



# ANGIE

Angie is a first grade student, educated in a general education setting with aide support. She has a diagnosis of autism and many obsessive compulsive behaviors. However, unlike many students with autism, her intelligence test results and achievement scores are all in the average to above average range. She enjoys her peers and genuinely attempts to engage them in appropriate reciprocal interactions on the computer, the monkey bars and swings during recess, and during centers. Her verbal interactions have an “odd” quality peers and adults report, but her disability is not always readily observable, especially in structured settings. Angie is quite achievement motivated and tries hard to complete all tasks assigned. She enjoys all classroom activities, both structured and unstructured. She hates APE class, however, where they are working on ball skills which she cannot seem to master. There have been occasions when Angie has needed to be physically restrained for up to 20 minutes for self-abusive behaviors such as poking her eyes, scratching herself or hitting herself hard repeatedly with her fists. On a recent occasion, she could not get the glue bottle open, and despite attempting to use some “social scripts” for handling frustration and some “self-talk,” she progressed to self-abuse even with the active intervention of her assigned aide. At other times she handles similar frustrations with ease. There are not current observable predictors for when she will be overwhelmed and when she will not. No time of day or location or activity or presence of certain people have been found to be related to her acting out. Difficulties have developed across activities and settings. She has, however, had several self-abusive bouts in APE class. After the behavior has subsided and she is released from the hold, Angie typically goes on with her work as though nothing has happened. On occasion adults can “predict” that a difficult day will occur based on facial affect appearing flat when she arrives at school. On these days, Angie will occasionally hit herself or scratch one or two times when told “no” or corrected with statements such as “move your chair a little closer.” These behaviors are often fleeting and brief and she complies readily with instructions. She also has these episodes at home and has on one occasion awakened screaming and begun self-abuse. Angie takes medications for attention enhancement and a general tranquilizer.

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