

**TEACCH RESEARCH REPORT**  
**Current and Past**  
**Published Research**

on

**Autistic Children and Their Families**

**Conducted by Division TEACCH Faculty and Staff**

**(Treatment and Education of Autistic**  
**and related Communication handicapped Children)**

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# Introduction

The legislative mandate for the TEACCH program is directed toward services for autistic children and their families and related research. TEACCH is located in the Department of Psychiatry, University of North Carolina School of Medicine at Chapel Hill. It is an ideal setting for training mental health, allied health, and special education professionals, for developing new treatment models, and for conducting related research.

Over the years it has become increasingly evident that a complex syndrome like autism (and similar disorders) cannot be understood separately from the ecological context of the child's family, school, and community. Accordingly, meaningful research is conducted best within a setting having direct clinical and educational responsibilities for such children and their families. The high degree of satisfaction expressed by most families with our services has yielded a high degree of parental cooperation with our research and training efforts.

The TEACCH Research Report, an elaboration of the research section of the TEACCH Annual Report, includes a summary of research conducted by, or in collaboration with, Division TEACCH faculty and staff. This research is classified by the following 13 categories:

- 1) Adolescence and Adulthood
- 2) Autistic Characteristics.
- 3) Behavior Management
- 4) Biomedical
- 5) Diagnostic Assessment
- 6) Family Factors
- 7) Language
- 8) Parent Involvement
- 9) Teaching Factors
- 10) Autism Theory
- 11) Treatment Model
- 12) Treatment Outcome
- 13) General.

## 1964

Schopler, E. (1964). On the relationship between early tactile experiences and the treatment of an autistic and a schizophrenic child. American Journal of Orthopsychiatry, 34, 339-340.

Summarizes one aspect of a treatment process and presents two therapy strategies for an autistic and a schizophrenic child, focusing on the two children's different tactile experiences. (Autistic Characteristics)

## 1965

Schopler, E. (1965). Early infantile autism and receptor processes. Archives of General Psychiatry, 13, 327-335.

Examines autism as a function of deviation in near-distance receptor usage. Available information supports the view that early infantile autism involves sensory deprivation. Treatments suggested include stimulation and communication via the available near-receptor systems. (Autistic Characteristics)

## 1966

Schopler, E. (1966). Birth order and preference between visual and tactual receptors. Perceptual and Motor Skills, 22, 74.

Analyzed preference scores for 90 normal children for birth order. Only-children scored higher than expected on tactual measures, children with siblings scored higher than expected on visual measures, and no differences were found between oldest and youngest siblings. (Autistic Characteristics)

Schopler, E. (1966). Visual versus tactual receptor preference in normal and schizophrenic children. Journal of Abnormal Psychology, 71, 108-114.

Measured receptor preferences between visual or tactual stimuli in schizophrenic and normal children aged 7-9 using retarded children for MA control. Schizophrenic children were significantly lower in visual preference than same-aged normal children. Retarded individuals showed greater visual preference than did schizophrenic individuals of comparable MA. Implications for theory of schizophrenia were discussed. (Autistic Characteristics)

#### 1969

Schopler, E., & Loftin, J. (1969). Thinking disorders in parents of psychotic children. Journal of Abnormal Psychology, 74, 281-287.

Parents of young psychotic children tested on the Object Sorting Test showed more thought impairment than parents of normal children. It was anticipated that they would not show as much thought impairment as parents of schizophrenic adults. Findings suggested circumscribed test anxiety in association with a psychotic child. (Family Factors)

Schopler, E., & Loftin, J. (1969). Thought disorders in parents of psychotic children: A function of test anxiety. Archives of General Psychiatry, 20, 174-181. Also in S. Chess & A. Thomas (Eds.), (1970), Annual progress in child psychiatry and child development (pp. 472-486); New York: Brunner/Mazel.

Tested parents of psychotic children for conceptual thinking on the Object Sorting Test in the context of their normal child or their psychotic child. Parents tested in reference to their normal child showed less impairment than parents tested in

reference to their psychotic child. Differential OST scores in this context may reflect anxiety reactions rather than thought disorders. (Family Factors)

## 1971

Reichler, R. J., & Schopler, E. (1971). Observations on the nature of human relatedness. Journal of Autism and Childhood Schizophrenia, 1, 283-296.

Hypothesized human relatedness as a multidimensional construct that could be analyzed into simpler functions. Analysis of diagnostic data on 68 psychotic children generated three factors, one of which comprised a cluster of variables representing a measure of human relatedness and perceptual functions. Results of multiple regression analysis suggested that impairment of human relatedness is largely due to impaired perceptual functions. (Autistic Characteristics)

Schopler, E. (1971). Parents of psychotic children as scapegoats. Journal of Contemporary Psychotherapy, 4, 17-22.

Examines conditions and reasons why parents of autistic and psychotic children were regarded as primary agents in their child's psychosis in light of the mechanisms of scapegoating. (Autism Theory)

Schopler, E., Brehm, S. S., Kinsbourne, M., & Reichler, R. J. (1971). Effect of treatment structure on development in autistic children. Archives of General Psychiatry, 24, 415-421.

Assessed the effect of structure variation on the treatment of autistic children by changing structure from relative structure to relative unstructure. Children and

therapists were rated on their reactions. Findings indicated that autistic children reacted more favorably to structure. (Autistic Characteristics)

Schopler, E., & Reichler, R. J. (1971). Developmental therapy by parents with their own autistic child. In M. Rutter (Ed.), Infantile autism: Concepts, characteristics, and treatment (pp. 206-227). London: Churchill-Livingston.

Discusses the rationale for using the developmental therapy model in treating autistic children and describes the structures and procedures of its application in the Child Research Project at UNC. This model assumes the directions of children's development are based in interactions with their parents and uses parents as the primary developmental agents for their own children. (Treatment Model)

Schopler, E., & Reichler, R. J. (1971). Parents as cotherapists in the treatment of psychotic children. Journal of Autism and Childhood Schizophrenia, 1, 87-102. Also in Mental Health Digest, (1971), 3, 17-20. And in S. Chess & A. Thomas (Eds.), (1972), Annual progress in child psychiatry and child development (pp. 679-697); New York: Brunner/Mazel. And in A. Davids (Ed.), (1973), Current issues in psychopathology; Monterey, CA: Brooks/Cole.

Presents a treatment program for psychotic and autistic children that helps parents function as primary developmental agents. Presents initial outcome trends, indicating parents developed effective skills as cotherapists. (Treatment Model)

Schopler, E., & Reichler, R. J. (1971). Problems in the developmental assessment of psychotic children. Excerpta Medica International Congress Series, No. 274, 1307-1311.

Outlines common problems in mental assessment, structure setting, and educational expectations for psychotic children. Presents solutions found to be useful at the Child Research Project. (Diagnostic Assessment)

Schopler, E., & Reichler, R. J. (1971). Psychobiological referents for the treatment of autism. In D. W. Churchill, G. D. Alpern, & M. K. DeMyer (Eds.), Infantile autism (pp. 243-264). Springfield, IL: Thomas.

Discusses 1) the nature of autism, 2) the impaired perceptual mechanisms underlying it, 3) the chief characteristics of parents of autistic children, and 4) the implications of these three points for the training and management of young autistic children. (Treatment Model)

## 1972

American Psychiatric Association. (1972). A program for psychotic children. Hospital and Community Psychiatry, 23, 307-310.

The American Psychiatric Association presented its Gold Achievement Award, the highest presented, to the Child Research Project (now Division TEACCH) in 1972. This report describing the project was published in conjunction with the Gold Award presentation. (Treatment Model)

Schopler, E., & Reichler, R. J. (1972). How well do parents understand their own psychotic child? Journal of Autism and Childhood Schizophrenia, 2, 387-400.

Tested the hypothesis that parents can assess their psychotic child's level of development accurately. Parents of 47 children estimated their child's level of functioning in several developmental areas. Parental estimates correlated significantly with test-based estimates. Parents of mildly psychotic children were relatively poorer estimators than parents of moderately or severely psychotic children. (Family Factors)

### 1973

Schopler, E. (1973). Current approaches to the autistic child. Pediatric Annals, 2, 60-74.

Discusses the shift in orientation of approaches to childhood autism from global generalizations to more specific information from current research in the areas of diagnosis, theories of causation, parent role, treatment, research, and social action. (Autism Theory)

### 1974

Schopler, E. (1974). Changes of direction with psychotic children. In A. Davids (Ed.), Child personality and psychopathology: Current topics (Vol. I) (pp. 205-236). New York: Wiley.

Traces sources of past confusion regarding etiology and treatment of autistic children, including the shift from theoretical beliefs to specific information from current research. Summarizes the current state of affairs and projects future trends based on TEACCH research and clinical experience. (Treatment Model)

Schopler, E. (1974). The stress of autism as ethology [Editorial]. Journal of Autism and Childhood Schizophrenia, 4, 193-196.

A response to Tinbergen's Nobel Prize acceptance speech "Ethology and Stress Diseases," asserting that autism is a form of shyness found in normal children. Editorial suggests that existing epidemiological studies replace acceptance of personal opinion. (Autism Theory)

### 1975

Hargrave, E., & Swisher, L. (1975). Modifying the verbal expression of a child with autistic behaviors. Journal of Autism and Childhood Schizophrenia, 5, 147-154.

Used the Bell and Howell Language Master with the Monterey Language Program to modify the verbal expression of a boy with autistic behaviors, using training modes of a live voice and a tape recording. Results suggested responses to the Language Master were as good as responses to the live voice presentations. (Language)

### 1976

Bristol, M. M. (1976). Control of aggressive behavior through school and homebased reinforcement. In J. Krumboltz & C. Thoresen (Eds.), Counseling methods. New York: Holt, Rinehart, & Winston. Reprinted in part in A. Kazdin (Ed.), (1984), Behavior modification in applied settings (3rd ed.). Homewood, IL: Dorsey.

Presents data illustrating the success of a child-parent-teacher contingency contract in reducing a child's aggressive behavior and increasing social interaction. (Behavior Management)

Edwards, J. L., Shigley, R. H., & Edwards, R. P. (1976). A case report of an autistic boy: Selective responding to components of bidimensional visual and auditory stimuli. Journal of Autism and Childhood Schizophrenia, 6, 139-146.

Trained an autistic boy to discriminate between two auditory and two visual stimuli and subsequently tested for overselective responding. Overselectivity reported in past research did not occur. (Teaching Factors)

Mesibov, G. B. (1976). Alternatives to the principle of normalization. Mental Retardation, 14, 30-32.

(1976). Implications of the normalization principle for psychotic children. Journal of Autism and Childhood Schizophrenia, 6, 360-365.

(1976). Implications of the normalization principle for psychotic children: A response to the responses. Journal of Autism and Childhood Schizophrenia, 6, 373-377.

These articles discuss the normalization principle and illustrate its shortcomings, especially when applied to severely handicapped people. (Teaching Factors)

Reichler, R. J., & Schopler, E. (1976). Developmental therapy: A program model for providing individual services in the community. In E. Schopler & R. J. Reichler (Eds.), Psychopathology and child development: Research and treatment (pp. 347-372). New York: Plenum.

Discusses problems of bringing therapeutic services to children; explores reasons for the lack of adequate services, with reference to the problems of autistic and other severely deviant children; and presents TEACCH as a model for developmental services in the community. (Treatment Model)

Schopler, E. (1976). Childhood psychosis--etiology and autopsy [Guest Editorial]. Schizophrenia Bulletin, 2, 194-195.

Describes the research potential of autopsy material and procedures for obtaining it in collaboration with the National Society for Autistic Children. Outlines an autopsy protocol and relevant current assay methods. (Biomedical Factors)

Schopler, E. (1976). Towards reducing behavior problems in autistic children. In L. Wing (Ed.), Early childhood autism (2nd ed.) (pp. 221-245). Oxford: Pergamon.

Identifies relationships between historical assumptions of autism as a response to family stress and as parental difficulties in managing an autistic child. Identifies management difficulties and makes suggestions for helping parental management through changing treatment structures. (Behavior Management)

Schopler, E., & Reichler, R. J. (1976). Psychoeducational profile. Chapel Hill, NC: Child Development Products.

The first edition of the diagnostic tool for designing individualized instruction and home teaching programs for handicapped children. (Diagnostic Assessment)

Schopler, E., & Reichler, R. J. (Eds.). (1976). Psychopathology and child development: Research and treatment. New York: Plenum.

An overview of knowledge about severe childhood psychopathology that applies findings of developmental research with normal children to developmental processes in seriously disturbed children. (General Studies)

Swisher, L., Reichler, R. J., & Short, A. (1976). Language development history and change in autistic children. In S. K. Hirsch, D. H. Eldridge, I. J. Hirsch, & S. R.

Silverman (Eds.), Hearing and Davis: Essays honoring Hallowell Davis. Saint Louis, MO: Washington University Press.

An investigation of the relationship between early language development and prognosis for autistic children. (Language)

### **1977**

Marcus, L. M. (1977). Patterns of coping in families of psychotic children. American Journal of Orthopsychiatry, 47, 388-399.

Examines variables affecting family adaptation to severely and chronically disabling cognitive and behavioral conditions such as parents' perceptions of their child's unusual characteristics and effects of social relationships. (Family Factors)

Marcus, L., Semrau, L., & Schopler, E. (1977). Division TEACCH: Toward a statewide network of public school services for the autistic child and his family. Coordinating Office for Regional Resource Centers, August, 34-44. Washington, DC.

Presents the TEACCH model derived from experience and joint efforts with autistic children and their parents. Public school integration, parent collaboration, individualization, and a developmental framework are important facets of this program. (Treatment Model)

Schopler, E. (1977). Treatment of autistic children: Historical perspective. In P. Mittler (Ed.), Research to practice in mental retardation: Care and intervention (Vol. I) (pp. 237-243). Baltimore, MD: University Park.

Reviews what is known or inferred about autistic children and their treatment including how they were understood and treated during the decades following Kanner's discovery of the syndrome in 1943 and current approaches to their treatment. (Autism Theory)

Schroeder, C. S., & Mesibov, G. B. (1977). Module V--A behavioral approach to behavior problems and development of new skills (Text & Workbook). In P. K. Fullagar & M. E. Glover (Eds.), Competency based training: A manual for staff serving developmentally disabled children (Text & Workbook). Chapel Hill: Chapel Hill Outreach Training Project.

A competency-based approach for teaching behavioral principles to staffs of developmental day-care centers. (Behavior Management)

Sloan, J. L., & Schopler, E. (1977). Some thoughts about developing programs for autistic adolescents. Journal of Pediatric Psychology, 2, 187-190.

Reviews residential, employment, and social adjustment needs of older autistic people and their families. Concludes that an individualized intervention program in which parents have primary responsibility for decisions made about their child provides the best treatment approach. (Adolescence and Adulthood)

## 1978

Glover, E., & Mesibov, G. B. (1978). An interest center sensory stimulation program for severely and profoundly retarded children. Education and Training of the Mentally Retarded, 13, 172-177.

Describes a classroom curriculum for use with severely handicapped nonambulatory people. (Teaching Factors)

Lansing, M., & Schopler, E. (1978). Individualized education: A public school model. In M. Rutter & E. Schopler (Eds.), Autism: A reappraisal of concepts and treatment (pp. 439-452). New York: Plenum.

Suggests methods to individualize educational curricula for autistic children including assessment of the autistic child's unique strengths and weaknesses and parental involvement in the educational process. Cites TEACCH as a model for developing administrative structures to facilitate individualization. (Treatment Model)

Lord, K., & Baker, A. (1978). Communicating with autistic children. Journal of Pediatric Psychology, 2, 181-186.

Discusses language disorders of autistic children as they affect delivery of health care and other services. Reviews research of communication-related deficits and presents methods for communicating with autistic children in health care settings. (Language)

Marcus, L. M. (1978). Developmental assessment as a basis for planning educational programs for autistic children. Behavioral Disorders, 3, 219-226.

Describes the Psychoeducational Profile's comprehensive evaluation of developmental functioning of autistic children. Considers factors involved in programming from assessment data, including understanding a child's abilities, selection of goals and methods, and anticipation of potential management problems. (Diagnostic Assessment)

Marcus, L., Lansing, M., Andrews, C., & Schopler, E. (1978). Improvement of teaching effectiveness in parents of autistic children. Journal of the American Academy of Child Psychiatry, 17, 625-639.

Rated mothers on teaching unfamiliar tasks to their autistic children. Test-retest comparisons indicated positive changes in teaching effectiveness, supporting the intervention model of parents as cotherapists. (Treatment Outcome)

Rutter, M., & Schopler, E. (Eds.). (1978). Autism: A reappraisal of concepts and treatment. New York: Plenum. Translated into Japanese, 1982.

Presents a review of current knowledge, research, and clinical practice. Contributors, reporting on research conducted in a variety of environments, evaluate new ideas and concepts in approaches to dealing with the problems of autism. (General Studies)

Schopler, E. (1978). Changing parental involvement in behavioral treatment. In M. Rutter & E. Schopler (Eds.), Autism: A reappraisal of concepts and treatment (pp. 413-421). New York: Plenum.

Discusses the history of two important shifts in the treatment of autistic children: 1) the shift from parent as causative factor to parent as effective treatment agent and 2) the development of therapeutic treatment approaches derived from behavior modification techniques. (Parent Involvement)

Schopler, E. (1978). Collaboration with parents of autistic children. In L. E. Arnold (Ed.), Helping parents help their children: A handbook for professionals who guide parents (pp. 220-231). New York: Brunner/Mazel.

Describes the role of parents as cotherapists in working to help their autistic children. (Parent Involvement)

Schopler, E. (1978). Limits of methodological differences in family studies. In M. Rutter & E. Schopler (Eds.), Autism: A reappraisal of concepts and treatment (pp. 297-301). New York: Plenum.

Argues that methodological problems alone cannot account for disparities of findings in the literature regarding family influence on autism. Also suggests that psychoanalytic theory led to the fad hypothesis of parents as etiologic factors in childhood autism. (Family Factors)

Schopler, E. (1978). On confusion in the diagnosis of autism. Journal of Autism and Childhood Schizophrenia, 8, 137-169.

Presents definitions and diagnosis of autism by Rutter and the National Society for Autistic Children to show the difficulties in reaching consensus on a definition of autism. It is important that researchers be aware of these difficulties and explicitly identify specific characteristics and selection purposes implemented. (Diagnostic Assessment)

Schopler, E. (1978). Prevention of psychosis through alternate education. In S. J. Apter (Ed.), Focus on prevention (pp. 79-94). New York: Syracuse University Press.

Describes services offered by TEACCH, especially the preventive aspects of the educational component of the program, citing clinical and administrative innovations, the use of developmental therapy, and a strong emphasis on parent involvement as key preventive elements. (Treatment Model)

Schopler, E., & Rutter, M. (1978). Subgroups vary with selection purpose. In M. Rutter & E. Schopler (Eds.), Autism: A reappraisal of concepts and treatment (pp. 507-517). New York: Plenum.

Discusses the problem of classification and the use of a multi-axial system of classification. Research may prove more valid and effective when samples are selected for appropriate characteristics and when the selection purpose is clearly specified. (Diagnostic Assessment)

Sloan, J. L. (1978). Differential development of autistic symptoms in a pair of fraternal twins. Journal of Autism and Childhood Schizophrenia, 8, 191-202.

Reports the differential development of autistic symptoms in a pair of fraternal twins, discussing diagnostic, etiological, and treatment implications. (Autistic Characteristics)

### 1979

Bristol, M. (1979). Maternal coping with autistic children: The effects of interpersonal support and child characteristics. Unpublished doctoral dissertation, University of North Carolina at Chapel Hill.

Examined the extent to which severity of problems of autistic children were predictive of stress within the family. Showed that specific characteristics of the autistic child have a significant impact on family coping and suggested there may be a characteristic pattern of stress associated with autism. (Family Factors)

Bristol, M., & Wiegerink, R. (1979). Parent involvement. In M. J. Paluszny (Ed.), Autism: A practical guide for parents and professionals. New York: Syracuse University Press. Translated into Japanese, (1981); Tokyo: Iwasaki Gakujutsu Shuppan. Translated into Spanish, (1982); Mexico City: Editorial Trillas.

Describes reasons for the changing role of parents in the treatment of autism, using parents as teachers, enlisting parental support in parent training programs, providing parent support systems and contact with agencies, and assisting parents in dealing with immediate family concerns in coping with a handicapped child. (Parent Involvement)

DeVellis, R. R., & McCauley, C. (1979). Perception of contingency and mental retardation. Journal of Autism and Developmental Disorders, 9, 261-270.

Describes the phenomena of learned helplessness and external locus of control, comparing factors producing these phenomena to situations in the lives of mentally retarded people. Specific deficits in mental retardation are shown to occur in helpless or external individuals as well. (Autism Theory)

Runck, B., & Schopler, E. (1979). Basic training for parents of psychotic children. In E. Corfman (Ed.), Families today--A research sampler on families and children, NIMH science monograph I, DHEW publication no. (ADM) 79-815 (pp. 767-809). Washington, DC: Superintendent of Documents, U.S. Government Printing Office.

Reports the development of the TEACCH program for training parents as cotherapists with their own psychotic children from its beginning as an experiment in 1966 to 1979, including its becoming a state-supported program. (Parent Involvement)

Schopler, E., Andrews, C., & Strupp, K. (1979). Do autistic children come from upper-middle class parents? Journal of Autism and Developmental Disorders, 9, 139-152. Also in Annual progress of child psychiatry and child development, (1980) (pp. 487-500); New York: Brunner/Mazel.

Studied families of autistic children to resolve contradictory findings about their social economic status. Four factors distinguished high SES from low SES families. (Family Factors)

Schopler, E., Rutter, M., & Chess, S. (1979). Editorial: Change of journal scope and title. Journal of Autism and Developmental Disorders, 9, 1-10.

Emphasizes the continuity between autism and other developmental disorders and argues that a more productive approach to understanding autism would be to view it within this context rather than as a separate and unrelated phenomenon. (Diagnostic Assessment)

### 1980

Bristol, M. M. (1980). Impact of handicapped children on mothers: Some research results. Proceedings of the annual conference of the Office of Special Education, Handicapped children's early education program, Washington, DC.

Compared high and low stress mothers of autistic children, finding significant differences in characteristics of the children in the families and in both formal and informal sources of support. Also discusses the role of maternal employment status and of parental training in relieving stress. (Family Factors)

Davis, S., & Marcus, L. M. (1980). Involving parents in the treatment of severely communication-disordered children. Journal of Pediatric Psychology, 5, 189-198.

Presents methods and activities for working with parents of communication-disordered children with emphasis on involving parents in the treatment process, viewing language handicaps in a broad social context, and incorporating parents' priorities in planning for the child. (Parent Involvement)

DeVellis, R. R., DeVellis, B. M., Walliston, B. S., & Walliston, K. A. (1980). Epilepsy and learned helplessness. Basic and Applied Social Psychology, 1, 241-253.

Notes the parallel between the natural history of seizure disorders and laboratory procedures for inducing learned helplessness. A survey of individuals with epilepsy showed that theoretically relevant dimensions of seizure disorders account for significant proportions of variance in learned helplessness indexes. (Autism Theory)

McHale, S. M., Simeonsson, R. J., Marcus, L. M., & Olley, J. G. (1980). The social and symbolic quality of autistic children's communication. Journal of Autism and Developmental Disorders, 10, 299-310.

Observed autistic children during free-play sessions under conditions of teachers present and teachers absent. The quantity and quality of communication were greater in the teachers' presence than absence and the symbolic and social quality of the communication increased over time. (Autistic Characteristics)

Mesibov, G. B., Conover, B. S., & Saur, W. G. (1980). Limited guardianship laws and developmentally disabled adults: Needs and obstacles. Mental Retardation, 18, 221-226.

A study designed to determine if the NC limited guardianship law is useful for developmentally disabled adults showed that limited guardianship could help meet the needs of developmentally disabled adults, but obstacles to use of the law are attitudinal barriers and lack of knowledge of the law. (Adolescence and Adulthood)

Mesibov, G., & LaGreca, A. (1980). Normalizing services for children with special needs. Community Mental Health Review, 5, 4-14.

Presents six areas important for successful community programs and proposes them as targets for future prevention, education, and treatment efforts. Makes specific suggestions in each area for prevention and remediation efforts. (Treatment Model)

Novak, M. A., Olley, J. G., & Kearney, D. S. (1980). Social skills of handicapped children in integrated and separate preschools. In T. Field (Ed.), High-risk infants and children: Adult and peer interactions. New York: Academic.

Observed children during free-play periods in preschool settings to identify common behavioral differences between handicapped and normal children. Handicapped children played more with objects than with other children, visually explored the environment more, initiated and received less social interaction, and received more teacher direction than the normal children. (Treatment Factors)

Routh, D. K., & Mesibov, G. B. (1980). Psychological and environmental intervention: Toward social competence. In H. E. Rie & E. D. Rie (Eds.), Handbook of minimal brain dysfunctions: A critical view. New York: Wiley.

Describes psychological and environmental approaches for helping children with MBD (minimal brain dysfunction) prepare for competent adult lives. Discusses follow-up studies of ex-MBD adults, social competence, behavior modification used with MBD children, parent counseling, and coordinating treatment plans. (Autism Theory)

Schopler, E. (1980). Two of the obstacles to reasonable and appropriate education [Response in "Parents Speak" column]. Journal of Autism and Developmental Disorders, 10, 470-472.

Funds intended for the education of children are diverted to attorneys and others as parents lose collaboration with schools in their effort to define "appropriate education." Contributing to this are the lack of a distinction between individual and social needs, and the belief that "appropriate education" requires the services of many specialists instead of placing primary responsibility with the lead teacher. (Autism Theory)

Schopler, E., & Bristol, M. (1980). Autistic children in public schools. An ERIC exceptional child education report. Reston, VA: Council for Exceptional Children. Translated into Polish as Dzieci autystyczne w szkołach publicznych, (1984); Warsaw: Institute of Psychology, University of Warsaw. Also translated into Japanese.

Discusses changes in knowledge about autistic children, their special diagnostic and educational needs, and the reasons they are in public schools. Outlines principles for designing educational programs for autistic children and cites contributions that school personnel can make to integrating these children into their schools. (Teaching Factors)

Schopler, E., & Dalldorf, J. (1980). Autism: Definition, diagnosis, and management. Hospital Practice, 15, 64-73.

Investigations of misconceptions about autism have revealed that it is not a disease of the upper middle class; parents are not etiologic agents; the children do not "tune out" but rather never "tune in"; and that autism is not childhood schizophrenia and the diagnostic criteria are discriminating. (Autism Theory)

Schopler, E., & Olley, J. G. (1980). Public school programming for autistic children. Exceptional Children, 46, 461-463.

Identifies eight components of a comprehensive educational program for autistic children: 1) identification and referral, 2) assessment leading to an educational program, 3) parental involvement, 4) individualized instruction, 5) agency cooperation, 6) staff training, 7) regional administration, and 8) a university tie. (Teaching Factors)

Schopler, E., Reichler, R., DeVellis, R., & Daly, K. (1980). Toward objective classification of childhood autism: Childhood autism rating scale (CARS). Journal of Autism and Developmental Disorders, 10, 91-103. Translated into Swedish, 1984; into French, 1986; into Japanese (1985).

Describes the objective behavioral rating scale for the diagnosis and identification of children admitted to TEACCH. Data have been collected for a decade and a reliable and valid rating system has been developed. Describes the population the CARS was used with, reliability and validity, compares the categories that result from its use, and compares the CARS definition of autism to other definitions. (Diagnostic Assessment)

Schopler, E., Reichler, R. J., & Lansing, M. (1980). Individualized assessment and treatment for autistic and developmentally disabled children: Vol. 2. Teaching strategies for parents and professionals (2nd ed.). Austin, TX: Pro-Ed. Translated into German, 1983; Japanese, 1986; French, 1988.

Explains how to formulate and write teaching programs of behavioral and educational tasks for use by parents and professionals in teaching handicapped children. (Teaching Factors)

Weigerrink, R., Hocutt, A., Posante-Loro, R., & Bristol, M. (1980). Parent involvement in early education programs for handicapped children. In J. J. Gallagher (Ed.), New direction for exceptional children. San Francisco: Jossey-Bass.

Follows the history of parent involvement, the variety of parental roles adopted in programs, and the evidence on effectiveness of parent involvement. A few studies support parental involvement, but since the nature of it varies from project to project, generalizations may be meaningless. (Parent Involvement)

## **1981**

Coleman, M., Schopler, E., & Taft, L. (1981). When autism threatens family balance. Patient Care, 15(7), 15-33.

Discusses issues of autism, including recognizing its common signs, differentiating it from other disorders, exploring available options for treatment and education, and providing counseling and support for families. (Family Factors)

Dalldorf, J., & Schopler, E. (1981). Diagnosis and management of autism. Comprehensive Therapy, 7(4), 67.

Stresses the role of primary care physicians in early identification of autism in order to prevent false reassurances, escalating parental guilt, and delays in developing therapeutic plans. Presents aspects of the medical examination and physicians' major roles in the management of the autistic patient and family. (Autistic Characteristics)

Eastman, J., & Mesibov, G. (1981). Family interventions in a private pediatric practice. Journal of Marital and Family Therapy, 7, 461-466.

Focuses on one benefit of a program of parent support and assistance in a private pediatric office: identifying underlying marital and family problems of parents seeking advice about their children's behaviors. (Family Factors)

LaGreca, A. M., & Mesibov, G. B. (1981). Facilitating interpersonal functioning with peers in learning disabled children. Journal of Learning Disabilities, 14, 197-199, 238.

Describes a study of a social skills training program focused on training joining skills and communication and conversation skills through modeling, coaching, and behavioral rehearsal strategies. Both skills were problems for the boys, and participation in the training program resulted in improvement in interpersonal skills and in the frequency of interactions with peers. (Treatment Model)

Marcus, L. M., McHale, S. M., Olley, J. G., & Simeonsson, R. J. (1981). A Piagetian approach to investigate educational skills of autistic children. In P. Mittler (Ed.), Frontiers of knowledge in mental retardation: Proceedings of the fifth congress of IASSMD. Vol 1: Social, educational, and behavioral aspects (pp. 293-301). Baltimore: University Park.

Discusses autism in a Piagetian developmental framework. Describes studies showing an increase in social behavior of autistic children during conditions of teacher present and normal peer interaction. Considers the relevance of Piagetian theory for assessment and education of autistic children. (Autistic Characteristics)

Mesibov, G. B., & LaGreca, A. M. (1981). Ethical issues in parent-professional service interaction. In J. L. Paul (Eds.), Understanding and working with parents of handicapped children (pp. 154-179). New York: Holt, Rinehart, & Winston.

Describes the parent-professional relationship in establishing appropriate treatment goals and resolving conflicts between clinical needs and research goals. Differing perspectives of parents and professionals are highlighted. (Parent Involvement)

Mesibov, G., & LaGreca, A. (1981). A social skills instructional module. The Directive Teacher, 3, 6-7.

Presents a social skills program for both normal and learning disabled children for use in classrooms. Includes basic procedures as well as specific suggestions for its implementation in classrooms. (Teaching Factors)

Olley, J. G., DeVellis, R. F., DeVellis, B. M., Wall, A. J., & Long, C. E. (1981). The autism attitude scale for teachers. Exceptional Children, 47, 371-372.

The Autism Attitude Scale for Teachers proved to be a reliable and valid method for assessing teachers' attitudes toward the inclusion of autistic children in their school or classrooms. Describes the development of the AAST and its use for improving acceptance of autistic children in the classroom. (Teaching Factors)

Schopler, E., Mesibov, G., DeVellis, R., & Short, A. (1981). Treatment outcome for autistic children and their families. In P. Mittler (Ed.), Frontiers of knowledge in mental retardation. Vol. I. Social, educational, and behavioral aspects (pp. 293-301). Baltimore: University Park.

Treatment outcome indicated in questionnaires completed by families served by TEACCH between 1966 and 1977 was examined. Parents perceived the program as effective in helping them deal with their handicapped children. Areas of program effectiveness and findings on effects of different child IQ levels and family SES are reported. (Treatment Outcome)

Schroeder, C. S., Mesibov, G. B., Eastman, J., & Goolsby, E. (1981). Preventive services for children: A model. In W. Burgess & B. A. Baldwin (Eds.), Crisis intervention theory and practice: A clinical handbook (pp. 128-138). Englewood Cliffs, NJ: Prentice-Hall.

Staff and students from nursing, psychology, social work, and medicine joined a group of pediatricians to provide preventive education and crisis intervention to parents through education in child development and management, a telephone service, and regular hours for appointments with the staff. Presents parents' concerns and methods used to meet those concerns. (Treatment Model)

Sloan, J., & Marcus, L. (1981). Some findings on the use of the Adaptive Behavior Scale in a program for autistic children. Journal of Autism and Developmental Disorders, 11, 191-199.

Presents two studies on the use of the Adaptive Behavior Scale (ABS) with autistic children, one comparing ratings by parents and teachers on the same child, and the other examining change in adaptive and behavioral functioning across an academic year (Behavioral Management)

## 1982

Bristol, M. M., & Gallagher, J. J. (1982). A family focus for intervention. In C. Ramey & P. Trohanis (Eds.), Finding and educating the high risk and handicapped infant (pp. 137-161). Baltimore: University Park.

Explores the evolution of the role of parents as educators of their handicapped infants in spite of differences in their responses to their handicapped infants and to intervention programs. Examines the implications for intervention strategies of this role. (Family Factors)

Dawson, G. , Warrenburg, W., & Fuller, P. (1982). Cerebral lateralization in individuals diagnosed as autistic in early childhood. Brain and Language, 15, 353-368.

EEG measures of hemispheric activation during cognitive processing of autistic individuals showed a pattern of hemispheric specialization rarely seen in the normal population--a "reversal" in lateralization reflective of a lack of left hemisphere specialization for linguistic functions. The pattern of cognitive strength and weakness in autism is suggestive of a selective impairment of the left cerebral hemisphere. (Biomedical Factors)

Lord, C., Schopler, E., & Revicki, D. (1982). Sex differences in autism. Journal of Autism and Developmental Disorders, 12, 317-330.

Comparisons made between male and female children with autism on nonverbal measures of intelligence, adaptive functioning, receptive vocabulary, perception, eye-hand integration, and on affect, play, and relating are discussed in terms of hypotheses concerning sex differences in genetic thresholds and in hemispheric lateralization. (Biomedical Factors)

McHale, S. M., & Olley, J. G. (1982). Using play to facilitate the social development of handicapped children. Topics in Early Childhood Education, 2, 76-86.

Summarizes studies of play therapy, mother-infanting games, role-playing, behavioral teaching of play, and play with peers. Rates the effectiveness of each with handicapped, particularly retarded, youngsters. (Autism Theory)

Mesibov, G. B. (1982). Problems of autistic adolescents and adults. Audio-Digest Psychiatry, 11, (4).

The emergence of autistic people into adulthood brings amelioration of some symptoms, and given adequate structure, autistic adults can be integrated into society if the community is moved to accommodate their difference. (Adolescence and Adulthood)

Mesibov, G. B., & Johnson, M. R. (1982). Intervention techniques in pediatric psychology. In J. Tuma (Ed.), Handbook for the practice of pediatric psychology. New York: Wiley.

Reviews new Intervention strategies that have evolved from the practice of pediatric psychology, including techniques of prevention, consultation, psychotherapy, and behavior therapy. (Autism Theory)

Schopler, E. (1982). Evolution in understanding and treatment of autism. Triangle, 21, 51-57.

Changes over the past four decades include recognition of autism's status as a developmental disability distinct from childhood schizophrenia, of its distribution over all social classes, and of its coexistence with mental retardation. (Autism Theory)

Schopler, E., Mesibov, G., & Baker, A. (1982). Evaluation of treatment for autistic children and their parents. Journal of the American Academy of Child Psychiatry, 21, 262-267.

Reviews a series of evaluations of five elements of TEACCH: 1) program structure, 2) home observations of child behaviors, 3) parents' teaching effectiveness, 4) perceptions of treatment outcome, and 5) outcome as measured by rates of institutionalization. (Treatment Outcome)

Schopler, E., & Olley, J. G. (1982). Comprehensive educational services for autistic children: The TEACCH model. In C. R. Reynolds & T. R. Gutkin (Eds.), The handbook of school psychology (pp. 629-643). New York: Wiley.

Discusses the TEACCH approach to autism and possible sources of confusion encountered in assessment and diagnosis. Explains TEACCH diagnostic and treatment procedures and the role of school psychologists in the education of autistic children. (Diagnostic Assessment)

Watson, L. R., & Lord, C. (1982). Developing a social communication curriculum for autistic students. Topics in Language Disorders, 3, 1-9.

Discusses existing communication curricula, especially the TEACCH language program, communication evaluation, and the case for individualization in light of the uneven patterns of skills found with autistic people. (Language)

### **1983**

Bristol, M. M., & Schopler, E. (1983). Stress and coping in families of autistic adolescents. In E. Schopler & G. B. Mesibov (Eds.), Autism in adolescents and adults (pp. 251-278). New York: Plenum.

Data from a large research project on stress in families of autistic adolescents suggest that many problems attributed to adolescence are due to a lack of adequate support services for autistic individuals and their families and that problems in these families may be mediated by formal and informal support groups. (Family Factors)

Dalldorf, J. S. (1983). Medical needs of the autistic adolescent. In E. Schopler & G. B. Mesibov, (Eds.), Autism in adolescents and adults (pp. 149-168). New York: Plenum.

Covers special problems for autistic adolescents with such issues as medical and dental assessment and care, growth patterns and sexual maturation, nutrition, acne, seizures, psychopharmacologic agents, and genetic counseling. (Adolescence and Adulthood)

Dawson, G. (1983). Lateralized brain dysfunction in autism: Evidence from the Halstead-Reitan Neurophysiological Battery. Journal of Autism and Developmental Disorders, 13, 269-286.

Selected tests from the Halstead-Reitan neuropsychological battery were administered to autistic males, and the results were compared with those for retarded people matched for IQ and those for patients with demonstrable diffuse brain damage. Autistic subjects showed a greater degree of left hemisphere dysfunction. (Biomedical Factors)

Dawson, G., & Mesibov, G. B. (1983). Childhood psychoses. In C. E. Walker & M. C. Roberts (Eds.), Handbook of clinical child psychology (pp. 543-572). New York: Wiley.

Differentiates early infantile autism and childhood schizophrenia by age of onset, family history of schizophrenia, symptomatology, frequency of cerebral dysfunction, speech development, and IQ level. (Autism Theory)

Dawson, G., Warrenburg, S., & Fuller, P. (1983). Hemisphere functioning and motor imitation in autistic persons. Brain and Cognition, 2, 346-354.

On the basis of previous research, it was predicted that autistic people in this study would show atypical hemispheric specialization for motor imitation. They showed significantly greater right hemisphere activation during the imitation tasks than normal subjects, and this pattern was particularly evident in younger autistic subjects and during oral, rather than manual, imitation tasks. (Biomedical Factors)

Gualtieri, C. T., Koriath, U., & Van Bourgondien, M. E. (1983). "Borderline" children. Journal of Autism and Developmental Disorders, 13, 67-72.

Children said to be borderline and referred for evaluation did not meet DSM-III criteria for borderline. Referring professionals seemed to have based their impressions on the child's disorganized thinking and behavior. The borderline label was not helpful for treatment planning, and guidelines for its application are nonexistent. (Diagnostic Assessment)

Lord, C., Merrin, D. J., Vest, L., & Kelly, K. M. (1983). Communication behavior of adults with an autistic 4-year-old boy and his nonhandicapped twin brother. Journal of Autism and Developmental Disorders, 13, 1-17.

Preschool teachers were videotaped playing with an autistic 4-year-old and his nonhandicapped fraternal twin. Eight were informed that the autistic child had a language disability; 8 were not. Informed teachers made greater speech modifications to the autistic child. The implications of communicative adjustments to children with language and social impairments are discussed. (Language)

Lord, C., & O'Neill, P. J. (1983). Language and communication needs of adolescents with autism. In E. Schopler & G. B. Mesibov (Eds.), Autism in adolescents and adults (pp. 57-77). New York: Plenum.

Includes a review of research on language skills of adolescents with autism and three case studies. Covers various language training programs for these adolescents and evaluations of the appropriateness of the programs. (Language)

McHale, S. M. (1983). Social interactions of autistic and nonhandicapped children during free play. American Journal of Orthopsychiatry, 53, 81-91.

Ten small groups of second and third graders participated in weekly play sessions with autistic children over a 10-week period. Social interaction increased for both nonhandicapped and autistic children, and solitary behavior for autistic children decreased. (Autism Theory)

Mesibov, G. B. (1983). Current perspectives and issues in autism and adolescence. In E. Schopler & G. B. Mesibov (Eds.), Autism in adolescents and adults (pp. 37-53). New York: Plenum.

Because problems inherent in the transition from adolescence to adulthood are complicated by the disorders of the developmentally handicapped, programs for them must address social and interpersonal skills, vocational opportunities, management of aggression and sexuality, and the role of family. (Adolescence and Adulthood)

Mesibov, G. B., & Schopler, E. (1983). The development of community-based programs for autistic adolescents. Children's Health Care, 12, 20-24.

Presents the TEACCH program's current development of diagnostic and curriculum materials, intensive interventions, sex education, and staff training to serve adolescent and adult clients in community-based day and residential programs.

(Treatment Model)

Mesibov, G. B., Schopler, E., & Sloan, J. L. (1983). Service development for adolescents and adults in North Carolina's TEACCH program. In E. Schopler & G. B. Mesibov (Eds.), Autism in adolescents and adults (pp. 411-432). New York: Plenum.

Originally mandated to care for autistic children, TEACCH has extended its services to meet the needs of clients throughout their lives. Specialized diagnostic and assessment tools are used to identify skills and formulate educational programs to prepare adolescents and adults for community and vocational placements.

(Adolescence and Adulthood)

Schopler, E. (1983). Introduction: Can an adolescent or adult have autism? In E. Schopler & G. B. Mesibov (Eds.), Autism in adolescents and adults (pp. 3-10). New York: Plenum.

Research has broadened Kanner's original definition of childhood autism, reflecting the development and needs of autistic children as they reach adolescence and adulthood. Particular needs of these individuals are communication skills, personal adjustment, social contact, and community programs. (Adolescence and Adulthood)

Schopler, E. (1983). New developments in the definition and diagnosis of autism. In B. B. Lahey & A. E. Kazdin (Eds.), Advances in clinical child psychology, Vol. 6, (pp. 93-127). New York: Plenum.

Defines autism from a historical perspective, identifying the confusion that arises when autistic subjects are defined by earlier criteria that do not take into account more recent data. Discusses three main sources of diagnostic confusion and gives guidelines for reducing this confusion. (Diagnostic Assessment)

Schopler, E., Lansing, M., & Waters, L. (1983). Individualized assessment and treatment for autistic and developmentally disabled children: Vol. 3. Teaching activities for autistic children. Austin, TX: Pro-Ed. Translated into German, 1984; Japanese, 1985.

A collection of learning activities and behavior management suggestions drawn from the thousands of home teaching programs written in the history of Division TEACCH. Activities are arranged and cross-indexed by the function area of the activity, secondary skills involved, developmental level of the activity, and behavior problems the activity modifies. Written for use by parents, teachers, and clinical professionals. (Teaching Factors)

Schopler, E., & Mesibov, G. (Eds.). (1983). Autism in adolescents and adults. New York: Plenum.

Presents an overview of autism in adolescence and adulthood and a survey of nationally recognized programs serving these age groups. Issues covered include educational, recreational, vocational, medical, social, legal, and family needs. (Adolescents and Adulthood)

Schopler, E., & Sloan, J. L. (1983). Recent developments in the diagnosis and assessment of autism. In S. Ray, M. J. O'Neill, & N. T. Morris (Eds.), Low incidence children: A guide to psychoeducational assessment (pp. 7-65). Natchitoches, LA: Steven Ray.

Discusses recent developments in methods and materials for assessment in relating assessment to treatment and education. Gives extensive readings in childhood psychosis and autism. (Diagnostic Assessment)

#### **1984**

Bristol, M. M. (1984). Family resources and successful adaptation to autistic children. In E. Schopler & G. Mesibov (Eds.), The effects of autism on the family (pp. 289-310). New York: Plenum.

Reviews factors placing families of autistic children at risk for stress and crisis and discusses results of studies of the contributions of family resources to successful family adaptation. (Family Factors)

Bristol, M. M., & Schopler, E. (1984). A developmental perspective on stress and coping in families of autistic children. In J. Blacher (Ed.), Severely handicapped young children and their families (pp. 91-141). New York: Academic.

Reviews research on stress and coping in families of autistic children, discusses theories of parent-causal models and an alternative view of parents as part of the solution, and highlights factors related to successful family adaptation to autistic children. (Family Factors)

Dawson, G., & Adams, A. (1984). Imitation and social responsiveness in autistic children. Journal of Abnormal Child Psychology, 12, 209-226.

Subjects' imitation and object permanence skills were assessed, their language and social behaviors were observed during free play, and they were exposed to three interactive procedures. Results suggested that developmental status is an important variable in designing intervention programs for severely impaired children. (Autism Theory)

Dawson, G., & McKissick, F. C. (1984). Self-recognition in autistic children. Journal of Autism and Developmental Disorders, 14, 383-394.

Explores the hypothesis that the impairment in social relatedness in autism stems in part from underlying deficits in self-recognition and concludes that social deficits in autism are not due to a lack of differentiation between self and other. (Autism Theory)

Gallagher, J., Scharfman, W., & Bristol, M. (1984). The division of responsibilities in families with preschool handicapped and nonhandicapped children. Journal of the Division of Early Childhood, 8, 3-11.

The allocation of responsibilities between parents of preschool handicapped children was compared with that of parents of preschool normal children. The focus was on differences between groups in parent responsibility allocations, differences between groups in level of satisfaction with current execution of family roles, and differences between mothers and fathers in role satisfactions and desired role behavior. (Parent Involvement)

Lord, C. (1984). The development of peer relations in children with autism. In F. J. Morrison, C. Lord, & D. P. Keating (Eds.), Advances in applied developmental psychology (pp. 165-229). New York: Academic.

Presents a systematic, empirically based description of the social behavior of autistic children with their peers and compares the development of social behavior of autistic and normal children. (Autistic Characteristics)

Lord, C. (1984). Language comprehension and cognitive disorder in autism. In L. Siegel & F. J. Morrison (Eds.), Cognitive development in atypical children (pp. 67-82). New York: Springer-Verlag.

Reviews studies of comprehension in autistic people. Discusses the relationship between language comprehension and other behaviors with the goal of describing and accounting for deficits specific to autism and determining if they are primarily particular to language or to broader cognitive deficits. (Language)

Lord, C., & Ward, M. J. (1984). Autism and childhood psychoses. In H. Adams & P. Sutker (Eds.), Comprehensive handbook of psychopathology (pp. 973-1000). New York: Plenum.

Discusses autism and childhood psychoses in light of problems of definition, diagnosis, etiology, and epidemiology of childhood psychoses. Behavioral characteristics, treatments, and follow-up studies of psychotic children are covered. (Autism Theory)

Marcus, L. M. (1984). Coping with burnout. In E. Schopler & G. B. Mesibov (Eds.), The effects of autism on the family (pp. 311-326). New York: Plenum.

Describes burnout in families of autistic children and gives coping techniques families use and a system of strategies for intervention. (Family Factors)

McHale, S. M., Simeonsson, R. J., & Sloan, J. L. (1984). Children with handicapped brothers and sisters. In E. Schopler & G. B. Mesibov (Eds.), The effects of autism on the family (pp. 327-342). New York: Plenum.

Reviews literature on how handicapped children affect their siblings' development, how they influence family functioning, and how they and their siblings get along. (Family Factors)

Mesibov, G. B. (1984). Evolution of pediatric psychology: Historical roots to future trends. Journal of Pediatric Psychology, 9, 3-11.

A review of the brief history of pediatric psychology, an evaluation of the current status of the field, and a discussion of promising future trends (more research in pediatric psychology, especially in normal childrearing, and more emphasis on prevention and training). (General Studies)

Mesibov, G. B. (1984). Social skills training with verbal autistic adolescents and adults: A program model. Journal of Autism and Developmental Disorders, 14, 395-404.

Describes a social skills training program (including its objectives and methods) intended to create positive peer-related social experiences and teach useful skills for verbal autistic adolescents and adults. (Treatment Model)

Olley, J. G., & Marcus, L. M. (1984). Considerations in the assessment of children with autism. In S. J. Weaver (Ed.), Testing children: A reference guide for effective clinical and psychoeducational assessment (pp. 71-84). Kansas City, MO: Test Corporation of America.

Covers prediagnostic preparation, administration of tests (including strategies for management of autistic handicaps during testing), and interpretation and communication of results. Summarizes seven intelligence tests, giving a description of each test, the autistic children it is best suited for, and its advantages. (Diagnostic Assessment)

Schopler, E. (1984). My great teachers. In E. Schopler & G. B. Mesibov (Eds.), The effects of autism on the family (pp. 227-232). New York: Plenum.

The most important contribution to a professional's knowledge may come less from empirical research than from the teaching and example of autistic clients and their parents. The founder of the TEACCH program describes lessons he owes to these teachers. (Family Factors)

Schopler, E., & Mesibov, G. B. (Eds.). (1984). The effects of autism on the family. New York: Plenum.

Explores family adaptation, sibling relationships, parent and professional relationships, and roles of parents as teachers of, and advocates for, their autistic children. (Parent Involvement)

Schopler, E., & Mesibov, G. B. (1984). Professional attitudes toward parents: A forty-year progress report. In E. Schopler & G. B. Mesibov (Eds.), The effects of autism on the family (pp. 3-17). New York: Plenum.

Parents of autistic children are now treated as cotherapists and advocates rather than as the cause of autism. Factors contributing to this change were the redefinition of autism as a developmental disorder, an expansion of therapeutic methods, a change in attitudes among parents themselves, and a growth in community understanding of autism. (Autism Theory)

Schopler, E., Mesibov, G. B., Shigley, R. H., & Bashford, A. (1984). Helping autistic children through their parents: The TEACCH model. In E. Schopler & G. B. Mesibov (Eds.), The effects of autism on the family (pp. 65-81). New York: Plenum.

TEACCH uses four types of parent-professional relationships to deliver a comprehensive network of statewide services: collaboration for child advocacy, staff training of parents, parent training of staff, and interaction for emotional support. (Parent Involvement)

Short, A. B. (1984). Short-term treatment outcome using parents as cotherapists for their own autistic children. Journal of Child Psychology and Psychiatry and Allied Disciplines, 25, 443-458.

Fifteen children were followed during waiting and treatment periods to evaluate the effects of Schopler and Reichler's treatment for autistic children using parents as cotherapists. Results are discussed in terms of implications for treatment, prognosis, and future outcome research. (Treatment Outcome)

Stabler, B., & Mesibov, G. B. (1984). Role functions of pediatric and health psychologists in health care settings. Professional Psychology, 15, 142-151.

A questionnaire on years of experience, work settings, training, professional identification, services performed, difficulties encountered, and general consultation goals was sent to pediatric and health psychologists. Roles, functions, and implications for future practice in health care settings are discussed. (General Studies)

### 1985

Bristol, M. M. (1985). Designing programs for young developmentally disabled children: A family systems approach to autism. Remedial and Special Education, 4, 46-53.

A literature review reveals the lack of empirical support for a deficit model of parental pathology or of parents as patients. Discusses a biological etiology for autism and examines research supporting a family systems approach. (Treatment Model)

DeVellis, R., DeVellis, B., Revicki, D. A., Lurie, S. J., Runyan, D. K., & Bristol, M. M. (1985). Development and validation of the Child Improvement Locus of Control (CLLC) Scales. Journal of Social and Clinical Psychology, 3, 308-325.

Presents two studies on the development and validation of the Child Improvement Locus of Control (CLLC) Scales in which factor analysis yielded scales assessing parents' beliefs in chance, divine influence, parents, professionals, and the child as factors influencing child improvement. (Family Factors)

Lord, C. (1985). Autism and the comprehension of language. In E. Schopler & G. B. Mesibov, (Eds.), Communication problems in autism (pp. 257-310). New York: Plenum.

Discusses implications for autistic children of what is known about normal development of language comprehension, the relation between language comprehension and social behavior, and language comprehension as a function of cognitive skills. Makes suggestions for assessment of comprehension and for intervention strategies. (Language)

Lord, C. (1985). Contribution of behavioral approaches to the language and communication of persons with autism. In E. Schopler & G. B. Mesibov (Eds.), Communication problems in autism (pp. 59-68). New York: Plenum.

Discusses how the theory and practice of behaviorism have helped or failed to help improve functional communication of autistic people. (Language)

Lord, C., & Schopler, E. (1985). Brief report: Differences in sex ratios in autism as a function of measured intelligence. Journal of Autism and Developmental Disorders, 15, 185-193.

Presents results from analyses of sex ratios as a function of IQ for autistic children and other communication-handicapped and behavior-disordered children, and discusses the results' relevance to genetic factors and the heterogeneity of autism. (Biomedical Factors)

Mesibov, G. (1985). Staff development and training. Proceedings of the National Conference on Autism (pp. 69-71). Washington, DC: National Institute of Handicapped Research.

Presents issues and components of training programs for staff working with autistic children and adults. (Teaching Factors)

Morrison, F. J., Lord, C., & Keating, D. P. (1985). Applied developmental psychology, Vol. 2. New York: Academic.

A book of articles describing original research on the application of methods and concepts from developmental psychology to real-world problems, including papers on children's understanding of emotions, the effects of low birth weight and prematurity, and the development of children with visual impairments. (General Studies)

Olley, J. G. (1985). Social aspects of communication in children with autism. In E. Schopler & G. B. Mesibov (Eds.), Communication problems in autism (pp. 311-328). New York: Plenum.

Considers the concept of communication and its application to autism, presents the use of past explanations of communication and autism used as bases for treatment, and applies current knowledge to suggest improvements in assessment and treatment by considering social context and social consequences. (Language)

Olley, J. G., & Rosenthal, S. L. (1985). Current issues in school services for students with autism. School psychology Review, 14, 166-170.

Contrasts recent approaches to educating autistic children with earlier approaches in the areas of assessment, early intervention, family involvement, classroom settings, curriculum, program evaluation, and staff training and consultation. (Autism Theory)

Schopler, E., & Mesibov, G. B. (Eds.). (1985). Communication problems in autism. New York: Plenum.

Communication deficits, a central symptom of the autism syndrome, are intertwined with the social and cognitive difficulties that also characterize autism. This book sorts through the literature on language and communication in autism for the most relevant, verifiable, and potentially useful information. (Language)

Schopler, E., & Mesibov, G. B. (1985). Introduction to communication problems in autism. In E. Schopler & G. B. Mesibov (Eds.), Communication problems in autism (pp. 3-13). New York: Plenum.

Outlines historical trends in autism and communication, placing the research and practice described in this volume in an appropriate context. Describes new developments and perspectives under the headings: current trends, relating social deficits to language problems, and new trends in applications. (Language)

Shea, V., & Mesibov, G. (1985). Brief report: The relationship of learning disabilities and higher level autism. Journal of Autism and Developmental Disorders, 15, 425-435.

Discusses similarities and differences between severe LD and higher level autism in several areas, then looks at the concept of overlapping continua between LD and autism in terms of its usefulness for theory and treatment. (Autism Theory)

Watson, L. R. (1985). The TEACCH communication curriculum. In E. Schopler & G. B. Mesibov (Eds.), Communication problems in autism (pp. 187-206). New York: Plenum.

Describes the TEACCH communication curriculum in terms of philosophy, content, actualization, and evaluation of effectiveness. (Treatment Model)

### **1986**

Bristol, M., & Gallagher, J. (1986). Psychological research on fathers of young handicapped children: Evolution, review, and some future directions, In J. J. Gallagher & P. Vietze (Eds.), Families of handicapped children (pp. 81-100). Baltimore, MD: Brookes.

Draws examples from the literature on normal and atypical child development to illustrate how concepts of family influence have informed research questions and results regarding fathers of handicapped children. (Family Factors)

Dawson, G., & Galpert, L. (1986). A developmental model for facilitating the social behavior of autistic children. In E. Schopler & G. B. Mesibov (Eds.), Social behavior in autism (pp. 237-261). New York: Plenum.

Surveys early social development in normal infants, describes social deficits of autism and their influences on development, and presents a developmental approach to the treatment of autistic children with a discussion of limitations and criticisms of such an approach. (Treatment Model)

Garfin, D., & Lord, C. (1986). Communication as a social problem in autism. In E. Schopler & G. B. Mesibov (Eds.), Social behavior in autism (pp. 133-151). New York: Plenum.

Discusses the link between communication and social problems in autism, focusing on aspects of communication related to social functioning and on elements of social development that affect learning and using communication skills, especially by people with autism. (Language)

Lord, C., & Garfin, D. (1986). Facilitating peer-directed communication in autistic children and adolescents. Australian Journal of Human Communication Disorders, 14, 33-49.

Provides guidelines for enhancing communication between autistic children or adolescents and their peers, focusing on the use of intervention methods based on the social and language deficits of autism. (Language)

Lord, C., & Hopkins, J. (1986). The social behavior of autistic children with younger and same-age nonhandicapped peers. Journal of Autism and Developmental Disorders, 16, 249-262.

In a study of autistic children's interactions with nonhandicapped and autistic peers, all subjects after intervention showed gains in proximity, orientation, and responsiveness when playing with nonhandicapped and autistic peers. (Behavior Management)

Marcus, L. M., & Baker, A. (1986). Assessment of autistic children. In R. J. Simeonsson (Ed.), Psychological assessment of special children (pp. 279-304). Newton, MA: Allyn & Bacon.

Describes methods of assessment of autistic children, covering objectives of evaluation, general and specialized instruments (including the Psychoeducational Profile), interpretation of results, and recommendations for behavior management. (Diagnostic Assessment)

McHale, S., Sloan, J., & Simeonsson, R. (1986). Sibling relationships of children with autistic, mentally retarded, and nonhandicapped brothers and sisters. Journal of Autism and Developmentally Disorders, 16, 399-413.

Children with and without handicapped siblings were questioned about relationships and problems with their siblings. Mothers filled out a behavior rating scale on their children's behavior toward the sibling. In general, children and mothers rated the sibling relationships positively. (Family Factors)

Mesibov, G. B. (1986). A cognitive program for teaching social behaviors to verbal autistic adolescents and adults. In E. Schopler & G. B. Mesibov (Eds.), Social behavior in autism (pp. 265-283). New York: Plenum.

Describes the TEACCH social skills program for autistic adolescents and adults, its cognitive behavioral nature, and the deficits it targets. (Treatment Model)

Mesibov, G., & Dawson, G. (1986). Pervasive developmental disorders and schizophrenia. In J. Reisman (Ed.), Behavior disorders in infants, children, and adolescents (pp. 117-152). New York: Random House.

Discusses autism (neurological correlates, theories of autism, etiological factors, and treatment), schizophrenia (background, differential diagnosis, etiology, and treatment), childhood onset pervasive developmental disorder, and schizotypal personality disorder. (General)

Mesibov, G. B., & Schaffer, B. (1986). Autism in adolescents and adults. In M. L. Wolraich & D. K. Routh (Eds.), Advances in developmental and behavioral pediatrics (Vol. 7) (pp. 313-343). Greenwich, CT: Jai.

As more children grow up maintaining features consistent with autism but not identical with adult mental retardation or schizophrenia, more research and clinical programs are developed. Reviews current knowledge, describes model programs, and discusses future research and clinical practice. (Adolescence and Adulthood)

Olley, J. (1986). The TEACCH curriculum for teaching social behavior to children with autism. In E. Schopler & G. B. Mesibov, (Eds.), Social behavior in autism (pp. 351-373). New York: Plenum.

After reviewing the literature on social skills training for autistic children, describes the TEACCH social behavior curriculum and its foundation on the assessment of social skills. (Treatment Model)

Schopler, E. (1986). Editorial: Treatment abuse and its reduction. Journal of Autism and Developmental Disorders, 16, 99-104.

Discusses the treatment abuse at Matt Israel's Behavior Research Institute and the media coverage of Israel's Institute and abuse of "aversive therapy." Covers these issues and related ones of behavior and drug therapies, suggesting ways to avoid the abuses discussed through a variety of professional and legal means. (Behavior Management)

Schopler, E. (1986). Relationship between university research and state policy: Division TEACCH--Treatment and Education of Autistic and related Communication handicapped CHildren. Popular Government, 51(4), 23-32.

Tells how questioning the assumption that parental pathology caused autism began a series of events leading to Division TEACCH. Describes how that idea gained support in North Carolina and worked into both the clinical procedures of the Psychiatry Department of the UNC-CH Medical School and into the North Carolina state agency structure. (General)

Schopler, E., & Mesibov, G. (1986). Introduction to social behavior in autism. In E. Schopler & G. B. Mesibov (Eds.), Social behavior in autism (pp. 1-11). New York: Plenum.

Discusses autism and the social problems that characterize it in a historical perspective. Analyzes the major trends in this area in the context of their presentation in this volume. (Autism Theory)

Schopler, E., & Mesibov, G. (Eds.). (1986). Social behavior in autism. New York: Plenum.

Despite their importance, the social problems in autism represent the least understood and studied of its various aspects. Social behavior in autism is addressed by identifying 1) relevant issues from studies of normal development, 2) social problems in autism, and 3) remediation efforts. (Autistic Characteristics)

Schroeder, S., Gualtieri, C., & Van Bourgondien, M. (1986). Behavioral pharmacotherapy of autistic behaviors. In M. Hersen & S. E. Breuning (Eds.), Pharmacological and behavioral treatment: An integrative approach (pp. 89-107). New York: Wiley.

Discusses the integrated pharmacological and behavioral management of problem behaviors of autistic people; reviews classification schemes, neurobiological factors affecting treatment, and the relation of autism to other developmental disorders; and presents a conceptual model and illustrative case of combined pharmacotherapy and behavior therapy. (Biomedical Factors)

Warren, N., Ilgen, E., Van Bourgondien, M., Konanc, J., Grew, R., & Amara, I. (1986). Children of divorce: The question of clinically significant problems. Journal of Divorce, 10, 87-106.

The results of a study of a nonclinical sample of children of divorce to assess clinically significant levels of problems in school-age children suggest children may adapt to divorce better than some studies suggest. (General Studies)

Watson, L., Martin, J., & Schaffer, B. (1986). Form, content, and function of the spontaneous communication of autistic students. Australian Journal of Human Communication Disorders, 14, 91-102.

Explores interactions among communicative and cognitive skills in autistic students and examines how similar these students are to normal ones in communicative development. Discusses data both in terms of cognitive and linguistic versus motivational differences in autistic people and of assessment and treatment. (Language)

Wooten, M., & Mesibov, G. (1986). Social skills training for elementary school autistic children with normal peers. In E. Schopler & G. Mesibov (Eds.), Social behavior in autism (pp. 305-319). New York: Plenum.

Describes a classroom model developed in the TEACCH program for using nonhandicapped peers to teach social skills to autistic students. (Treatment Model)

## 1987

Bristol, M. (1987). The home care of developmentally disabled children: Empirical support for a model of successful coping with family stress. In S. Landesman & P. Vietze (Eds.), Living with retarded people (pp. 401-422). Washington, DC: Monographs of the American Association of Mental Deficiency.

This report of a study of home care of autistic children examines aspects of family adaptation to the stressful presence and care of a developmentally disabled child with the intention of developing a conceptual model for successful family coping. (Family Factors)

Bristol, M. (1987). Methodological issues in the assessment of single-parent families of handicapped children. Journal of the Division for Early Childhood, 11, 135-142.

Challenges negative assumptions about single-parent families of handicapped children and discusses how they influence research design and intervention. (Family Factors)

Bristol, M. (1987). Mothers of children with autism or communication disorders: Successful adaptation and the double ABCX model. Journal of Autism and Developmental Disorders, 17, 469-486.

This study demonstrates the effectiveness of the Double ABCX or FAAR model in predicting successful adaptation in families of autistic and communication-impaired children. The model consisted of severity of the handicap and other family stresses, family resources of cohesion and social support, family definition of the handicap, and adequacy of coping patterns. (Family Factors)

Bristol, M., Reichle, N., & Thomas, D. (1987). Changing demographics of the American Family: Implications for single-parent families of handicapped children. Journal of the Division for Early Childhood, 12, 10-25.

Reviews demographic data on changes in the prevalence and types of single-parent families of handicapped and nonhandicapped children, reviews research on adaptation in single-parent families of handicapped children, notes service needs of these families, and provides an overview of employment-related and publicly-founded resources for family needs. (Family Factors)

Lord, C., & Schopler, E. (1987). Neurobiological implications of sex differences in autism. In E. Schopler & G. Mesibov (Eds.), Neurobiological issues in autism (pp. 191-211). New York: Plenum.

Reviews previously identified sex differences in autism, discusses the neurobiological implications of these differences, and outlines needs for future research. (Biomedical Factors)

Marcus, L., & Mesibov, G. (1987). Comprehensive services for adolescents with autism. International Journal of Adolescent Medicine and Health, 3, 145-154.

Describes the network of services for autistic adolescents and adults in the TEACCH program: functional curricula, prevocational training, communication and social skills training, job advocacy and placement, group-home programs, and services to parents. (Treatment Model)

Marcus, L., & Schopler, E. (1987). Working with families: A developmental perspective. In D. Cohen, A. Donnellan, & R. Paul (Eds.), Handbook of autism and pervasive developmental disorders (pp. 499-512). New York: Wiley.

Describes the changing needs of families from a developmental perspective as autistic children move from early childhood to adulthood, suggesting methods for enhancing coping skills of families as they struggle with the handicapping condition in their offspring. (Family Factors)

Olley, J. (1987). Classroom structure and autism. In D. Cohen, A. Donnellan, & R. Paul (Eds.), Handbook of autism and pervasive developmental disorders (pp. 411-417). New York: Wiley.

Reviews aspects of classroom structure, particularly antecedent or setting events found to be effective in teaching students with autism, emphasizing advantages of a structured approach. (Teaching Factors)

Rutter, M., & Lord, C. (1987). Language impairment associated with psychiatric disorder. Clinics in Developmental Medicine, 101-102, 206-233.

Discusses ways language impairments are associated with psychiatric problems, focusing on social deficits and relationships between language impairment and cognitive disorders. (Language)

Rutter, M., & Schopler, E. (1987). Autism and pervasive developmental disorders: Concepts and diagnostic issues. Journal of Autism and Developmental Disorders, 17, 159-186.

Presents current information on the defining features and diagnostic issues relating to autism and related disorders, reviews the validity of the syndrome and

controversies over both boundaries and heterogeneity within the syndrome, and critiques diagnostic rating instruments for systematic sample selection. (Diagnostic Assessment)

Schopler, E. (1987). Journal of Autism and Developmental Disorders. In C. Reynolds & L. Mann (Eds.), Encyclopedia of special education (p. 877). New York: Wiley.  
A brief history of JADD and a discussion of its content and purpose. (General Studies)

Schopler, E. (1987). Specific and nonspecific factors in the effectiveness of a treatment system. American Psychologist, 42, 376-383.

The paradox of the placebo concept is used to evaluate both specific and nonspecific treatment components responsible for the effectiveness of TEACCH, concluding that empirical research demonstrating specific treatment techniques must be evaluated in the broader context of nonspecific treatment effects. (Treatment Model)

Schopler, E. (1987). TEACCH. In C. Reynolds & L. Mann (Eds.), Encyclopedia of special education (pp. 1536-1537). New York: Wiley.

A brief history and description of Division TEACCH. (Treatment Model)

Schopler, E., & Mesibov, G. (1987). Introduction to neurobiological issues in autism. In E. Schopler & G. Mesibov (Eds.), Neurobiological issues in autism (pp. 3-11). New York: Plenum.

Discusses tensions between basic and applied research and reviews the major trends pertaining to autism in the neurobiological field in the context of their presentation in this volume. (Biomedical Factors)

Schopler, E., & Mesibov, G. (Eds.). (1987). Neurobiological issues in autism. New York: Plenum.

Neurobiological research priorities and ethical issues are discussed, and both theory and empirical-based neurological and genetic issues are covered. Includes chapters on neurochemical, biochemical, nutritional, and medication issues. (Biomedical Factors)

Schopler, E., & Sloan, J. (1987). Autistic behavior. In C. Reynolds & L. Mann (Eds.), Encyclopedia of special education (pp. 163-165). New York: Wiley.

A brief history of the concept, definition, and treatments of autism. (General Studies)

Schopler, E., & Sloan, J. (1987). Childhood schizophrenia. In C. Reynolds & L. Mann (Eds.), Encyclopedia of special education (pp. 313-316). New York: Wiley.

Presents the history of the concept and definition of childhood schizophrenia and of some of the current issues relevant to its classification. (Diagnostic Assessment)

Schopler, E., & Sloan, J. (1987). Minimizing the crippling effects of autism. In J. Byrne, R. Jahiel, R. Lubin, & J. Gorelick (Eds.), Handbook of prevention of mental retardation and developmental disabilities. New York: Van Nostrand Reinhold.

While Kanner's description of autism has proven durable, many of his theories about autism have not. Current treatment programs emphasize comprehensive individualized programming in collaboration with parents and community. (Autism Theory)

Short, A., & Marcus, L. (1987). Psychoeducational evaluation of autistic children and adolescents. In S. S. Strichart & P. Lazarus (Eds.), Psychoeducational evaluation of school-aged children with low-incidence disorders (pp. 155-180). Orlando, FL: Grune & Stratton.

Describes the purposes and methods for the psychoeducational evaluation of school-aged autistic children; discusses issues and instruments for assessment in specific developmental areas; and lists special concerns in the assessment of adolescents. (Diagnostic Assessment)

Short, A., & Schopler, E. (1987). Recovery in autistic children: Comment on Lovaas study. Spectrum, 1(2), 4 & 8.

A brief critique of the faults and extravagant outcome claims of the 1987 Lovaas outcome study of intensive behavior intervention with young autistic children. (Treatment Outcome)

Simeonsson, R., Olley, J., & Rosenthal, S. (1987). Early intervention for children with autism. In M. J. Guralnick & F. C. Bennett (Eds.), The effectiveness of early intervention for at risk and handicapped children (pp. 275-296). New York: Academic.

A literature review that found little sound research on the topic, but found that the few successful early interventions studied had some basic features in common. (Autism Theory)

Van Bourgondien, M. (1987). Children's responses to retarded peers as a function of social behaviors, labeling, and age. Exceptional Children, 53, 432-439.

This study found that inappropriate social behaviors had a significant effect on attitudes and behaviors of peers but that labels did not. (General Factors)

Van Bourgondien, M., & Mesibov, G. (1987). Humor in high-functioning autistic adults. Journal of Autism and Developmental Disorders, 17, 417-424.

This study of humor in a social skills group of autistic adults showed enjoyment of a wide range of jokes and that humor enriched the members' lives. (Adolescence and Adulthood)

Van Bourgondien, M., Mesibov, G., & Dawson, G. (1987). Pervasive developmental disorders: Autism. In M. Wolraich (Ed.), The practical assessment and management of children with disorders of development and learning (pp. 326-351). Chicago: Year Book Medical Publishers.

An overview of current research and treatment issues in the area of autism with an emphasis on practical applications. (Treatment Model)

Watson, L. (1987). Pragmatic abilities and disabilities of autistic children. In T. Layton (Ed.), Language and treatment of autistic and developmentally disordered children (pp. 89-128). Springfield, IL: Thomas.

Reviews literature pertaining to skills and problems of autistic people in using language appropriately in interacting with others. Examines relationships between pragmatic skills and linguistic, cognitive, and social skills as well as the extent to which current neurobiological theories can account for the pragmatic deficits observed in autism. (Language)

**1988**

Bristol, M., Gallagher, J., & Schopler, E. (1988). Mothers and fathers of young developmentally disabled and nondisabled boys: Adaptation and spousal support. Developmental Psychology, 24, 441-451.

Tested the influence of parent gender and child's disability status on parental adaptation and family roles in families of young developmentally disabled and nondisabled boys using developmental assessments, in-home ratings of parenting, and maternal and paternal self-assessments and interviews. (Family Factors)

Dewey, D., Lord, C., & Magil, J. (1988). Qualitative assessment of the effect of play materials in dyadic peer interactions of children with autism. Canadian Journal of Psychology, 42, 242-260.

Using videotaping, investigated the relationship between play materials and qualitative aspects of play of nonretarded autistic, behavior-disordered, and normally developing children in dyads with nonhandicapped age mates. (Teaching Factors)

Garfin, D., McCallon, D., & Cox, R. (1988). Validity and reliability of the Childhood Autism Rating Scale with autistic adolescents. Journal of Autism and Developmental Disorders, 18, 367-378.

The results of two studies on the validity and reliability of the CARS for autistic adolescents suggest that the scale may be an adequate measure of autism in adolescents. (Diagnostic Assessment)

Lord, C. (1988). Enhancing communication in adolescents with autism. Topics in Language Disorder, 9, 72-81.

Covers communication issues arising during adolescence, recent changes in approaches to communication, and identifying goals, resources, and strategies for communication by autistic adolescents. (Language)

Lord, C., & Schopler, E. (1988). Intellectual and developmental assessment of autistic children from preschool to schoolage: Clinical implications of two follow-up studies. In E. Schopler & G. Mesibov (Eds.), Diagnosis and assessment in autism (pp. 167-181). New York: Plenum.

Discusses two follow-up studies on stability and predictability of IQs of young children with autism using changes in scores after 5 years as the basis for discussing uses and limitations of early intelligence testing of autistic children. (Diagnostic Assessment)

Marcus, L., & Olley, J. (1988). Developing public school programs for students with autism and related developmental disabilities. In M. Powers (Ed.), Severe developmental disabilities: Expanded systems of interaction (pp. 179-197). Baltimore: Brookes.

Describes problems faced by autistic students and their families in getting appropriate educational services, using the TEACCH program to illustrate overcoming such problems in areas of diagnosis and assessment, continuity of curriculum, working with school administrations, and interagency cooperation. (Treatment Model)

Mesibov, G. B. (1988). Diagnosis and assessment of autistic adolescents and adults. In E. Schopler & G. B. Mesibov (Eds.), Diagnosis and assessment in autism (pp. 227-238). New York: Plenum.

Describes the use of the CARS for diagnosis, the use of the AAPEP for assessment, and changes in autism with maturity. (Diagnostic Assessment)

Mesibov, G., Schopler, E., Schaffer, B., & Landrus, R. (1988). Individualized assessment and treatment for autistic and developmentally disabled children: Vol. 4. Adolescent and adult psychoeducational profile (AAPEP). Austin, TX: Pro-Ed.

The AAPEP extended the PEP to be a source of information for developing individualized programs centered around the vocational and residential placement needs of autistic adolescents and adults.  
(Diagnostic Assessment)

Mesibov, G. B., Troxler, M., & Boswell, S. (1988). Assessment in the classroom. In E. Schopler & G. B. Mesibov (Eds.), Diagnosis and assessment in autism (pp. 261-270). New York: Plenum.

Describes how assessment techniques in the examination of deficits, strengths, interests, long-range needs, and curriculum areas can facilitate effective interventions in a classroom. (Diagnostic Assessment)

Rutter, M., LeCouteur, A., Lord, C., MacDonald, H., Rios, P., & Folstein, S. (1988). Diagnosis and subclassification of autism: Concepts and instrument development. In E. Schopler & G. Mesibov (Eds.), Diagnosis and assessment in autism (pp. 239-259). New York: Plenum.

Describes measures developed to meet new purposes of diagnosis in autism that arise as the basic biological disorder is identified and clinical diagnostic criteria are sharpened and redefined. (Diagnostic Assessment)

Rutter, M., & Schopler, E. (1988). Autism and pervasive developmental disorders: Concepts and diagnostic issues. In E. Schopler & G. Mesibov (Eds.), Diagnosis and assessment in autism (pp. 15-36). New York: Plenum.

Updates information on the defining features and diagnostic issues of autism and related disorders, reviewing validity of the syndrome, controversies over boundaries and heterogeneity within the syndrome, and the use of diagnostic rating instruments for systematic sample selection. (Diagnostic Assessment)

Schopler, E., & Mesibov, G. (Eds.). (1988). Diagnosis and assessment in autism. New York: Plenum.

Presents issues of classification and diagnosis from the perspective of parents, teachers, and clinicians. Reviews diagnostic instruments, giving attention to the diagnosis of lower functioning children, adolescents and adults, and preschool children. Reviews assessment issues of behavior, nutrition, families, and living environments. (Diagnostic Assessment)

Schopler, E., & Mesibov, G. (1988). Introduction to diagnosis and assessment in autism. In E. Schopler & G. Mesibov (Eds.), Diagnosis and assessment in autism (pp. 3-14). New York: Plenum.

Presents the book's major themes and their treatments in the chapters: the design and use of instruments and processes for diagnosis and assessment that serve clinicians, parents, and teachers in programming for academic, communication, vocational, self-help, and social needs of autistic clients. (Diagnostic Assessment)

Schopler, E., Reichler, R., & Renner, B. (1988). The childhood autism rating scale (CARS). Los Angeles, CA: Western Psychological.

The CARS, a scale for diagnostic screening and classification of autism, separates mild to moderate from moderate to severe cases and distinguishes them from developmentally handicapped children without autism. Constructed to give clinicians an objective diagnosis of autism in a readily usable form, it identifies items according to five major diagnostic systems. (Diagnostic Assessment)

Short, A., & Schopler, E. (1988). Factors relating to age of onset in autism. Journal of Autism and Developmental Disorders, 18, 207-216.

Examined the distribution of ages of onset of autism and related communication handicaps and assessed factors related to age of onset, finding early onset to relate to severity as measured by IQ and ratings on the CARS, thus supporting the treatment of age of onset by DSM-III-R. (Autism Theory)

Watson, L., & Marcus, L. (1988). Diagnosis and assessment of preschool children. In E. Schopler & G. Mesibov (Eds.), Diagnosis and assessment in autism (pp. 271-301). New York: Plenum.

Discusses early identification and diagnosis, assessment in social, communication, cognitive, and motor areas, assessment of medical and family needs, and the clinical implications of early diagnosis and assessment. (Diagnostic Assessment)

## 1989

Bristol, M., & Schopler, E. (1989). The family in the treatment of autism. In American Psychiatric Association, Treatments of psychiatric disorders: A task force report of the American Psychiatric Association (pp. 249-266). Washington, DC: American Psychiatric Association.

Discusses the importance, purpose, treatment, and efficacy data for parents as cotherapists, parent counseling (vs. psychotherapy), and sibling services. (Parent Involvement)

Campbell, M., & Schopler, E. (Eds.). (1989). Section 2: Pervasive developmental disorders. In American Psychiatric Association, Treatments of psychiatric disorders: A task force report of the American Psychiatric Association (pp. 179-294). Washington, DC: American Psychiatric Association.

A comprehensive presentation of psychosocial and pharmacologic therapeutic interventions in pervasive developmental disorders, reflecting the theoretical shift from psychodynamic concepts based on psychoanalytic theories to emphasis on empirical research based on cognitive and behavior theory. (General)

Gallagher, J., & Bristol, M. (1989). Families of young handicapped children. In M. Wang, M. Reynolds, & H. Walberg (Eds.), Handbook of special education research and practices. Vol. 3. Oxford, England: Pergamon.

Explores factors influencing family adaptation to a handicapped child, the effect of the child on the family, the roles expected of family members in coping with the child, the effects of increased stress on the family, and the effectiveness of various parent intervention programs, stressing that the family is a complex social system that must be understood in order to help the child effectively. (Family Factors)

Lansing, M. (1989). Educational evaluation. In C. Gillberg (Ed.), Diagnosis and treatment of autism (151-166). New York: Plenum.

Describes broad educational evaluation for planning optimal treatment for an autistic child using the Psychoeducational Profile Revised (PEP-R). (Diagnostic Assessment)

Le Couteur, A., Rutter, M., Lord, C., Rios, P., Robertson, S., Holdgrafer, M., & McLennan, J. (1989). Autism diagnostic interview: A standardized investigator-based instrument. Journal of Autism and Developmental Disorders, 19, 363-387.

Describes both the development of the ADI for the differential diagnosis of pervasive development disorders and the diagnostic algorithm based on its use that identified all of the autistic and none of the nonautistic subjects. (Diagnostic Assessment)

Lord, C., Goode, S., Rutter, M., & Schopler, E. (1989). Sex differences in autism. International Journal of Rehabilitation Research, 12, 113-114.

Presents an international collaborative study of females with matched males and its possible implications for our understanding of sex differences in the etiology and developmental course of autism. (Autistic Characteristics)

Lord, C., & Magil, J. (1989). Methodological and theoretical issues in studying peer-directed behavior and autism. In G. Dawson (Ed.), Autism: Nature, diagnosis, and treatment (pp. 326-345). New York: Guilford.

Considers methodological and theoretical issues raised by recent studies on peer interactions by autistic children in reviewing the problem of defining a child's intent to participate in social interaction when the child has limited communication and social skills. (Autism Theory)

Lord, C., Rutter, M., Goode, S., Heemsbergen, J., Jordan, H., Mawhood, L., & Schopler, E. (1989). Autism diagnostic observation schedule: A standardized observation of communicative and social behavior. Journal of Autism and Developmental Disorders, 19, 185-212.

Describes the ADOS, a series of structured and semistructured presses for interaction, accompanied by coding of specific target behaviors associated with particular tasks and by general ratings of the quality of behaviors. (Diagnostic Evaluation)

Lord, C., & Schopler, E. (1989). The role of age at assessment, developmental level, and test in the stability of intelligence scores in young autistic children. Journal of Autism and Developmental Disorders, 19, 483-500.

Comparisons made of IQ and DQ scores for groups of autistic children at initial assessment and reassessed at least 2 years later showed that stability and predictability over a mean follow-up period of 5 years were related to age, developmental level, and test used at initial assessment. (Diagnostic Assessment)

Lord, C., & Schopler, E. (1989). Stability of assessment results of autistic and nonautistic language-impaired children from preschool years to early school age. Journal of Child Psychology and Psychiatry, 30, 575-590.

When predictability, consistency in group means, and intraindividual stability of DQs and IQs were assessed from preschool to school age for autistic and nonautistic communication-handicapped children, DQs at age 4 were correlated with performance IQ at age 10 for both groups, and absolute difference scores and group means were equivalent for both samples. (Diagnostic Assessment)

Marcus, L., & Campbell, M. (1989). Diagnosis and evaluation for treatment planning. In American Psychiatric Association, Treatments of psychiatric disorders: A task force report of the American Psychiatric Association (pp. 180-192). Washington, DC: American Psychiatric Association.

Discusses the criteria for diagnosis, the purposes of evaluation, some strategies of evaluation, and the implementation of a treatment plan for autistic clients. (Diagnostic Assessment)

Marcus, L., & Schopler, E. (1989). Parents as cotherapists with autistic children. In C. Schaefer & J. Briesmeister (Eds.), Handbook of parent training (pp. 337-360). New York: Wiley.

Reviews earlier approaches to working with parents and describes the TEACCH model in detail with case illustrations and relevant research findings. (Parent Involvement)

Mesibov, G. (1989). Other treatment modalities. In American Psychiatric Association, Treatments of psychiatric disorders: A task force report of the American Psychiatric Association (pp. 266-274). Washington, DC: American Psychiatric Association.

Discusses treatment modalities used with autistic adolescents and adults such as individual counseling, social skills training, and residential options. (Adolescence and Adulthood)

Mesibov, G. (1989). Transition from school to work. In American Psychiatric Association, Treatments of psychiatric disorders: A task force report of the American Psychiatric Association (pp. 129-132). Washington, DC: American Psychiatric Association.

Examines basic training goals for each phase of the developmental process from identification through adulthood for the mentally retarded, emphasizing skills necessary later for community functioning. (General)

Mesibov, G., Schopler, E., & Caison, W. (1989). The Adolescent and Adult Psychoeducational Profile (AAPEP): Assessment of adolescents and adults with severe developmental handicaps. Journal of Autism and Developmental Disorders, 19, 33-40.

This study of the AAPEP found high interrater reliability on all its function areas and scales, and validity measures suggested that recommendations generated from the AAPEP were more helpful than those already generated for individual clients without use of the AAPEP. (Diagnostic Assessment)

Mesibov, G., Schopler, E., Schaffer, B., & Michal, N. (1989). Use of the Childhood Autism Rating Scale with autistic adolescents and adults. Journal of the American Academy of Child and Adolescent Psychiatry, 28, 538-541.

Tested the suitability of the CARS for diagnosing adolescents and adults with autism and examined CARS ratings over time to assess how characteristics of autism change during adolescence. Found the CARS suitable for use with adolescents, with nine CARS categories improving over time and one declining. (Diagnostic Assessment)

Morrison, F. J., Lord, C., & Keating, D. P. (1989). Applied developmental psychology, Vol. 3. New York: Academic.

Contains research reviews of studies of infants having direct applications to medicine, clinical practice, public policy, or education. (General Studies)

Morrison, F. J., Lord, C., & Keating, D. P. (1989). Psychological development in infancy: An overview. In F. J. Morrison, C. Lord, & D. P. Keating (Eds.), Applied developmental psychology, Vol. 3 (pp. 2-8). New York: Academic.

A review of applied studies of infant development and how they have affected medicine and public policy in the last 10 years. (General Studies)

Olley, J., & DiLavore, P. (1989). Special education. In American Psychiatric Association, Treatments of psychiatric disorders: A task force report of the American Psychiatric Association (pp. 123-129). Washington, DC: American Psychitric Association.

Discusses legal and educational issues important for the mentally retarded with attention to labeling, classroom placement, curriculum, teaching methods, and early intervention. (General)

Olley, J., & Marcus, L. (1989). Education for children with autism. In American Psychiatric Association, Treatments of psychiatric disorders: A task force report of the American Psychiatric Association (pp. 192-201). Washington, DC: American Psychitric Association.

Discusses the principle of least restrictive environment, approaches to its application to autistic children, and the roles parents and physicians may play in the education of autistic children. (Teaching Factors)

Schopler, E. (1989). Excesses of the normalization concept. American Psychologist, 44, 447-448.

A letter written in support of the 1987 Landesman and Butterfield review of the normalization controversy against ideologues at the extremes of the deinstitutionalization controversy. (Treatment Model)

Schopler, E. (1989). Principles for directing both educational treatment and research. In C. Gillberg (Ed.), Diagnosis and treatment of autism (pp. 167-183). New York: Plenum.

Reviews the obstacles to developing TEACCH, a state-wide, community-based service system for autistic people, and the concepts and principles that have made TEACCH viable for so long. (General)

Schopler, E., Short, A., & Mesibov, G. (1989). Relation of behavioral treatment to "normal functioning": Comment on Lovass. Journal of Consulting and Clinical Psychology, 57, 162-164.

Reviews problems with the 1987 Lovaas outcome study of intensive behavioral intervention with young autistic children and posits the effects of the intervention cannot be determined based on the available data. (Treatment Outcome)

Van Bourgondien, M. (1989). General counseling services. In American Psychiatric Association, Treatments of psychiatric disorders: A task force report of the American

Psychiatric Association (pp. 104-107). Washington, DC: American Psychiatric Association.

A review of counseling services for the mentally retarded stressing involving all significant adults from the client's life in the therapy. (General)

Van Bourgondien, M., & Mesibov, G. (1989). Diagnosis and treatment of adolescents and adults with autism. In G. Dawson (Ed.), Autism: Nature, diagnosis, and treatment (pp. 367-385). New York: Guilford.

A review of research and clinical issues in the diagnosis of adolescents and adults with autism. (Adolescence and Adulthood)

Watson, L. (1989). Language and communication therapy. In American Psychiatric Association, Treatments of psychiatric disorders: A task force report of the American Psychiatric Association (pp. 201-217). Washington, DC: American Psychiatric Association.

Covers the goals of language and communication therapy with autism and related disorders, assessment as the starting point for therapy, and treatment methods. (Language)

Watson, L., Lord, C., Schaffer, B., & Schopler, E. (1989). Teaching spontaneous communication to autistic and developmentally handicapped children. Austin, TX: Pro-Ed.

This TEACCH communication curriculum is designed to assess and meet the needs of children with a variety of language skills and to be useful with children not developmentally ready to learn language but in need of communication skills at a preverbal level. (Language)

### 1990

Marcus, L. (1990). Training of psychologists in autism and related severe developmental disorders. In P. Magrab & P. Wohlford, (Eds.), Improving psychological services for children and adolescents with severe mental disorders: Clinical training in psychology (pp. 133-137). Washington, DC: American Psychological Association.

Describes a training model for psychology interns and postdoctoral fellows developed by TEACCH in which interns participate in a variety of pediatric, child psychiatry, and child development settings. (Treatment Model)

Mates, T. (1990). Siblings of autistic children: Their adjustment and performance at home and in school. Journal of Autism and Developmental Disorders, 20, 545-553.

Examined the relationship between sex and family size of siblings and the siblings' performance on achievement, self-concept, home behavior, and school behavior. Found little variance as a function of sex or family size, and siblings' performance did not suggest a need for special intervention. (Family Factors)

Mesibov, G. (1990). Normalization and its relevance today. Journal of Autism and Developmental Disorders, 20, 379-390.

Issues in community-based programs for developmentally handicapped people have become more diverse and the choices more complex, and the effects of the normalization principle have polarized issues for many reasons. What is needed to replace the normalization principle are clearer guiding concepts more responsive to clients' needs and more reflective of their best interests. (General)

Mesibov, G., & Stephens, J. (1990). Perceptions of popularity among a group of high-functioning adults with autism. Journal of Autism and Developmental Disorders, 20, 33-43.

A study of how a group of autistic adults perceived one another's interpersonal attributes and popularity that used a sociogram and questionnaire designed to determine perceptions of best looking, most athletic, and most humorous group members. (Adolescence and Adulthood)

Schopler, E., & Hennike, J. (1990). Past and present trends in residential treatment. Journal of Autism and Developmental Disorders, 20, 291-298.

A summary of residential care for those with autism and other developmental handicaps for the past 200 years, tracing residential trends toward community integration during the past three decades and parallel cycles for residential care from previous periods. Identifies potential negative side effects of current trends. (adolescence and Adulthood)

Schopler, E., Reichler, R., Bashford, A., Lansing, M., & Marcus, L. (1990). Individualized assessment and treatment for autistic and developmentally disabled children: Vol. 1. Psychoeducational profile revised (PEP-R). Austin, TX: Pro-Ed.

The new PEP-R, the diagnostic tool developed by Division TEACCH for assessments for designing individualized school and home teaching programs for autistic and related developmentally disordered children, was revised to meet the need for evaluating younger children as earlier identification of autism and related developmental disorders becomes a reality. (Diagnostic Assessment)

Van Bourgondien, M. E., & Elgar, S. (1990). The relationship between existing residential services and the needs of autistic adults. Journal of Autism and Developmental Disorders, 20, 299-308.

Reviews the characteristics of autism causing difficulty in adaptation of autistic people to residential service options designed for people with other handicaps. (Adolescence and Adulthood)

Van Bourgondien, M. E., & Schopler, E. (1990). Critical issues in the residential care of people with autism. Journal of Autism and Developmental Disorders, 20, 391-401.

A summary of this special issue on residential issues in autism that reviews both the shared concerns of the authors and the individual program variations they present. (Adolescence and Adulthood)

Wall, A. J. (1990). Group homes in North Carolina for children and adults with autism. Journal of Autism and Developmental Disorders, 20, 353-366.

Because evidence suggests that group homes are a viable and cost-effective residential option for autistic people, this article looks at issues of cost effectiveness, staff selection and training, level of structure and programming, composition of the client group, adherence to a central philosophy, and the role of administration.  
(Adolescence and Adulthood)

### 1991

Cox, R., & Schopler, E. (1991). Social skills training for children. In M. Lewis (Ed.), Child and adolescent psychiatry (pp. 903-909). Baltimore, MD: Williams & Wilkins.

Presents rationale and definition of social skills training, discusses target audience and appropriate content of training, and describes variations for different age and ability groups. (Treatment Model)

Edwards, D., & Bristol, M. (1991). Autism: Early identification and management in family practice. American Family Physician, 44, 1755-1764.

Discusses autism and its etiology, its co-occurrence with other disorders, purposes of the medical evaluation, and various therapies, stressing the family physician's role in early identification, continuing medical care, and support to the child and family.  
(General)

Karst, T. O., & Van Bourgondien, M. E. (1991). Adaptation and change in a residential farmstead community. In N. Giddan & J. Giddan (Eds.), Autistic adults at Bittersweet Farms (pp. 198-205). Binghamton, NY: Haworth.

Outlines social psychological concepts and ideas basic to the Bittersweet program, how they apply in the individualization of the program to each resident, and how they result in a system of habilitation and change. (Treatment Model)

Lord, C. (1991). A cognitive behavioral model for the treatment of social-communicative deficits in adolescents with autism. In R. McMahon & R. Peters (Eds.), Behavior disorders of adolescence: Research, intervention, and policy in clinical and school settings (pp. 155-174). New York: Plenum.

Provides a preliminary model for the treatment of social and communicative deficits in higher level autistic adolescents who use spoken language to communicate. (Treatment Model)

Lord, C. (1991). Methods and measures of behavior in the diagnosis of autism and related disorders. Psychiatric Clinics of North America, 14, 69-80.

Because attention has been directed more toward creating diagnostic frameworks for autism than at how information for diagnosis is collected, this review considers methods of diagnosis and their implications for understanding the social and communicative deficits in autism. (Diagnostic Assessment)

Lord, C., Mulloy, C., Wendelboe, M., & Schopler, E. (1991). Pre- and perinatal factors in high-functioning females and males with autism. Journal of Autism and Developmental Disorders, 21, 197-209.

Found nonoptimality indices higher for high-functioning autistic subjects than their normally developing siblings, with the difference associated with birth order and with no sex differences. (Biomedical)

Mesibov, G. (1991). Autism. In R. Dulbecco (Ed.), Encyclopedia of human biology, Vol. 1 (pp. 505-512). New York: Academic.

An introductory article on autism presenting the primary characteristics, demographics and epidemiology, etiology, and neurological correlates of autism, theories of autism, and major treatment approaches. (Autistic Characteristics)

Mesibov, G. (1991). What is special about pediatric psychology. Journal of Pediatric Psychology, 16, 267-271.

The author's "Society of Pediatric Psychology Distinguished Service Award" address points out the Society's establishment to solve problems and meet needs not addressed elsewhere, the multidisciplinary approach of the field, and the competence and humanism common to members of the fields. (General)

Mesibov, G., & Van Bourgondien, M. (1991). Autism. In S. Hooper, G. Hynd, & R. Mattison (Eds.), Assessment and diagnosis of child and adolescent psychiatric disorders: Current issues and procedures (pp. 69-95). Hillsdale, NJ: Erlbaum.

Traces the historical background of the autism syndrome, examines the evolution of its definition, and reviews diagnostic instruments. (Autistic Characteristics)

Olecki, J., Kay, B., Salzano, J., Van Bourgondien, M., & Tyner, R. (1991). Funding and politics. In N. Giddan & J. Giddan (Eds.), Autistic adults at Bittersweet Farms (pp. 161-168). Binghamton, NY: Haworth.

Presents issues of politics and funding for residential living facilities with examples of the founding and funding of some specific facilities. (Adolescence and Adults)

Ousley, O., & Mesibov, G. (1991). Sexual attitudes and knowledge of high-functioning adolescents and adults with autism. Journal of Autism and Developmental Disorders, 21, 471-481.

Assessed sexual knowledge and interest of high-functioning autistic adults and mildly to moderately mentally retarded nonautistic adults using a sexuality vocabulary checklist and a multiple choice questionnaire. Presents group results in experience, knowledge, and interest. (Adolescence and Adulthood)

Schopler, E. (1991). Behavioral and research influences on educational and clinical programs. In N. Giddan & J. Giddan (Eds.), Autistic adults at Bittersweet Farms (pp. 146-155). Binghamton, NY: Haworth.

Discusses how behavior analysis, behavior management, structured teaching, and both formal and informal research relate to TEACCH philosophy and practice.

(Adolescence and Adults)

Schopler, E. (1991). Training professionals and parents for teaching autistic children. In T. Ollendick, J. Ratey, S. Mayfield, & E. Mikklesen (Codirectors), Postgraduate advances in autism disorder: An independent-study course designed for individual continuing education (pp. 1-9). Berryville, VA: Forum Medicam.

Briefly summarizes how professionals and parents are trained in the TEACCH system to teach and work together with autistic children. (Parental Involvement)

Schopler, E., & Van Bourgondien, M. (1991). Treatment and Education of Autistic and related Communication handicapped CHildren (TEACCH). In N. Giddan & J. Giddan (Eds.), Autistic adults at Bittersweet Farms (pp. 85-94). Binghamton, NY: Haworth.

Reports on the statewide TEACCH system for treatment and understanding of autistic children, giving an overview of the key concepts and components of TEACCH. (General)

Volden, J., & Lord, C. (1991). Neologisms and idiosyncratic language in autistic speakers. Journal of Autism and Developmental Disorders, 21, 109-130.

Identified idiosyncratic use of words or phrases in speech samples of age- and verbal IQ-matched groups of autistic, mentally handicapped, and normally developing children and adolescents, finding true neologisms most frequently in the language of mentally handicapped autistic children. (Language)

## 1992

Lord, C., & Venter, A. (1992). Outcome and follow-up studies of high-functioning autistic individuals. In E. Schopler & G. Mesibov (Eds.), High-functioning individuals with autism (pp. 187-199). New York: Plenum.

Provides recent and earlier studies of high-functioning individuals across development and discusses factors predicting later functioning. (Treatment Outcome)

Lord, C., & Ward, M. J. (1992). Autism and pervasive developmental disorders. In H. Adams & P. Sutker (Eds.), Comprehensive handbook of psychopathology (2nd ed.) (pp. 792-814). New York: Plenum.

This update of a previous review discusses behavioral characteristics, treatment, and follow-up studies of children with autism and related disorders. (Autistic Characteristics)

Mesibov, G. (1992). Treatment issues with high-functioning adolescents and adults with autism. In E. Schopler & G. Mesibov (Eds.), High-functioning individuals with autism (pp. 143-155). New York: Plenum.

Presents principles for Individual and group counseling with high-functioning adolescents and adults with autism along with applications and successful case studies of the use of these nonpsychoanalytic approaches. (Adolescents and Adults)

Mesibov, G., & Schopler, E., (1992). Introduction to high-functioning individuals with autism. In E. Schopler & G. Mesibov (Eds.), High-functioning individuals with autism (pp. 3-9). New York: Plenum.

Introduces the book's topic and reviews the purpose and content of each chapter. (Characteristics of Autism)

Rutter, M., & Schopler, E. (1992). Classification of pervasive developmental disorders: Some concepts and practical considerations. Journal of Autism and Developmental Disorders, 22, 459-482.

Considers issues relating to classification, such as differences between clinical and research needs, access to resources, and the neuropsychiatric interface, and discusses structural organizations of classification systems, terms of classification grouping, and choices and definitions of PDD subcategories. (Diagnostic Assessment)

Schopler, E., & Mesibov, G. (1992). High-functioning individuals with autism. New York: Plenum.

Includes an overview section of diagnostic and etiologic issues (including chapters by a parent and a person with high-level autism), sections on social and education issues, and sections of parent essays and personal accounts. (General)

Van Bourgondien, M. E., Marcus, L., & Schopler, E. (1992). Comparison of DSM-III-R and Childhood Autism Rating Scale diagnoses of autism. Journal of Autism and Developmental Disorders, 22, 493-506.

Compared DSM-III-R and CARS diagnoses to determine whether DSM-III-R overdiagnoses or underdiagnoses autism and to determine which of the 16 criteria are the best discriminators of autism. (Diagnostic Assessment)

Van Bourgondien, M. E., & Woods, A. (1992). Vocational possibilities for high-functioning adults with autism. In E. Schopler & G. Mesibov (Eds.), High-functioning individuals with autism (pp. 227-239). New York: Plenum.

Discusses factors critical to successful employment and describes two options being developed in North Carolina--supported employment and an integrated vocational and residential program, the Carolina Living and Learning Center. (Adolescents and Adults)

Venter, A., Lord, C., & Schopler, E. (1992). A follow-up study of high-functioning autistic children. Journal of Child Psychology and Psychiatry, 33, 489-508.

Reports a follow-up study of high-functioning children into adolescence and adulthood that showed verbal IQ and discourse comprehension to be the strongest predictors of academic achievement and adaptive skills. (Treatment Outcome)

### 1993

Bristol, M., Gallagher, J., & Holt, K. (1993). Maternal depressive symptoms in autism: Response to psychoeducational intervention. Rehabilitation Psychology, 38, 3-10.

Assessed the impact of a psychoeducational intervention on the depressive symptoms of mothers of young children with autism or related disorders. Had mothers in two demographically comparable treatment and no-treatment groups complete the CES-D Depression Scale at various intervals. (Family Factors)

Cox, R. (1993). Normal Childhood development from birth to five years. In E. Schopler, M. E. Van Bourgondien, & M. Bristol (Eds.), Preschool issues in autism (pp. 39-57). New York: Plenum.

Presents important aspects of developmental during a typical child's first five years, focussing on the developmental accomplishments that allows children to function socially and communicately. (General)

Lord, C. (1993). Early social development in autism. In E. Schopler, M. E. Van Bourgondien, & M. Bristol (Eds.), Preschool issues in autism (pp. 61-94). New York: Plenum.

Describes the social deficits of autistic children during the preschool years and briefly discusses assessment techniques and interventions. (Autistic Characteristics)

Lord, C., Bristol, M., & Schopler, E. (1993). Early intervention for children with autism and related developmental disorders. In E. Schopler, M. E. Van Bourgondien, & M. Bristol (Eds.), Preschool issues in autism (pp. 199-221). New York: Plenum.

Describes how assessment and intervention are brought together in a specific day treatment program that serves toddlers and preschool children in Division TEACCH. (Diagnostic Assessment)

Marcus, L., Lansing, M., & Schopler, E. (1993). Assessment of the autistic and pervasive developmentally disordered child. In J. Culbertson & D. Willis (Eds.), Testing young children (pp. 319-344). Austin, TX: Pro-Ed.

Reviews methods and strategies used at Division TEACCH for assessment and intervention with young autistic children, the importance of the family in the assessment process, and the importance of assessment to their future success. (Diagnostic Assessment)

Marcus, L. M., & Schopler, E. (1993). Pervasive developmental disorders. In T. Ollendick & M. Hersen (Eds.), Handbook of child and adolescent assessment (pp. 346-363). Boston: Allyn & Bacon.

Describes concepts, methods, and techniques for the assessment of children and adolescents with pervasive developmental disorders, especially those diagnosed

with autism, and reviews current efforts to translate assessment data into effective interventions. (Diagnostic Assessment)

Marcus, L., & Stone, W. (1993). Assessment of the young autistic child. In E. Schopler, M. E. Van Bourgondien, & M. Bristol (Eds.), Preschool issues in autism (pp. 149-173). New York: Plenum.

Discusses the importance of establishing a clear diagnosis, communicating results openly with parents, and linking assessment data to intervention methods. Illustrates the relationship between clinical and empirical approaches and the gaps in our current understanding of autism. (Diagnostic Assessment)

McLennan, J., Lord, C., & Schopler, E. (1993). Sex differences in higher functioning people with autism. Journal of Autism and Developmental Disorders, 23, (217-227).

In order to consider sex differences in severity of autism, used the ADI to assess differences between groups of autistic females and males with equivalent chronological nonverbal IQs. (Autistic Characteristics)

Mesibov, G. (1993). Treatment outcome is encouraging. American Journal on Mental Retardation, 97, 379-380.

This commentary on the McEachin, Smith, and Lovaas (1993) outcome study of the same issue highlights possible methodological flaws in the study clouding interpretation of the results. (Treatment Outcome)

Mesibov, G., Schroeder, C., & Wesson, L. (1993). Parental concerns about their children. In M. Roberts, G. Koocher, D. Routh, & D. Willis (Eds.), Readings in pediatric psychology (pp. 307-316). New York: Plenum.

Describes the types of parental concerns about children's behavior and development expressed to child development specialists in a private pediatric office. Suggests that training of pediatric psychologists be based more on these actual parental questions and concerns. (Parent Involvement)

Schopler, E. (1993). The anatomy of a negative role model. In G. Brannigan & M. Merrens (Eds.), The undaunted psychologist (pp. 172-186). Philadelphia, PA: McGraw-Hill.

Presents the idea of Bettelheim as a role model and offers the possibility that even a controversial teacher may become a constructive force in a student's education. (Teaching Factors)

Schopler, E., Van Bourgondien, M. E., & Bristol, M. (Eds). (1993). Preschool issues in autism. New York: Plenum.

Presents an introduction and overview of preschool issues, a section on diagnosis and assessment, and a final section on interventions. (General)

Van Bourgondien, M. E. (1993). Behavior management in the preschool years. In E. Schopler, M. E. Van Bourgondien, & M. Bristol (Eds.), Preschool issues in autism (pp. 129-145). New York: Plenum.

Reviews problems seen in autism and describes how they relate to both normal development and the underlying deficits of autism. Presents techniques for preventing behavior problems and a strategy for analyzing and solving problems around specific behavior problems. (Behavior Management)

#### **1994**

Lord, C., Rutter, M., & Le Couteur, A. (1994). A revised version of a diagnostic interview for caregivers of individuals with possible pervasive developmental disorders. Journal of Autism and Developmental Disorders, 24, 3, 659-685.

Describes how the ADI was revised: reorganized, shortened, modified for use with children with mental ages from 18 months into adulthood, and linked more with ICD-10 and DSM-IV criteria. (Diagnostic Assessment)

Lord, C., & Schopler, E. (1994). TEACCH services for preschool children. In S. Harris & J. Handelman (Eds.), Preschool education programs for children with autism (pp. 87-106). Austin, TX: Pro-Ed.

Describes the TEACCH program: population served, diagnosis and assessment, curriculum, structured teaching and behavior management, parent and family involvement, and outcome measures. (Treatment Model)

Marcus, L.M. & Schopler, E. (1994). Ethics and behavior therapy with children In J. Hattab (Ed) Ethics and child mental health (pp 166-176) Jerusalem: Gefen Books.

Ethical issues are discussed with emphasis on selected critical factors including the empirical basis of clinical practice, professional competencies, and the use and misuse of aversives. Special emphasis on autism and the TEACCH program as an approach that considers behavioral interventions in an ethical framework. (Treatment Model)

Mesibov, G.B., Schopler, E., & Hearsey, K.A. (1994). Structured teaching. In E. Schopler & G.B. Mesibov (Eds.), Behavioral issues in autism (pp. 195-207). New York: Plenum.

Describes structured teaching as a classroom method for dealing with behavior problems, presenting the elements of structured teaching in the context of the classroom methods used by TEACCH. (Teaching Factors)

Schopler, E. (1994). Behavioral priorities for autism and related developmental disorders. In E. Schopler & G. Mesibov (Eds.), Behavioral issues in autism (pp. 55-77). New York: Plenum.

Describes factors providing program structure and directions for the TEACCH model, describes many of the misapplied treatment concepts and techniques that

have arisen in the field over time, and discusses enduring principles and concepts for optimum individual treatment. (Treatment Model)

Schopler, E. (1994). Neurobiologic correlates in the classification and study of autism. In S. Broman & J. Grafman (Eds.), Atypical cognitive deficits in developmental disorders: Implication for brain function (pp. 87-100). Hillsdale, NJ: Erlbaum.

Introduces the section on autism in this volume on neurocognitive deficits in children with a historical perspective on autism, on its diagnostic classification, and on psychobiological research on autism in the hope that this historical perspective may aid in evaluating future research prospects and strategies. (Biomedical)

Schopler, E. (1994). A statewide program for the Treatment and Education of Autistic and related Communication handicapped Children (TEACCH). In F. Volkmar (Ed.), Child and adolescent psychiatric clinics of North America (pp. 91-103). Philadelphia, PA: Saunders.

Delineates essential program characteristics of TEACCH along with program priorities and values that contribute to its effectiveness. Compares specific treatment techniques with guiding principles and outcome studies from empirical research. (Treatment Model)

Schopler, E., & Mesibov, G. (Eds.) (1994). Behavioral issues in autism. New York: Plenum.

An assessment of behavior problems, principles of behavior management, and medical causes of behavior problems is followed by sections on assessment and treatment issues and on special issues such as punishment and nonaversive approaches to treatment. (Behavior Management)

Schopler, E., & Mesibov, G. (1994). Introduction to assessment and management of behavioral problems in children with autism. In E. Schopler & G. Mesibov (Eds.) Behavioral issues in autism (pp. 3-9). New York: Plenum.

Introduces the topic of assessment and management of behavior problems and reviews the purpose and content of each chapter.(Behavior Management)

## 1995

Campbell, M., Schopler, E., Mesibov, G.B., & Sanchez, L.E. (1995) Pervasive Developmental Disorders in Treatments of Psychiatric Disorders: The DSM-IV Edition, 2nd Edition, Vol. I. Gabbard, G.O. (Ed) Washington D.C.: American Psychiatric Press, pp 151-178.

The evaluation, treatment planning, parent' perspective for treatment, education, language and communication therapy, behavior management, pharmacotherapy, social skills training, individual therapy, vocational issues, and residential options involved in the DSM-IV diagnostic criteria of autistic disorders. (Treatment Model)

Cox, R., & Mesibov, G.B. (1995). Relationship between autism and learning disabilities. In E. Schopler & G. Mesibov (Eds.), Learning and cognition in autism (pp. 57-70). New York: Plenum.

Presents in detail the relationships between autism and learning disabilities, relying heavily on the most current research in the area for content and conclusions. (Autism Theory)

Lord, C. (1995). Facilitating social inclusion: Examples from peer intervention programs. In E. Schopler & G. Mesibov (Eds.). Learning and cognition in autism (pp. 221-240). New York: Plenum.

Drawing both on TEACCH's many years of experience with social skills programs and groups and on other research in the field, the author presents theory, intervention techniques, and examples of social cognition in social skills groups. (Autism Theory)

Mesibov, G. (1995). A comprehensive program for serving people with autism and their families: The TEACCH model. In J. Matson (Ed.), Autism in children and adults: Etiology, assessment, and intervention (pp. 85-97). Belmont, CA: Brooks-Cole.

Reviews the origins and evolution of TEACCH; describes the organization, philosophy, services, research, and training efforts; and emphasizes the importance of a comprehensive, integrated, and coordinated program of service delivery throughout. (Treatment Model)

Schopler, E., Mesibov, G.B., & Hearshey, K. (1995). Structured teaching in the TEACCH system. In Schopler, E. & Mesibov, G. (Eds.) Learning and cognition in Autism (pp. 243-267). New York: Plenum.

Review of the autism characteristics for which structured teaching serves as an environmental accommodation, and also how this relates to the guiding principles of the TEACCH system. (Teaching Factors)

Schopler, E., & Mesibov, G. (1995). Introduction to learning and cognition in autism. In E. Schopler & G. Mesibov (Eds.), Learning and cognition in autism (pp. 3-11). New York: Plenum.

Introduces the book's topic and outlines the presentations of each of the contributing authors. (General)

Schopler, E., & Mesibov, G. (Eds.) (1995). Learning and cognition in autism. New York: Plenum.

Presents general issues such as cognitive subtypes, theory of mind, and executive functions in autism; covers issues of social and cognitive development in autism; and illustrates both methods of clinical assessment of cognitive skills and strategies for cognitive education. (General)

Schopler, E. (Ed.) (1995). Parent survival manual: A guide to autism crisis resolution. New York: Plenum.

Divided into chapters by problem areas, this book gives both specific and general directions for solving behavior problems of autism and related disorders. Many examples of successful solutions are actual parent anecdotes. (Parent Involvement)

Schopler, E., (1995) "Autism Services Past, Present and Future," Princeton Lecture Series Papers. Princeton, NJ: Eden Institute Foundation.

The classification of autistic children through three time frames and how the structural conflicts between parents and professionals need to be resolved in the future.  
(General)

### **In Press**

Aman, M., Van Bourgondien, M.E., Wolford, P., & Sarpfahre, G. (in press). Psychotropic and anticonvulsant drugs in subjects with autism: Prevalence and patterns of use. Journal of the American Academy of Child and Adolescent Psychiatry.

A survey of the prevalence and patterns of psychotropic and anticonvulsant medication and vitamin treatments in patients with autism.(Biomedical)

Campbell, D.G., Reichle, N.C. & Van Bourgondien, M.E. (in press). The Autism Survey: an Evaluation of Reliability and Validity. Journal of Autism and Developmental Disorders.

The assessment instrument that defines three categories related to autism: social emotional features, cognitive features, and general descriptive features. (Diagnostic Assessment)

Campbell, M., Schopler, E., Cueva, J. E., Hallin, A. (1996) Treatment of Autistic Disorder. Journal of the American Academy of Child & Adolescent Psychiatry.

Overview of a variety of treatment approaches in individuals with autistic disorder is presented. (Treatment Model)

Marcus, L.M., Kuncze, L.J., & Schopler, E. (in press). Working with families. In D.J. Cohen & F.R. Volkmar (Eds.), Handbook of autism and pervasive developmental disorders. New York: Wiley.

A description of the changing needs of families from a developmental perspective and suggestions for enhancing coping skills of families. (Family Factors)

Mesibov, G.B. (in press). Division TEACCH: A Program Model for working with autistic people and their families. In M.C. Roberts (Ed.), Model practices in service delivery in child and family mental health. Hillside, NJ: Erlbaum.

The evolution of the TEACCH program, its basic principles and administrative structures, programmatic features, and evidence for its effectiveness and impact. (Treatment Model)

Mesibov, G.B., & Price, J. (in press). Respite care. In A.E. Dell Orto & R.P. Marinelli (Eds.), Encyclopedia of disability and rehabilitation. New York: MacMillan.

Overview of the center-based and home-based respite care community-based services. (Family Factors)

Schopler, E., (in press). Implementation of the TEACCH Philosophy. In D.J. Cohen & F.R. Volkmar (Eds.), Handbook of autism and pervasive developmental disorders. New York: Wiley.

Outline of the TEACCH program, history and origins of the program, and how it evolved, followed by the eight facets of the program philosophy. (Treatment Model)

Van Bourgondien, M.E., Reichle, N.C. & Palmer, A.B. (in press). Sexual Behavior in Adults with Autism. Journal of Autism and Developmental Disorders.

Survey of 89 adults with autism living in group homes in North Carolina. The relationship between sexual behavior and demographic variables and other types of behaviors is explored. (Behavior Management)

Van Bourgondien, M.E. & Reichle, N.C. (in press). Residential Treatment for Individuals with Autism. In D. Cohen & F.R. Volkmar, (Eds.), Handbook of Autism - 2nd Edition. New York: Wiley.

The history and needs of individuals with autism in residential care and an overview of autism-specified treatment options. (Treatment Model)

Van Bourgondien, M.E. & Reichle, N.C. (in press). The Carolina Living and Learning Center: An example of the TEACCH approach to residential and vocational training for adults with autism. In D. Haracopos, (Ed.), Autistic Adolescents and Adults, Denmark.

Description of the CLLC and the application of TEACCH principles to an older population.(Adolescents and Adults)

Van Bourgondien, M.E. & Schopler, E. (in press). Intervention for Adults with Autism, Journal of Rehabilitation.

An examination of four primary components of the TEACCH philosophy - structured teaching, communication training, leisure and social skill development, and stress reduction. (Treatment Model)