

CASE STUDY #14: JOHN (Asperger's Syndrome)

odern Psychological research has given us many new diagnoses of disaffiliation

symptomology mental illnesses. With close to 7,000 young people involved in "I CARE" over the last 37 years it is no surprise that several of our clients have been afflicted with these disorders. I write about these cases to help create awareness but also for an admitted fascination I have with the symptomology they display. As mentioned earlier we need to be aware that some of the behaviors we observe in what we think to be recalcitrant behavior can, in fact, be beyond the control of the underachieving client.

Web MD is a great and reliable source of information on many of the PDD's (pervasive developmental disorder) of which Asperger's Syndrome is counted as one:

"Asperger's syndrome has only recently been recognized as a unique disorder. For that reason, the exact number of people with the disorder is unknown. While it is more common than autism, estimates for the United States and Canada range from 1 in every 250 children to 1 in every 10,000. It is four times more likely to occur in males than in females and usually is first diagnosed in children between the ages of 2 and 6 years."

John came to us in his junior year at the recommendation of his guidance counselor. All of his teachers were upset with his disrupting classroom behavior. He wasted little time in our group "playing the fool"...(village idiot big time). Within a few minutes our group members were laughing loudly at John' antics (rolling around the floor, screeching and contorting his face into clown-like expressions). When I asked for an explanation he responded flippantly "I dropped my pen, is there anything wrong with that? Like most people "in charge" of a group of teenagers I am painfully aware of how quickly decorum can be lost and how difficult it can be to restore. (especially on the first night of the new quarter. With all this in mind I blurted out to the group: "This is John's game people, don't play into it. He needs to always be the center of attention and his behavior now is inconsistent with our goals in this group. You are laughing at him and not with him so CUT IT OUT!" As soon as the last word came out of my mouth I was questioning myself:

- 1. Was that disrespectful to someone who can't control what he is doing?
- 2. Has my lack of tolerance eliminated any future chance of working with him?
- 3. Do I allow the flock to wander off to save a single, albeit uber-needy sheep?
- 4. What would a good counselor/teacher have done or said? The die was cast. At the earliest opportunity I got John isolated without drawing attention from the other group members for a little Q and A.

Me: "Were you offended with the way I talked about you in front of the entire group?"

John: "Ah, no...I'm used to it."

Me: "What's your understanding of how is the best way to get people's attention?"

John: "I don't know...they like to laugh."

Me: "We all enjoy a good joke, but most of us don't like being made fun of."

John: "Yeah but... (he is now disconnecting and staring off into space.)

Me: "OK John, I need you here with me NOW! Why are you in this group anyway?" John: "Because my...I got Aspergers and I got thrown out of class and stuff."

Me: "John, you won't get kicked out of here. WE need you here and you need to be here."

John: "Why do YOU need me here?"

Me: "Because we want to be part of your success; you know graduating and feeling more comfortable in groups. Lots of other people here need the same things you need and we can all work together. Also group members need to learn not to laugh at you. So let's get to work, OK?

Like so many other times I wonder if what I've done or said is the "right" approach. I didn't have to wait too long on this one. Within three or four days I got a call from John's SDC (special day class) teacher who said simply: "I don't know what you're doing with John but keep doing it. He is much less of a disturbance in class since he joined your group!"

NOTES: Special needs kids are preceded by paperwork before we ever see them; an IEP (Individualized Education Plan) or a 504 plan filled with adaptation suggestions we should make to encourage/enable the student to be successful in class (group). In "I CARE" this is redundant because our entire approach has been carefully designed to be a radical departure from what goes on in a regular classroom.

This could be a Mission Statement: We distance ourselves from the traditional educational model as much as possible in hopes that kids who come to us with bad memories of failure and humiliation in regular classrooms will have fewer barriers to success here. We want them to get and give each other support and enjoy growth opportunities through volunteering in the community and greater confidence in themselves through serious introspection.

WHAT DOES IT ALL MEAN? I wasn't surprised to hear that there was a cross-over between John's behavior with us and his regular school experience. It is fairly common for success in "I CARE" to show up in "real life". Simply stated: We give them permission to feel better about themselves and all aspects of their lives.