

Introduction

Autistic Spectrum Disorder also known as ASD is according to CDC (2022) and NHS (2022) a disability that affects the regular activity of the brain. Children with autism tend to have obstacles in restricting or repetitive behaviour as well as focusing on one interest along with social communication and interaction. It is important to remember that children who have autistic characteristics can find life challenging as they have different ways of moving, learning or paying attention Autism Wales (2023).

Identification and Diagnosis

The process in order to gain a diagnosis is lengthy and complex because they need to assess a child over a period of time, according to Moore and Goodson (2003) children who are awaiting a diagnosis tend to have other struggles such as behaviour issues and their social domains. Kaplan et al (2001), Ronald et al (2010,) Sturm et al (2004) and Gillberg 2010 all state that an accurate diagnosis of autism can be matched with other disorders because autism is not an isolated diagnosis Therefore it is important to have a holistic approach to diagnosing, by considering all symptoms in order to achieve an accurate and precise diagnosis that will come in the form of multi-disciplinary in addition to multi-agency involvement (Peer and Reid 2021). National autistic society (2023) believe that waiting times should be twelve weeks from the referral to first appointment, however as of May 2022 there is more than a 20 month wait from referral to first appointment (Cardiff and Vales university health board - no date). One of many reasons why the process is long and complex is because according to Harris (2021) and the NHS there is no accurate date to diagnose autism. The child behavioural history and development process needs to be studied over a period of time with evidence gathered by a number of different professionals. Farrell (2003) believes gathering information from a number of different professionals can prove difficult, However Howlin (2002) believes that by coming together to gather the information from all involved in the childs' development process and behaviour gives a clear and accurate picture of the child's behaviour and development

Barriers

There are many barriers for children with autism. The barrier we will be discussing this evening is related to how autistic children have a narrow range of interest and often a repetitive nature. National Autistic society (2020) and mass general for children (2019) states that children with autism use repetitive behaviour and intense interests as a source of enjoyment and a coping mechanism. Murray, Lesser and Lawson (2005) argues that this is due to monotropism which is a strength of being able to focus on a low volume of interests, whereas non autistic people are able to focus on more than one thing but with less intensity. A positive according to Glazzard, etal (2015) is that by allowing children to pass on their knowledge of their chosen subject they will be more engaged and enthusiastic towards learning, they will feel heard and proud to be involved in the learning process. On the other hand some children who have narrow interests struggle to do tasks that do not hold their interest unless they are highly motivated by that interest. Richmond-Mancil and Pearl (2008) agree by suggesting that by implementing the specifics of each child into the curriculum, autistic children are more inclined to attempt tasks which have proven difficult in the past. However, some children who have a PDA profile (pathological demand avoidance) will not want their special interest included in the context of school. Therefore it is essential to understand the autistic profile of each child we teach. By an autistic child having a narrow interest it can become challenging in a mainstream learning environment compared to an additional learning needs class as not all staff have the time and resources to change every piece of work into each pupils chosen subject.

Strategy

strategy that is used to ensure autistic children can access the curriculum and achieve their highest potential is using a daily timetable, setting out how the day will look or how each task will look depending on the level of need for each individual helps build structure into the child's life (Harris 2021). Timetables can come in many different forms and individual timetables should be done inline with the needs of each individual (Gregory 2023). While Arthur-Kelly et al (2009) states timetabling enhances communication and shows a visual sequence of how the pupils day will look, allowing for clarity and reducing the demands of memory. A class timetable can be beneficial in order to keep a structure to the day and minimise behaviour within class. Peer and Reid (2021) states that class timetables enable a structure enabling pupils to understand the day's procedure, decreasing stress and anxiety for pupils. On the other hand, Fisher et al (2014) and Hanley et al (2017) argue that too much information on the walls can distract the attention of the class teacher resulting in a negative memory of communication with the class teacher. Barrett et al (2017) estimates for a successful outcome towards the visual timetable the pupils need to have ownership and decision making in relation to what it looks like as well as how it is used. This is in line with the UNCRC article 12, pupils have the right to be heard. Considering all issues spoken about above it suggests that timetables have the potential to have a positive outcome on school life.

Conclusion: It is important to remember that autistic children have the potential and ability to be part of the community and be valuable contributors in society, living a successful life with the right support and strategies in place in order to help children grow at their pace.

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