

The Editor reserves the right to follow normal subediting procedure.

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EDITORIAL

Welcome to the March Issue of Autism Tasmania. I hope that you all find something of interest in this issue. It covers a wide range of topics including a special collection on Social Skills and Language.

A new service to members is introduced this quarter – A reprint service for feature articles from each issue is available for the price of a 45c stamp and a self addressed envelope. There is a list of articles in this issue. Just drop a line to our PO Box marked ATTENTION REPRINT SERVICE and we'll do the rest.

The deadline for the next issue will be 31st May. This will be firmly adhered to and articles or reports received after this time will have to be held over until the next issue — in September

Articles may be emailed to me. The committee's emails are listed on this page
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growing up, living and working as a person with Autism were fascinating to parents and professionals alike.

A highlight of her presentation was her positive attitude to the employment possibilities for individuals with Autism—believing that many people on the spectrum have much to offer employers—so long as their strengths and weaknesses are properly handled.

Autism Tasmania generously subsidised Temple's seminar; to enable as many members as possible to attend. A delicious luncheon and afternoon tea were provided and Commonwealth Respite for Carers funds were available for those parents who needed care for their child in order to attend.

The overwhelming impression was that this was a very worthwhile, informative and enjoyable seminar.

Cheryl

AUTISM 99 INTERNET CONFERENCE

This unique event took place in November 1999. Over 100 papers were contributed by parents and professionals from around the world, and the site received nearly 10,000 registrations! The papers have been archived but are still available to be down loaded.

The website is **www.autism99.org** and it is well worth a visit. . Cheryl

NATIONAL AUTISM AWARENESS WEEK

This year, the National slogan for Autism Awareness Week is "Autism- a world of Difference". The slogan will be introduced during the week May 14th to May 20th 2000.

Our new community service announcement will be seen on Southern Cross during the week. Activities for the National Autism Awareness Week will be mailed to you closer to the time. Rose

FEATURE ARTICLES

REPORT OF THE VISIT BY DR FRANCESCA HAPPÉ, NOVEMBER 1999

Reprinted from the Autism Vic Newsletter Dec 1999.

"We were delighted to welcome Francesca as our guest to Melbourne. She gave two key presentations during her stay, and had informal meetings with members of the Autism Services Coordinating committee and staff of the Royal Children's Hospital. Francesca's presentations were based on two key papers that she has published -copies of these papers are available from the Autism Victoria office."

In her presentation at Monash University, Francesca detailed the development of a new way of viewing the deficits of autism. She referred to the cognitive (or learning) style of the autistic person, rather than the cognitive deficit. example, the Theory of Mind literature refers to how rapidly and accurately individuals read the intent and meaning of others from their words and actions. This work showed that most autistic people 'failed' Theory of Mind tests. Francesca noted that by concentrating on this task failure, we were missing valuable information about the nature of autism. She believes that we should focus on what autistic people are good at.- things such as: rote memory, computers, maths. music, puzzles drawing and such.

Francesca has been researching the suggestion that autism is characterised by a cognitive style biased towards <u>local</u> rather than <u>global</u> information processing. This is termed 'weak central coherence'. Central coherence refers to our drive to see meaning in the big picture. It has been

observed that autistic people often show they have absorbed isolated detail but have not grasped the overall message or purpose of an activity, scene or event. Tests using visual illusions shape designs and verbal semantic tests reinforced the observation that autistic people see the whole picture as 'lots of little parts' For example, they only 'hear' part of a sentence, or see part of a person's face.

Having a 'weak central coherence' provides both advantages and disadvantages. There are many non autistic people who have a preference for 'parts' rather than 'wholes' - those who focus on minute detail or complete complex puzzles in a flash. Whilst cognitive style varies within the normal population, those at the weak central coherence end of the continuum may, when coupled with, say, Theory of Mind deficits, have a predisposition toward developing an' autistic disorder'.

Francesca presented this complex theory in a fluid and coherent manner, leaving her audience extremely excited and challenged by these new ideas. The Theory of Central Coherence will add to the body of material about the cognitive aspects of autism that we have already derived from work on the Theory of Mind and Executive Functioning. Central Coherence will also help in our exploration of the observed anomalies between the IQ scores and levels of functioning of autistic children.

Reference:

"Autism: cognitive deficit or cognitive style?" Happé, F., in Trends in Cognitive Sciences, Vol. 3, no.6, June 1999, pp 216 -222

Reprinted with permission from Autism Victoria

MAYBE THE HAND NEEDED TO BE BITTEN

by Joan McKenna Kerr, Executive Director of Autism Association of Western Australia (Inc)

A number of questions from participants at a recent Association workshop brought to mind an event not long ago when staff were asked to provide consultancy to another agency on a young man with a history of behavioural problems.

The incident which precipitated Association involvement was one where a support worker had been bitten on the hand by the young man.

It is understandable in a situation like this that the focus becomes one of how to fix the individual so the behaviour will not be repeated. However all too often in the field of Autism problem behaviour is understood. and acted upon, too narrowly without reference to its underlying cause. In order to change behaviour we must understand why problem behaviour occurs in the first place and what sustains its ongoing continuation.

Problem behaviour is far too often only seen and interpreted from the vantage point of one of the partners in the relationship ie. the non disabled person. This is not deliberate or intentional. It occurs because systems of care for people with disabilities all too often are still based on a psychology of custody. Those of us without disabilities become the custodians; psychologically as well as physically, of those in our care.

It is this role of custodian which allows us to narrowly define the nature of any social situation in terms of its impact upon us, the non disabled. Problem behaviour, therefore, is seen only through the prism of our needs rather than what it says about the needs of the person with a disability.

We must take care when responding to problem behaviour that we review and consider the whole story. Behaviour always involves a triangular relationship between the person with Autism, the environment and the expectation/ social interaction of the person providing support. To change behaviour we must review each part of the triangle and not simply focus on the person with Autism.-

It is important when addressing problem behaviour to look at the conditions of the person's life and not simply focus on the immediate behavioural antecedents. We especially need to consider the role of communication impairment and its impact on the everyday life of the person with Autism.

Sometimes we are met with aggressive outbursts when we do not listen to the silent communication of the person trying to express a need or want or preference when we become oblivious to the distress and frustration of the person whose life, for the most part is restricted and controlled. Saying, as we do in this title to this article, that maybe the hand needed to be bitten is really another way of cautioning us when defining the nature of a problem. It emphasises that problems we are presented with are usually an interpretation of events from one perspective only.

What for us, might be a problem of behavioural outbursts which need to be stopped, from the point of view of the person with Autism can be a problem of getting us to listen and to respect the choices they are making about the everyday conditions of their lives e.g -"I don't like the way you am hurrying me along"; "No. I don't want to do this now", "I'm tired/I'm sick/I'm bored/I'm hungry"; "I don't understand".

In saying that maybe the hand needed to be bitten is not to condone or accept aggressive behaviour. Aggressive behaviour is not acceptable, and behaviour management strategies are among the important immediate interventions in such circumstances.

However, we need to look beyond those behaviour management approaches which narrowly

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address behaviour problems by focusing solely on the need for compliance i.e only on this need for change in she person with Autism. In order to eliminate aggressive behaviour, sometimes it is us who need to change.

Non-disabled people enter into relationships with others within a framework of choice and social rules of engagement which protects each participants personal autonomy. Added to this are the taken-for-granted skills of communication through which we express the boundaries between self and others, modify the demands of others and "cry foul" when others overstep the mark.

People with a disability such at Autism, on the other hand enter into relationships within a very unequal framework, The rules of engagement often favour a love or skill not acquired by the individual with Autism. Consequently, in failing to understand, or in being unable to communicate their needs or wishes the person communicates with the only means at their disposal: their behaviour.

The purpose of this article is not to downplay the need for concrete intervention in responding to aggressive behaviour. However it should highlight that the need for intervention must often go beyond what is immediately obvious.

In attending to problem behaviour, we need to look at the broad context of the person's life; the nature or our expectations, the opportunities the person has to make choices; the need for appropriate augmentative communication (where the person is impaired in verbal communication); and the content and style of our interpersonal relationship with the individual.

We need to examine what the behaviour is communicating in order to know what it is which needs to change.

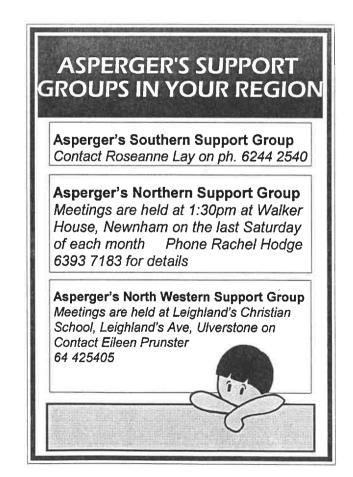
Does the person have a means of communicating their needs and wishes? Is our approach sufficiently calm and predictable? Are our expectations out of step with the person's skill level? Is the environment overbusy and noisy? Does the

person have opportunities to make choices and to engage in the activities they enjoy?

Without addressing these important issues of support, we may in fact leave the individual with no means other than their behaviour through which to have some control over their life. In such circumstances, it should not come as a surprise when the hand is bitten

By Joan McKenna Kerr

Reprinted from Autism News (WA) Mar'99 Volume 7



AN OVERVIEW OF THE AREAS COVERED BY LANGUAGE PRAGMATICS

(with thanks to Mary Fleming, from the Alfred CAMHS Developmental Assessment Team)

The basic purpose of a child's communication system include

- a means of controlling the situation
- the giving of information
- the conveying of imaginative thoughts for use in play and social interaction

The pragmatics of communication cover four main areas:

- function
- discourse (what happens in a conversation)
- joint attention (this can be proto imperative do this! or proto declarative look at this!)

Pragmatic dysfunction can exist irrespective of the child's level of functioning. Children who perform reasonably well cognitively and even score OK in tests of expressive and receptive language skills can have very poor pragmatics.

1 FUNCTION OF LANGUAGE

We use language to

- satisfy our own needs
- control the behaviour of others
- participate in social interchange
- express personal opinions
- obtain information

2 COMMUNICATIVE FUNCTIONS

Communication, in all its forms is used to

- indicate level of intent
- direct attention
- request something
- greet, farewell
- label, comment, answer
- reject, deny, protest
- Instruct

Communication is more than speech. It includes

- eye contact, body proximity
- · body language, gesture
- · attending to speaker
- initiating conversation
- turntaking, responding, topic choice
- repairing errors in the communication
- quantity, quality
- manner ... there are many more!

4 CONTEXTUAL VARIATION

Communicators learn to vary their communication

- in style(discourse, argumentative, forceful, gentle..)
- in prosody (loudness)
- by registering variation according to speaker/listener

If your child, or one you are working with has difficulties with language pragmatics, a Speech Pathologist may be able to assist, especially by doing a full assessment. As it is often the case with developmental disabilities, the gathering of information about the child's strengths and weaknesses is extremely useful in helping to understanding their behavioural difficulties. A full assessment of pragmatic skills may also assist in establishing a child's eligibility for the Program for Students with Disabilities and Impairments. The Speech Pathologist should prepare a careful report outlining tests completed, and summarise what these results show about the child's pragmatic skills. This report should be used to support your application for integration support

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Deadline 31st May

The deadline for the next issue of
Autism Tasmania will be 31st May
Please forward your copy to Cheryl Scott
on gipson@netspace.net.au
or phone 63448015 a.h.
to make alternative arrangements

3 DISCOURSE SKILLS

SOCIAL SKILLS STRATEGIES

RED CARD- BLUE CARD- A GAME STRATEGY TO TRY

This item has been written by Teena Caithness and Hilary Johnson from SCIOP - the severe Communication Impairment Outreach Project, based on a strategy developed by Cate Gleeson. It is a simple strategy easily adapted to your home, group or classroom environment.

The aim of this game is to develop "thinking inside your head" or "internal thought"

Often individuals will speak rather than "think inside their head". This is often seen as individuals talking to themselves as they do things. This can be very annoying for family and carers who have to listen to the same information over and over again. Sometimes you end up listening to someone talking about everything that they are doing and thinking in great detail. If that individual is upset or anxious, this verbal language can be excessive or very repetitive. By encouraging an individual to begin to "think" inside their head it is hoped that there will be a decrease, in the amount of unnecessary verbal information.

Prepare a pack of red and blue cards - use the commercially available playing cards - two packs, one red and one blue.

Red Card Blue Card: Structured game Format:

Show the pile of red and blue coloured cards. The pack is shuffled and then the teacher/assistant places the card from the top of the deck face up on

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www.autismtas.org.au

the table. If it is a Blue Card" everyone is to yell out or say, "Blue Card". If it is a Red Card everyone has to be silent. Play this game in short bursts during the week, month and /or term. When the individual is able to only say "Blue Card" and can resist the temptation to yell out or say, "Red Card" is the time when they may be able to apply the concept in daily life.

The game of Red Card Blue Card may need to be played individually and in a group for some time (10 weeks or more) before the individual is able to respond with silence to the Red Card.

Red card Blue Card: Informal Setting

When the individual only responds verbally to the Blue Card it is time to apply this new skill of "thinking inside their head". When the individual talks aloud and it is not appropriate for other people to hear what is being said, use the verbal cue "Red Card". What should occur is that the individual will stop speaking aloud and begin to "think inside their head". This is the start of internal thought. After time and familiarity with the routine, the word "Relax" could be used instead of "Red Card".

Teena Caithness and Hilary Johnson

Reprinted with permission from Autism News VIC Dec 1999

SONGS TO ENHANCE SOCIAL SKILLS

An Autism News reader recently sent an Internet print out from the NBC dateline website www. msnbc.com/news/225628.asp. Entitled "The Music of Music" the item referred to a strategy developed by Jeanne Lyons, parent of an eight year old with Asperger's Syndrome

Shawn told his mum that he hates being different because "I have autism and I have to struggle a lot in school." However he also thinks he is smarter than most kids, possibly because of the enormous

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mass of information he has gathered about his favourite subjects - carnivorous plants and orchids, but cannot understand basic social skills. His mother knows he has to put a great deal of thought and concentration into reading social situations and applying the right 'rules'. She also noticed how he needed self-stimulatory movements like spinning or rolling up in a blanket to help him keep calm and more secure when he is feeling a little 'off kilter'.

Shawn has tantrums or outbursts which he finds very frustrating. His mother noticed that at these times, Shawn heard what she was saying to him, but did not understand. "He hears me perfectly. He understands the words that I am saying, but if there is sensory overload going on, when his skin feels uncomfortable or his mind is spinning with carnivorous plants or orchids, he just can't get it together to focus on what I am saying."

Out of desperation, Jeanne tried singing to Shawn during an outburst. Using lyrics like "stand up straight, get your muscles in control, muscles in control" Shawn responded quickly - "I can hear you, I can understand, I can relate to you now". Taking this simple breakthrough, Jeanne has recorded a CD of social situation songs, such as Personal Space Invader - a lesson in not standing too close to someone else. You can find out more about these songs, and even hear some of them on her website (there is a link from the NBC site noted above).

The mother of a severely autistic 13 year old, Sue Polling, reported that when her son first 'spoke' at age 10, his word were sung, rather than spoken. Sue believes that music therapy also increased her son's ability to follow directions.

Dr Michelle Dunn, a neuro-psychologist has found from her research that the brains of some children with an Autism Spectrum Disorder respond more quickly to tones than to words. "It may be a whole lot easier for some autistic kids tho process musical kinds of information." She cautioned, however, that some autistic children have just as much of a delay processing tones as they do words.

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BOOK REVIEW TEACHING CHILDREN WITH AUTISM TO MIND-READ

Patricia Howlin, Simon Baron-Cohen, and Julie Hadwin

The difficulties experienced by children with an Autism Spectrum Disorder in understanding the intentions and perspectives of others has been a focus of research in recent years. These difficulties have come to be referred to as deficits in 'Theory of Mind'

Many researchers in the field now postulate that the communication and social skills difficulties seen in Autism are the result of an underlying deficit in 'theory of mind' ie: the ability to infer thoughts, beliefs, desires and intentions to others.

Teaching Children with Autism to Mind-Read explores experimental work which may enhance children's ability to understand the perspective of others.

The authors give an extensive account of their intervention programs and provide detailed information about teaching guidelines, strategies and materials to use in improving a child's understanding of emotions, pretence and other people's perspective.

Areas addressed in the book to assist the child include: interpreting facial expression; recognising anger, sadness, fear and happiness; understanding that other people have a different point of view.

This book will be particularly helpful to children with good receptive/expressive language

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WHAT'S ON!

IRLEN LENSES

For those people interested in Irlen Lenses (See edition No.28) consultations are now available in Hobart with Dr Sue Fricker. Dr Fricker has done extensive training in this area and can be contacted on 6223 2895.

Dr Fricker's fee structure is very reasonable and initial appointments are made (for those travelling to Hobart) early in the day with the follow- up appointment and fitting of lenses (if necessary) later in the afternoon. This means only one trip to Hobart for those from the North, North-West and West coast.

Rose Clark

NEWS FROM CENTRELINK

Centrelink has a new publication "Disability Connection" - a newsletter for people who have a disability, illness or injury and the people who care for them. The newsletter is designed to keep you up-to-date with changes and improvements to the Centrelink Services. If you receive a Child Disability Allowance, or a Carer Payment, you will be automatically mailed a copy.

Centrelink has also introduced a phone number for customers with disabilities and carers. Staff taking calls to this new number have been trained in disability awareness issues and well as the technical aspects of payments and services relating to people with disabilities. The phone number is 132717

LIBRARY NEWS

Please note the change to the NW Library contact

Books can be borrowed by ringing

North Tricia Bourke 6334 2843 South Roseanne Lay 6244 2540 North West Eileen Prunster 6442 5405

An upgraded library list will be available in our next newsletter.

GIANT STEPS REPORT

Giant Steps has begun this year on a very positive note with a smaller board and a sound budget. We look forward to a stable and productive year.

We are very pleased to welcome John Christie as our new Principal. He comes to us with a great depth of experience. John's most recent position was at Gib Gate school in Mittagong where he was Headmaster for the past 4 years. Previously he was Headmaster at Cathedral School in Toowoomba. John is no stranger to the state, however. He taught for 12 years at the Friends School in Hobart and during that time was seconded for 2 years to work as Professional Development Officer for nongovernment schools.

We also welcome Nicola Crates to the centre. Nicola is a Speech Pathologist and is currently working one day per week. Negotiations are underway to obtain her services for a greater period of time.

At the end of 1999, we farewelled TAs Jess Gugliotti and Helen Bird, who now work at St Giles. We wish them well in their new endeavours.

Mick Clark has been with Giant Steps in one way or another since its inception, most recently as Program Manager. We thank him for the great work he has done in the past and advise that he has now moved to a position where he will be managing the financial development and promotional aspects of the centre.

Barry O'Keefe has also been involved with Giant Steps for many years and has kindly accepted a voluntary role supervising the building maintenance at the centre. Thanks Barry!

Mark Ward has taken on a voluntary role in Site Development. Welcome back Mark!

Giant Steps is now offering Consultative Services. For further information, contact the centre on 6362 2522. Trish Bourke

FAMILY BASED CARE Allocating Services

People often ask my staff and me what the criteria for entry is in relation to receiving either personal care support or respite through the Home and Community care (HACC) Program as provided by family Based care Association North West Inc. I would like to take this public opportunity to cast some light on this question.

The issue is not complex but does seem to trouble from time to time. The way in which we determine entry to services is two fold.

•First of all, is the person for whom the support is required able to meet the guidelines specified by HACC? To be precise: Is the person requiring support frail aged or possibly a young person with a disability? If the answer is yes to either of these scenarios then the person is most likely able to meet the primary criteria and be eligible for services. It must be remembered, however, that simply being eligible in itself does not guarantee service through the HACC Program or for that matter any other program run by Family Based Care.

•Secondly, and very importantly the other key issue taken into consideration is that of the Organisation's capacity to provide the service requested. This almost always comes down to three key factors: the demonstrated need for support and the capacity of the Organisation's financial of human resources to provide the necessary service at the time. When prioritising need, the Organisation considers complex issues such as the number of services currently being received by the person, the capacity of family and friends to provide appropriate levels of support, the levels of stress experienced by carers and the potential for inappropriate and/or premature institutionalisation for that person.

Most people, understandably, see their personal situation as being of greatest priority and significance and are often at a loss if they are not able to access services when they want it. Unfortunately from a service provider perspective, when you only have a certain amount of money to work with across

an entire region, sometimes there are very real limitations to what can be reasonably offered. Therefore we have an obligation to be objective and fair about the service we are able to offer. This basically means that some people will miss out on receiving support — not because they don't deserve or need support but because there really are some people in the community who need it more at that point in time. Family Based Care Association North West Inc reviews all clients on an annual basis or more often as required. His helps us make best use of the precious resources we have available to us.

I have heard it said from time to time "Well what is the use of an organisation if we can't get help when we need it?" Good question. I will answer it this way. We provide literally many thousands of hours of support to people right across the North West day after day, year after year and that for most people is the "use of it" Gerard Moore Manager

AUTISM TASMANIA YEAR PLANNER

APRIL 1st	Temple Grandin in Launceston at the Sir Raymond Ferrall building University of Tasmania, Newmham	
MAY 14th–20th	Autism Awareness Week	
MAY 19th & 20th	Seminar for parents and professionals focussing on lower functioning people on the Autism Spectrum presented by Marg Hill and Shirley Roberts from Irabina	
JUNE	Peta Kelty and Amelia Bishop Beyond Picture Exchange	
JULY	Seminar for parents and professionals: Sexuality and Autism presented by Jenny Butler	
	Wendy Lawson visiting for seminars, workshops and parent get togethers.	

ONS, BETTER ACCESS

know the Giant Steps program in mania's only specialist school for Autism Spectrum Disorder. The readily come to mind are those of or staff facing yet another financial children making progress in a world onfused them.

Giant Steps continues to enrol chilpart-time basis providing the speand therapy that they need, in an ed to their requirements. Behind wever, a much quieter transformaking place.

econd contract with the Department fiant Steps can now enrol and receive -Category A children, although at the for Category A children.

stration changes approved in Decemean that primary and secondary stuis can now be accepted.

pal, John Christie, says that these given both the Centre and parents a flexibility with enrolment and ons.

nt services are one of the biggest es in our current experience", he said. s is also responding to the diverse ests for help from parents, education

ility Services NW

ved to 2nd Floor Parkside ckwell St Burnie 7320

Oakleigh Park & NWG Hospital opposite Ambulance Station)
O Box 258 Burnie 7320
ORGAN Fax34344122
Sability.nw@dchs.tas. gov.au

Available from Autism Tasmania

Autism Tasmania Information Kit \$12.00 includes postage for Parents \$17.00 includes postage for Professionals

Alert Cards \$1.00 for 20

Gold Lapel Pins \$3.00 + \$1.50pp

Don't forget our library -Available in the:

North West 6334 2843 North West 6442 5405 South 6244 2540

and health professionals by developing a range of practical external services.

Occupational Therapist, Katrina Bock and Play & Social Communication Therapist, Robyn Fraser point out that some families are looking for ways of accessing services without moving to enrolment.

"We want to give people options, to help them gather information and make decisions about the a program that meets the child's needs, as well as the practical skills to make it happen", they said.

They both agree that the opportunities to work with other service providers has been a definite plus.

"In Tasmania, its the partnerships with the various service providers that will improve autism services in the long-term", they added.

For more information about enrolment or any of these services, telephone the Giant Steps Centre on (03) 6362 2522 or fax on (03) 6362 3200.

- Consultancy for individual children available to families, respite centres and schools, etc.
- ♦ Autism specific education and practical training for service providers, educators and carers.
- ♦ The 6-week "Taste of Giant Steps" course of for children with Autism Spectrum Disorders, combining practical and theoretical information sessions for their parents and carers.
- ♦ Two-hour workshops held in conjunction with each course to help other carers and professionals further their skills and knowledge in the field.

Autism Tasmania now offers a reprint service of features articles from our previous issues to members.

Reprints are available on request from the office for the cost of 45c and a self addressed envelope.

Just mark the envelope: ATTENTION: REPRINT SERVICE

A copy of all past issues will also be held in each branch of the library. Here is a brief summary of the feature articles so far...

Auditory integration training Handy Hints for hair cutting Sensory Experience and Autism New treatments for Autism 12 Questions and perhaps some ansorated Research on Autism A Sibling's View on Autism Autism and Computers Asperger Syndrome Our Experience with Auditory Integration training We progress together a mother's perspective Diagnosing Autism - at 18 months? Sensory Integration and Autism Spectrum Disorders Medication and Autism Asperger Syndrome - A Personal Account Stress and Autism	AUTHOR Dr Sue Bettison wers Lawrence Bartak Autistic Ass NSW Colin Nimmo Prof Digby Tantam Michael Rutledge Paula Barnes Vic Autistic Childrens & Adults Ass Bruce Tonge Wendy Lawson
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