Social Workers' Understanding of Autistic Spectrum Disorders at Mainstream Schools in Riyadh and Dammam cities, Saudi Arabia: An Exploratory Study

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Abstract

Autism spectrum disorders (ASDs) are complex neurodevelopmental disorders that include deficits in social interaction, communication, and the presence of repetitive and restricted behaviors. The number of children with autism spectrum disorder has increased significantly over time, resulting in more children with autism in mainstream schools. Social workers are members of the educational team who help support children and families and are often the first professional to whom families turn to in crisis. Social workers, who are working with children with autism at schools in Saudi Arabia, participated in a survey about their perspectives on working with children who have a diagnosis on the autism spectrum. They reported confidence in understanding the disorders and characteristics of autism spectrum disorders and indicated that they have received training that prepared them to work with this population. As demonstrated, social workers who received training and education on autism spectrum disorders tend to be confident in recognizing the characteristics of autism spectrum disorders.

Keywords: autism, autistic spectrum disorders, ASD, social workers, perceptions, Saudi Arabia, attitudes

1. Introduction

'Autistic spectrum disorder' (ASD) refers to the class of disorders previously defined under the category of 'pervasive developmental disorder' (American Psychiatric Association, 2000). According to the Centers for Disease Control and Prevention (CDCP) (2014), 1 in 68 children in the United States have been diagnosed with autism or a closely related Autism Spectrum Disorder (ASD). Even though, Saudi Arabia does not have a valid data for this group of children, but the

above estimate reflects the global standard. ASD can be recognized through by a number of abnormalities and issues in social and communicative interactions, as well as through affected children's limited range of activities and hobbies, and their modes of behaviour and thought patterns, where each may occur at different levels of severity (Jordan, 1999; Rogers & Ozonoff, 2005; Shea & Gray, 1973). The impact of autistic spectrum disorder on both the affected child and on their family, friends and support network may lead to high levels of stress and anxiety for family members, as well as alter the family dynamics and overall functioning in the families, with much research demonstrating the effects of autism on mothers, fathers, brothers and sisters of those children with autism (Lukas, et al., 1995, Tunali and Power, 2002).

The importance of the support and involvement of social care has been demonstrated in much of the existing literature (Sargent, 1995; Oberheim, 1996; Tarleton and Macaulay, 2002). Social workers are, therefore, necessary participants in the process of assessing the needs and level of support required for families with children who have autism (Kennedy and Wonnacott, 2003), as well as offering and providing support and interventions and promoting the availability and accessibility of related services (Middleton, 1998). Nonetheless, families of children with autism have been shown to consider that social workers do not fully comprehend the variety of autistic spectrum disorders and its characteristics, and that they frequently misunderstand the needs and requirements of affected families and children (Carlin et al., 2004; Hand, 1994; Jones et al., 1997; Oberheim, 1996).

Social workers are members of the educational team that help support children and families cope with difficulties. This includes children with disabilities, such as autism spectrum disorders. According to Epp (2008) social workers provide the connection between school staff and parents; they are trained in recognizing emotional and behavioral problems; they are often the professionals a teacher or parent turns to (p.35). An additional role is being part of the assessment process for special education students (Minnesota School Social Workers Association, 2011). The assessment and treatment of autism spectrum disorders is often a complicated process and requires social workers to partner with families and other professions (VanBergeijk & Shtayermman, 2005). Therefore, it is vital for school social workers to understand the disorders, the characteristics, and treatment of autism spectrum disorders to help increase the quality of life for children with an autism spectrum disorder.

This study explored social workers' perspectives on working with children who have a diagnosis on the autism spectrum. Using a survey of social workers, who are working with children with autism at mainstream schools in Saudi Arabia, this study examined social workers' understanding of autism spectrum disorders, and the interventions they use to serve this population. The information gathered from this study will help expand social workers' knowledge and help them prepare to work with this population. The results of this survey were compared to the literature.

2. Literature Review

2.1 Defining of Autism Spectrum Disorder

The Center for Disease Control (2009) defines autism spectrum disorders (ASD) as a group of developmental disorders with symptoms of significant social, communication, and behavioral problems. The symptoms are generally present before the age of 3 years and may be accompanied by impairment in cognitive functioning, learning, attention, and sensory processing (American Psychiatric Association, 2000; CDC, 2009; Coplan, 2010). It is considered a spectrum of disorders because each individual is affected differently with symptoms that vary in intensity from mild to

severe (Coplan, 2010 p. 10; Exkorn, 2005; CDC, 2009). Individuals with autism spectrum disorder share similar symptoms but there are differences in when the symptoms start, how severe they are, and the nature of the symptoms; no two children are alike (Coplan, 2010; Exkorn, 2005; Volkmar et al., 2004). A child on the severe end of the spectrum might not be able to speak and have cognitive impairment; a child on the mild end may be able to function in a regular classroom and even reach the point where he or she no longer meets criteria for an autism spectrum disorder (Exkorn, 2005 p.7). Autistic disorder will be defined next to help understand where this disorder falls on the spectrum.

2.2 Characteristics of Autism Spectrum Disorders

There are many different characteristics that can be used to describe how ASD affects children. Some of these characteristics include: a delay in communication and social interaction, obsessions over specific objects, repetitive body movements, and having specific routines and rituals which they obsessively follow throughout their day (Willis, 2006). More specifically, the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (2000) stated that an individual must meet at least six of the developmental and behavioral characteristics from the list before the age of three with no evidence for other conditions that are similar. This list of diagnostic criteria includes three broad developmental and behavioral areas including 1) impailments in social interaction; 2) impairments in communication; and 3) restricted repetitive and stereotyped patterns of behavior, interests and activities.

When diagnosing a child who shows characteristics of this complex disorder, one must decide to what extent the specific ASD characteristic affects the child so they can determine where he or she falls on the spectrum (Koegel & LaZebnik, 2004). The diverse characteristics of ASD may have profound effects on the parents of children with ASD. "Parents and clinicians agreed that communication impairment, uneven cognitive abilities, and problems in social relations were the autism-related symptoms that were most stressful for mothers and fathers of school-aged children" (Carter & Davis, 2008, p. 1279). In a similar article, Botts, Hoffman, Hodge, Lopez-Wagner, Nam and Sweeney (2008, p. 155) state, "Behavioral symptoms associated with children's autism including their language and communication difficulties, cognitive impairments, reactivity to frustration, and repetitive, self-stimulatory behavior, have been found to be related to parents' stress."

2.3 Social work Interventions

Social workers have an important role when working with children who have autism spectrum disorders (VanBergeijk &Shtayermman, 2006; Dababnah et al., 2010). One role is providing interventions for students. There is a paucity of literature on the interventions that social workers use for children with autism spectrum disorders. The only intervention found in the literature was the use of group therapy. Research written by social workers who use group therapy will be explored.

One example of the use of group work was illustrated in a study by Mishna and Muskat (2004), in which the researchers studied four school-based groups of four to six members each, all who received direct interventions in social skills from the school social worker along with indirect interventions consisting of consultation for teachers, parents, and peers. Principals and special education or mainstream teachers referred students with disabilities who they considered at risk and in need of social, emotional, and behavioral support. The four groups had a total of 21students, with

13 who participated in qualitative interviews and reported that the group increased their confidence in approaching peers and helped them get along better with others. They found it useful to discuss problems and express their feelings and being with peers who had similar problems helped them feel they were not alone. This study is an example of group therapy for children with disabilities and does not solely focus on children with autism spectrum disorders. Another study by Epp (2008) found group therapy to be an effective intervention for children with an autism spectrum disorder.

Epp (2008) examined the effectiveness of a social skills therapy program for school age children ages 11 through 18 in Ridgefield, Connecticut. The SuperKids program was an after school program that used group therapy with groups of approximately six children of similar age and social communication ability. Of the 79 school children who were enrolled by their parents, 66 participated in the study. The questionnaire measured positive social behaviors including cooperation, assertion, self-control, and responsibility. The problem behaviors measured externalizing behaviors (aggressive acts and poor temper control), internalizing behaviors (sadness and anxiety), and hyperactivity (fidgeting and impulsive acts). Scores revealed a significant improvement in assertion scores, coupled with decreased internalizing behaviors, hyperactivity scores, and problem behavior scores in the students. In addition to providing group work as an intervention, school social workers have many other roles when working with a child with an autism spectrum disorder and their family.

2.4 Social services available in KSA for autism

Saudi Arabia, a Middle Eastern state with over 23 million people and enormous oil wealth faces massive issues of access to health care. Even though the majority of the population is below the age of 16, development services for children with autism disorders are not well established. Although exact figures are not available, studies suggest there has been a significant increase in occurrence of autism in Saudi Arabia. The association between Autism Spectrum Disorders and certain important factors has been investigated in Saudi Arabia. The factor that has been left uninvestigated is the association between age (paternal/maternal) and the risk of having Autism Spectrum Disorders. A study conducted in Riyadh found the possibility of an association between autism and the engineering/maths training of fathers (Eithan, 2010).

At present, out of every 100 children 7.5 are victims of austim. Saudis have access to a national system of treatment facilities, and can obtain any specific medicinal treatment they require. Educational provision in KSA needs to be developed further. Therefore, students who are victims of autism face difficulties in learning despite their different requirements and intellectual abilities. Furthermore, students with high functioning autism or Asperger syndrome frequently go undiagnosed since teachers are not able to recognize their signs and symptoms. As far as the private sector is concerned, only a few centres are available which specialize in the management of autistic children. There are only three centres that specialize in autism and they are as follows:

- 1. Academy of Special Education
- 2. Jeddah Centre for Autism
- 3. Prince Faisal Bin Fahd Mothers' Centre

In last ten years, the ministry of education in Saudi Arabia has great 160 programmers for students with autism at mainstream schools in different cities, such as Riyadh and Dammam (Ministry of education in Saudi Arabia, 2014).

3. Methods

3.1 Participants

This study was conducted with twenty of those responding were female, and eighteen male who working as social worker at mainstream schools. In this area and sample size, all social workers were surveyed (n = 40). All forty workers had experience working for mainstream schools and with children with ASD.

3.2 Survey instrument

The data for this survey were collected through a survey based on a questionnaire created by Mavropoulou and Padeliadu regarding autism (2000) which was derived from previous studies on the topic (Stone, 2000). Consent was obtained from the original authors of the survey. The survey consisted of a self-completion questionnaire, and was posted to social workers in the region. It was necessary to reword some of the questions to make them relevant for social workers as they had originally been used for teachers. The questionnaire focused on four main areas:

- Background information
- Understanding of The key characteristics of ASD
- School Social Work Services
- Attitudes towards regarding the advantages of specialized Interventions of ASD

3.3 Procedure

The survey was sent out in the autumn of 2014 as an anonymous self-completion questionnaire. The total number of questionnaires sent out was fifty, with forty individuals responding, leading to a response rate of 80 %.

3.4 Findings

This study was conducted with social workers who are work with children on the autism spectrum at mainstream schools in Saudi Arabia. Of the 50 social workers, 40 completed the survey for a response rate of 80%. Study findings are presented in 4 sections: background information, Understanding of The key characteristics of ASD, School Social Work Services and Attitudes towards regarding the advantages of specialized Interventions of ASD.

3.4.1 Background Information

Table 1 displays background information about the respondents. The average years of experience worked as a social worker was 4 years, with (n=15) of the respondents who worked for 2 to 4 years and a half (n=20) who had 4 to 6 years of experience and (n=5) social workers had worked more than 6 years. Respondents were asked to indicate the type of school they work in and geographic setting. Respondents represent all geographic settings: It was most common for respondents to have experience working in an primary school and least common for respondents to work in a Elementary school setting. Of the 40 respondents, 35 have experience working in a primary school setting in an Elementary school setting. As noted on Table 1, respondents indicated having training in autism spectrum disorders through professional workshops (n=5) educational in service (n = 20) and (n=15) academic courses.

3.4.2 Understanding of characteristics of children with autism

The respondents were asked to indicate how confident they were the common characteristics associated with the disorders. Table 2 displays their reported confidence levels. The majority of the

respondents rated their understanding of characteristics of ASD as confident. The respondents were very confident in understanding challenges with social interaction with (75%). Moreover, in terms of challenges in Communication skills as characteristic of ASD, respondents were a confidence level with (70%). However, (40%) respondents were a neutral level in terms of Repetitive and Stereotypical Behaviors with children with ASD.

Alongside this, participants had different views on all of these characteristics. As a result, the characteristics considered important for the diagnosis of ASD by some social workers were not assumed by others to have the same importance. Differences in opinion come from the social workers' individual experiences and daily working life, as well as their initial understanding of the disorder. This nevertheless leads to a number of misunderstandings in how to diagnose children with autism, which may affect the needs and requirements of their families and the support available to them.

3.4.3 School Social Work Services

Table 5 displays the respondents' responses to how often their work includes various services. Respondents are most frequently involved in providing services for the child. Of the respondents, 50% include group work as part of their practice weekly and 15 are involved in individual work with the child on a weekly basis. A few respondents described the specific interventions they use when working with children with autism spectrum disorders. Social worker reported: working with children with autism is focused more on the social interaction skills. Specific techniques such as social stories (although useful for other children who are not on the spectrum), 5-point scale, using visuals, and repeated practice are often implemented. Similarly, an elementary school social worker reported, with my group, perhaps more repetition and practice of skill being taught.

As noted in Table 5, respondents individually work with parents but rarely have included group work as a service. When a support group for parents has been used as an intervention it has been on a yearly or monthly basis. Respondents were asked how effective a support group was for parents; 4 found the support group to be effective and 3 found it to be neither effective nor ineffective. As demonstrated by these findings, school social workers tend to be knowledgeable and confident in their understanding of autism spectrum disorders and characteristics. In addition, they have received specialized training to prepare them to work with this population and are sensitive to the distinct needs of children with autism spectrum disorders.

3.4.4 Attitudes towards regarding the advantages of specialized Interventions of ASD

In terms of the advantages of specialist help for children with ASD, 85% of participants considered it as being effective for helping children in developing skills in the areas of independence and self-care, as seen in Table 5. Social workers for the most part strongly advocated the advantages of specialist intervention in complete an activity independently by children with ASD with respond 90.5%. Moreover, the interventions could be providing support the use of verbal communication of children with ASD by respond 85.0%. However, only 10% of the participants considered interventions available help children with ASD to understand others' feelings and behaviour.

4. Discussion

This study reports school social workers' perspectives on working with children with autism spectrum disorders and their families to address the limited literature about social workers' experiences of working with children with autism spectrum disorders. These findings expand on

what is known from social work perspectives (Debabnah & Colleagues, 2010; Peerce & Jordan, 2007; VanBergeijk & Shtayermman, 2006 Epp, 2008, Mishna & Muskat). Comparisons of findings related to background information about respondents, their understanding of autism spectrum disorders, their perspectives on the role of school social work and reports of interventions used are presented. This study included school social workers with a variety of backgrounds including level of licensure, years of experience worked, type of school worked in, geographic setting, and training received in autism spectrum disorders (Table 1). The respondents who participated in this study tended to be graduate level social workers with an average of 10 years of experience as a school social worker. Respondents represented all geographic settings and have the most experience working in Primary school setting. All but one of the school social workers who participated in this study have received specialized training preparing them to work with children and families with autism spectrum disorders.

Overall, school social workers received specialized training to work with children with autism spectrum disorders (Table 1) which appears to be inconsistent with other reports. It may be that the suggestions of Debabnah and colleagues (2011) that social workers are not trained to recognize or advocate for children with autism spectrum disorders and their families, and those by Peerce and Jordan (2007) emphasizing a need to educate and train social workers about autism spectrum disorders are due to the context of statements about social workers in general, rather than focused specifically on those who work in schools. Findings from this study indicate that school social workers tend to be confident in their understanding of the disorders (Table 2). In contrast, Peerce and Jordan (2007) reported inaccuracies in social workers' understanding of characteristics associated with autism spectrum disorders. As noted earlier, discrepancies between these two studies may be related to the work settings of the social workers. This difference indicates that school social workers are more confident in their understanding of autism spectrum disorders because they work in a school setting that may provide them with more training opportunities.

This study (Table 5) expands on the information reported in the literature (Epp, 2008; Mishna & Muskat, 2004) about the role of group work and other services and interventions provided by school social workers. Consistent with previous findings, group work is a common practice used by school social workers with children who have autism spectrum disorders (Table 5). Although group work is a common practice provided for children, respondents report rarely providing a support group for parents (Table5). It has been recommended by Venbergeijk and Shtayermman that social workers should create support groups for parents because it helps them understand the unique learning needs of their child and supports parents in working with schools to meet their child's needs (2005).

Some of the participants' answers to the questionnaire demonstrate that they did not fully understand the contemporary services being provided for children with autism in Saudi Arabia. For instance, the TEACCH approach was considered by a number of participants as a 'communication system', even though this had never been the key focus of this approach. Additionally, most participants considered that the areas of social and emotional understanding of children with ASD could not be aided by any form of intervention; however, work done over the past two decades demonstrates otherwise, with methods such as Social Stories being demonstrated by research to be effective in helping in these areas. Participants did not fully agree on whether or not children with ASD should be aided by general disability interventions and services, with two-thirds considering it not possible. This is, in fact, a more positive response than other research had demonstrated, with

many studies demonstrating that the families of individuals with ASD find it hard to access broad disability services due to their behaviour and its impact on others (Van Bourgondien, 2003), being perceived as not needing the services (Oberheim, 2012), or never getting beyond the waiting list. As a result of this, ASD-specific services have been developed since the 1990s in order to counter the limitations of general services in helping those with autism.

Conclusion

The findings from this study are useful for school social workers who are currently practicing or teaching, and for students interested in the field of school social work. With increased numbers of children with autism spectrum disorders in public schools (CDC, 2009) it is imperative that school social workers understand the disorders and characteristics and effective interventions when working with children with autism spectrum disorders and their families. As demonstrated, school social workers who received training and education on autism spectrum disorders tend to be confident in recognizing the characteristics of autism spectrum disorders (Table 2). There may be a need to provide education and training on autism spectrum disorders to the general population of social workers to ensure they are confident in recognizing the characteristics of autism spectrum disorders to the general population aduitsm spectrum disorders and referring children for screening. It may be beneficial to include information about autism spectrum disorders as part of curricula in college and graduate level social work programs to address this need or to implement trainings in social work settings such as hospital and county social work agencies. Moreover, Attitudes towards methods of services and interventions were explained in this study.

Although this study has attempted to form an overall understanding of social workers and their involvement with children with ASD, it has used only a small sample, and therefore it is impossible to fully generalize to social workers throughout the country, let alone outside of the country. The study was only carried out over a small geographical area where the existing body of services dedicated to the understanding and treatment of ASD had been in operation for over ten years. As a result, it is likely that social workers in this area had a higher level of understanding of autism than elsewhere in the country. This study would be best developed with some further samples taken from more diverse authorities, such as more rural or urban places or areas where services for ASD are less prominent. This would help us to understand whether the conclusions of the study are applicable outside of its given area.

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Tables

	Count N= 100	Percent (%)
Years Social Worker		
2-4	15	37.5
4-6	20	50
More than 6	5	12.5
School Setting		
Primary	35	87.5
Elementary	5	12.5
Type of Training	F	10 5
Professional Workshops	5	12.5
Educational In Service	20	50
Academic Courses	15	3.75

Table 1. Background Information

Table 2. Confidence with Understanding Characteristics of ASD

Characteristics	Very Confident (%)	Neutral (%)	Somewhat (%)	Confident (%)
Social Interaction	75.0	5.0	-	20.0
Communication	22.5	7.5	-	70.0
Repetitive and Stereotypical Behaviors	23.5	50.0	-	21.5

Table 3. School Social Work Services for children with ASD

	Never	Weekly	Monthly	Yearly
Group Work				
Child	6	22	-	-
Parents	30		7	3
Individual Work				
Child	18	15	7	
Parents				

Table 4. Attitudes towards regarding the advantages of specialized Interventions of ASD

Area	(%)
Develop basic self-care skills	85.0
Complete an activity independently	90.5
Reduce the risk of self-injury	50.0
Offer emotional support and relief	30.0
Reduce his/her repetitive behaviours	26.0
Develop emotional relationships with others	23.5
Read and write	15.6
Play with other children	87.0
Support the use of verbal communication	85.0
Understand others' feelings and behaviour	10.0