

# Asperger's Syndrome and Pursuing Eligibility for Services: The Case of the "Perfect Misplacement"

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The authorities who decide on entitlement to services are usually unaware of the extent and significance of the disabilities in Asperger Syndrome (AS). Proficient verbal skills, overall IQ usually within the normal or above normal range, and a solitary life style often mask outstanding deficiencies observed primarily in novel or otherwise socially demanding situations, thus decreasing the perception of the very salient needs for supportive intervention. Thus, active participation on the part of the clinician, together with parents and possibly an advocate, to forcefully pursue the patient's eligibility for services is needed.

It appears that, in the past, many individuals with AS were diagnosed as learning disabled with eccentric features, a non-psychiatric diagnostic label that is much less effective in securing services. Others, who were given the diagnosis of autism or PDD-NOS, had often to contend with educational programs designed for much lower functioning children, thus failing to have their relative strengths and unique disabilities properly addressed.

Yet another group of individuals with AS are sometimes characterized as exhibiting "Social-Emotional Maladjustment" (SEM), an educational label that is often associated with conduct problems and willful maladaptive behaviors. These individuals are often placed in educational settings for individuals with conduct disorders, thus allowing for possibly the worse mismatch possible, namely of individuals with a very naive understanding of social situations in a mix with those who can and do manipulate social situations to their advantage without the benefit of self-restraint. It is **very** important, therefore, to stress that although individuals with AS often present with maladaptive and disruptive behaviors in social settings, these are often a result of their narrow and overly concrete understanding of social phenomena, and the resultant overwhelming puzzlement they experience when required to meet the demands of interpersonal life.

Therefore, the social problems exhibited by individuals with AS should be addressed in the context of a thoughtful and comprehensive intervention needed to address their social disability - as a curriculum need, rather than punishable, willful behaviors deserving suspensions or other reprimands that in fact mean very little to them, and only exacerbate their already poor self-esteem. If this issue is ignored, and individuals with AS and individuals with conduct disorders are seen as requiring the same form of intervention, there is a high probability that we will be placing "perfect victims" with "perfect victimizers". **In our contact with adults with AS, we ascertained that this was indeed the case all too often in the past. In fact, this is still very prevalent in different parts of the country.**