Using the College Infrastructure to Support Students on the Autism Spectrum

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Abstract
College students with high functioning autism (HFA) and Asperger syndrome (AS) are participating in postsecondary education in increasing numbers. Institutions of higher education (IHE) that admit these students should support their individual and unique needs. The challenges these students face in the domains of social interaction and executive function are often not addressed adequately. Traditional accommodations for students with disabilities are often insufficient to impact these students’ academic success and broader educational experience. Currently, only a handful of colleges and universities have developed specialized programs to support students on the autism spectrum. Often costly, such programs add thousands of dollars in fees above and beyond escalating tuition costs. Consequently, it is not surprising that most of the specialized autism support programs reside in private rather than public institutions. This article will discuss the notion that postsecondary institutions that do not have autism specialty support programs can utilize the resources that already exist in their infrastructure to support these students. This article describes the contributions of the various resources, facilities, and centers present on many college campuses that can be better utilized to support this endeavor. A key element of this approach is the coordination and collaboration among the different divisions in order to best serve this growing student population.

Keywords: Autism spectrum disorder; Asperger syndrome, support, infrastructure

The most recent report of the Centers for Disease Control and Prevention (2012) indicates that the incidence of autism spectrum disorder (ASD) in children has increased to 1 in 88. Greater awareness of the red flags of ASD, coupled with a broadening of the spectrum since 1994 to include milder forms of the condition, contributed to a dramatic rise in the incidence of individuals diagnosed with ASD. However, a concurrent decrease in other diagnoses (Boyle et al., 2011) has led many experts in the field to conclude that, at least to some degree, a shift in how students are diagnosed, rather than a sudden explosion of cases, accounts for the exceptional rise. For example, Shattuck (2006) reported that, as the number of children who were eligible for special education under an autism classification from 1994 to 2003 increased, the number of students who qualified for services under the categories of intellectual disability and learning disability declined.

Nevertheless, early diagnosis and positive outcomes from early intervention, coupled with educational and therapeutic services throughout the preschool, elementary, and secondary years, has enabled more individuals with high functioning autism (HFA) and Asperger syndrome (AS) to attend college (Graetz & Spampinato, 2008; Jones, 2012; Smith, 2007; Taylor, 2005; Zager, Alpern, McKeon, Maxam, & Mulvey, 2013) and more will continue to do so in the coming years. Anecdotal reports among those working in institutions of higher education (IHE) further support the increase of college students with spectrum conditions. Despite the lack of formal data regarding the number of students on the spectrum currently enrolled or expected to do so in the future, colleges should prepare to serve
this growing population (Davis, 2012). The success or failure of these students once enrolled in college could be determined by the degree to which they can be supported by their IHE (Welkowitz & Baker, 2005).

The purpose of this article is to provide information to those who work in college or university settings about programs for the growing population of students with HFA/AS and to offer suggestions for those IHEs that have not yet established programs to meet the needs of these students by using already existing resources. This article will address the (1) legal mandates related to the college students on the spectrum, (2) differences between service provision in high school and college, (3) specific challenges of college students on the spectrum that might sabotage the success of their college experience, and (4) state of the art of programs for college students with ASD. Next, the article will explore how the existing infrastructure of an IHE can be tapped to better serve these students until a program is developed and in place. This article describes the contributions of the various resources, facilities, and centers present on many college campuses that can be better utilized to support this endeavor. In order to do so, the different components of the infrastructure will need to coordinate and collaborate to best serve these students. The article will conclude with suggestions for future directions.

**Legal Mandates for College Students with ASD**

Colleges and universities must provide all students with a documented disability with reasonable accommodations for each of their classes unless doing so would constitute a fundamental alteration in the nature of the class or would be an undue burden. Further, college students requiring accommodations must be otherwise qualified to meet the essential requirements of their courses/program of study, with or without reasonable accommodations. In high school, students were served though the Individuals with Disabilities Education Act (IDEA) with an individualized education plan (IEP) to receive a free and appropriate public education (FAPE), which provided curriculum modifications, therapeutic services, and other supports deemed necessary to enable them to succeed. Parents were mandated to be part of the special process while providing needed familial support throughout their child’s preschool, elementary, and secondary school years. In addition to parents, educators and therapists put systems into place to maximize their students’ success. Often the students received ongoing support with organization, routine, and negotiating the social world (Welkowitz & Baker, 2005).

However, a different set of legal mandates applies at the college level (Ciccantelli, 2011; Graetz & Spampinato, 2008; Wolf, Thierfeld Brown, & Bork, 2009; Zager et al., 2013). Section 504C of the Rehabilitation Act (1973) guarantees that a student with a disability will have equal access to all educational programs, services, facilities, and activities. The legal requirement is that the student will not be excluded from participation in any aspect of college life. The Americans with Disabilities Act ([ADA], 1990) entitles students with a documented disability to reasonable accommodations set by law (VanBergeijk, Klin, & Volkmar, 2008). Common accommodations at the college level for students with disabilities include extended time on tests and alternative quieter exam locations (Smith, 2007; Wolf et al., 2009). While these more traditional accommodations would be useful to some students on the spectrum, accommodations should reflect the students’ individual needs (Pillay & Bhat, 2012). Students with HFA/AS often need support in two additional domains that go beyond the more common, traditional reasonable accommodations, (1) the executive functions of planning, organizing, and time management, and (2) the social-emotional/relationship realm.

**Differences in Serving High School and College Students with Disabilities**

At the college level, unlike all prior educational experiences, the student is essentially responsible for his or her own needs. By law, students with disabilities cannot access the reasonable accommodations mandated by the Section 504C/ADA unless they self-disclose their disability to a designated entity, usually the disabilities services office at their college, and self-advocate for those accommodations. Self-disclosure and self-advocacy, important issues for college students with ASDs, are discussed in the emerging professional literature (Ciccantelli, 2011; Robertson & Ne’eman, 2008; Wolf et al., 2009) and recommended by individuals with HFA/AS who have succeeded in college and beyond (Carley, 2008; Shore, 2003; Willey, 1999). Secondary schools could help ensure that their students on the spectrum who wish to go to college have the readiness skills to enroll by providing advanced preparation in the social, self-advocacy, and organizational domains during the IDEA
mandated transition-planning phase of high school (Ciccantelli, 2011).

Several key issues should be addressed during this crucial transition phase before the student enrolls in postsecondary education, including the type and size of the college, the student’s independent living skills, disclosure and self-advocacy, and the level of academic and social supports that would be needed in order for the student to succeed (Adreon & Durocher, 2007). Fortunately, resources are available for individuals on the spectrum who are considering college, their parents, and the professionals who work with them (Bork, Brown, King, & Wolf, 2012; Freedman, 2010; Harpur, Lawlor, & Fitzgerald, 2004). Such resources could help in the decision making process while the student is still in high school and the family has access to the support of a transition team to help inform future plans.

**Challenges of College Students with ASD**

ASDs are complex neurodevelopmental disorders whose triad of symptoms include problems in social interaction, difficulty with communication, and restricted and repetitive behaviors, all of which emerge during the developmental period. These core characteristics, manifest in varying degrees depending on the individual’s profile, are often identified by the preschool years. In some cases, individuals with AS are diagnosed later because of their average to above average intellectual and semantic-syntactic linguistic abilities. However, students on the spectrum who attend college may continue to have challenges in these core areas despite having received years of educational and therapeutic services. The transition to college is particularly stressful because these individuals often struggle with change in routine and have a strong need for predictability (Glennon, 2001). Advanced preparation for these new circumstances is highly recommended (Ciccantelli, 2011) and should be a cornerstone of the transition process for those high school students who wish to pursue higher education, as many students on the spectrum are overwhelmed by this experience (MacLeod & Green, 2009). Neurodevelopmental disorders rarely appear in isolation, but rather usually co-exist with other associated features. Other challenges of this heterogeneous population include sensory sensitivities to noisy environments or bright lights, difficulty regulating their attention, and psychological problems such as anxiety and depression.

The social challenges of adults on the spectrum are well documented in the extant literature (Sperry & Mesibov, 2005). Because of their challenges in understanding others’ points of view, students with HFA/AS may have difficulty interacting with their professors and classmates, an essential function in a college setting, which could lead to academic problems. For example, the student might demonstrate inappropriate, annoying behaviors such as speaking out of turn, asking too many questions, standing too close to classmates, or touching another’s course materials (Welkowitz & Baker, 2005). Problems with social interaction can sabotage the student’s ability to engage in group projects and impinge on academic outcomes. Carley (2008) comments that a college student’s social life and academic outcomes are closely related, noting that if social challenges become unmanageable, they could impede the ability to study. Colleges are not expected to provide the extensive social supports needed by some students with HFA/AS (Welkowitz & Baker, 2005).

In addition to social interaction, another significant challenge for many college students on the spectrum is executive functions, a multidimensional cognitive construct that describes goal-directed, future-oriented behaviors. Executive function skills include planning, flexibility, self-monitoring, working memory, and goal setting (Ozonoff, South, & Provencal, 2005) that allow individuals to manage their day-to-day lives and activities in order to achieve goals. These skills are clearly necessary for college life, with its emphasis on independence and self-determination. Tasks such as pacing course readings, completing long-term assignments, coping with schedules that vary from day to day, and keeping appointments pose significant challenges to this student population (Geller & Greenberg, 2009; Wolf, et al., 2009; Zager et al., 2013). Executive dysfunctions create added challenges for those who go away to college and must manage the essential functions of their health, sleep patterns, laundry, and meals in addition to their academic and social lives (Welkowitz & Baker, 2005).

**College Programs for Students with HFA/AS**

The need for college programs specifically designed for students with HFA/AS is increasingly important but the number of such university-sponsored programs is relatively small (Hewitt, 2011; Smith, 2007). Several of these programs, some in their pilot stages,
have been described in the emerging literature. For example, Hewitt (2011) describes supports at Bowling Green State University. Welkowitz and Baker (2005) discuss aspects of their residential campus-based support program at Keene State University. Smith (2007) reported on a successful support group for students with AS at Baylor University. Robertson and Ne’eman (2008) list additional programs at Marshall University, Western Kentucky University, Farleigh Dickinson University, the University of Arizona, the University of Alabama, and Oakland University. A compilation of such programs can be found at http://www.collegeautismspectrum.com/collegeprograms.html. Some common characteristics among these programs are academic, social, and vocational supports, and sometimes peer mentoring. Most of these programs are relatively new and have not been in existence long enough to determine their effectiveness for retention and postgraduate outcomes (Jones, 2012).

Further, these programs can be costly. Many colleges charge thousands of dollars in extra tuition or fees for the students’ participation. Examination of the list of the programs on the Higher Education and Autism Spectrum Disorders, Inc. (2012) website indicates that the cost of these programs ranges from $2000 to $8500 per semester depending on the college and services used. Their expense can pose an economic hardship to families already financially burdened by regular escalating tuition costs. Such programs would be prohibitive to students from lower income levels who are more likely to attend a public IHE where tuition costs are relatively lower than in private schools. Consequently, it is not surprising that most of these programs exist in private colleges and universities. Using, adapting, and expanding supports that are already in place in the existing infrastructure of the IHE can minimize the cost of supporting students on the spectrum.

**Using the College Infrastructure**

Until more programs for college students on the spectrum are developed, institutions of higher education can adapt their “existing systems” (MacLeod & Green, 2009, p. 632) to respond to the needs of these students. Many colleges have a variety of support services and facilities already in place that could be used to serve this growing student population. In addition to centers for disability services, now present on most campuses, additional supports such as health clinics, personal counseling centers, career counseling centers, speech-language-hearing clinics, and residential life offices may exist in the infrastructure of many college communities that could support its students with HFA/AS. According to the Merriam-Webster dictionary, *infrastructure* refers to “the basic, underlying framework or features of a system or organization” (www.merriam-webster.com/dictionary). In the case of a college campus, its infrastructure includes its system or organization, clinical facilities, offices, and centers as well as a variety of academic departments. Wolf et al. (2009) note that various offices across campus involved with student life and academic affairs can forge relationships to support its college students with ASD.

Specific components of the infrastructure that can be found in many, if not all, college communities will be identified next in order to discuss their roles (or potential roles) in supporting the needs of its students on the spectrum.

**Disabilities Services.** All college campuses are legally mandated to provide admitted students with disabilities with reasonable accommodations that allow them equal access to college life, including coursework. Most colleges have a disabilities services office that is responsible for assuring that the students receive their accommodations. Other smaller universities manage ADA compliance obligations as part of other offices, such as the provost’s or the dean of students. Typically under the administrative auspices of student affairs (Davis, 2012), the disabilities office of a college could coordinate the services provided by the other components of the college infrastructure to address the needs of students on the spectrum.

At college orientations held prior to or at the beginning of freshman year, students with disabilities should be encouraged to self-disclose their condition since they will otherwise be unable to access accommodations. For their part, disabilities services can set the tone that the college is a welcoming, diverse community for all students, including those who are neurologically atypical. From the beginning of their college experience, students should be informed that self-disclosure is in their best interest and they should be encouraged to submit the necessary documentation.

**Personal Counseling.** Students with HFA/AS may benefit from personal counseling for assistance with stress management and test anxiety (Davis, 2012). In addition, co-morbid depression and social anxiety in students affected by these conditions may be exacerbated by the novelty of the critical first year (Hewitt,
address aspects of nonverbal communication and the classroom. Speech-language therapy can also across a variety of conversational contexts, including and provide social skill enhancement that can be used communication challenges that impact the student's life of "knowing what to say to whom" or other speech-group therapy to address pragmatic language problems in terms of treatment, clinicians can provide individual or, lead these groups with appropriate supervision by a licensed professional.

**Speech-Language-Hearing Center.** The speech, language, and communication problems of adolescents and adults with HFA/AS have been well documented (Colle, Baron-Cohen, Wheelright, & van der Lely, 2008; Hewitt, 2011; Seung, 2007; Shriberg et al., 2001; Sperry & Mesibov, 2005). Two of the core characteristics of ASD, namely challenges in social interaction and communication-language, are in the professional scope of practice of speech-language pathologists (American Speech-Language-Hearing Association, 2006). A campus-based speech-language-hearing center can provide the student with HFA/AS with speech-language evaluations, audiological screenings, or complete hearing evaluations as needed. In terms of treatment, clinicians can provide individual or group therapy to address pragmatic language problems of “knowing what to say to whom” or other speech-communication challenges that impact the student’s life and provide social skill enhancement that can be used across a variety of conversational contexts, including the classroom. Speech-language therapy can also address aspects of nonverbal communication and the comprehension of abstract, figurative language, which are often challenging to these students.

**Health Clinic.** Relatively little has been written about the health care needs of college-aged individuals with HFA/AS (Volkmar & Weisner, 2009). College students, especially those attending a residential campus, must learn to be proactive about their health. The college health clinic can serve as a campus-based primary care facility where students can receive evaluation and treatment for acute and chronic medical conditions. Health clinic staff can provide guidance on practices that promote good health and disease prevention. A quality campus-based health clinic with a knowledgeable staff of nurses and nurse practitioners can serve as a medical home base that improves the well being of its students. The health clinic staff could also refer students to other services such as the speech-language-hearing center for pragmatic language therapy and collaborate with personal counseling to ensure compliance with medication and to monitor side effects.

**Learning Center.** Most colleges and universities have learning centers, which provide a variety of academically oriented services for all students, including those with documented disabilities. Students with HFA/AS are sometimes referred to such centers by the disabilities services office for content-based academic support. Although students in this population may be intellectually gifted or passionate about a particular subject area, they often have an uneven profile of strengths and challenges that is important to recognize (Geller & Greenberg, 2009). The services provided by the learning center should be monitored and documented with progress reports shared with the referring instructor, department, or office. Learning centers offer tutoring (including peer tutoring), course content reviews, writing support, online tutorials, and adaptive equipment such as computers for students’ use. If trained, their staff could help a student address executive function issues related to the planning, organization, and timely completion of assignments, one of the most challenging aspects of postsecondary education for students with HFA/AS (Wolf et al., 2009).

In addition, staff should be familiar with diverse learning styles and the concept of universal design (Rose, Harbour, Johnston, Daley, & Abarbanell, 2008), which is relevant to the individual differences among this heterogeneous population. Many students on the spectrum are visual learners who would benefit from the use of graphic organizers, lists of readings with explicit due dates, written instructions for all assignments, and handouts to support class lectures. In terms of scheduling sessions, standing weekly appointments at the learning center -- rather than random, irregular ones -- could help students with HFA/AS with relationship building in addition to academics.

**Career Counseling.** The vocational support and career counseling needs of individuals with HFA/AS have both been well documented in the literature (Carley, 2008; Hurlbutt & Chalmers, 2004; Muller, Schuler, Burton & Yates, 2003; Shore, 2003; Willey, 1999).
Individuals on the spectrum are often unemployed or underemployed (Hurlbutt & Chalmers, 2004) and generally report negative work experiences, although some have had isolated positive ones. Obstacles to successful employment include the job application process, adapting to new job routines, communicating with supervisors and coworkers, and navigating social interactions in the work setting (Muller et al., 2003). College career services offices can assist students with ASD by providing vocational and aptitude testing, advice about selecting a major that matches their interests and strengths, resume preparation, interviewing strategies, and supervised internships (Wolf et al., 2009).

Because of the high levels of stress associated with the world of work, career services could consult with personal counseling for students with co-morbid anxiety. Career services could also collaborate with their colleagues at the speech-language-hearing center to assist students with interviewing strategies and social-pragmatic language issues, such as asking their employers or co-workers an inappropriately excessive number of questions. In addition, disabilities services can serve as a resource to career counseling to suggest the most effective ways to help a student transition from the college to the workforce.

**Student Centers.** Most colleges and universities have a student center that houses various clubs, recreational facilities, study areas or a lounge. Because these centers are usually more socially than academically oriented, students with HFA/AS might need encouragement from a professor, staff member, or a peer mentor to explore this aspect of college life. In doing so, students on the spectrum might identify a club, activity, or organization that could help them connect with others who share those same interests. Alternatively, students on the spectrum might more easily be engaged in academic clubs and groups offered through the departments.

**Library.** Like all offices on campus, the library can accommodate students with disabilities in a variety of ways. The campus library can serve as an oasis of relative quiet and solace for students with sensory overload, a common characteristic of students on the spectrum. More traditionally, the library can provide resource materials about ASD for faculty, staff, and students. IHEs with programs in education, psychology, speech-language pathology, occupational therapy, social work, nursing, and other health-related fields are likely to already have resources about ASD among their current holdings, including articles from scholarly journals, magazines, and periodicals, newsletters from relevant organizations, books, films, and other media. Colleges that do not have ASD support programs could expand their holdings on this topic by procuring relevant resources through interlibrary programs or requesting that they be purchased from a general acquisition fund or alternative source. In the last five years, several books have been written specifically for college personnel regarding supporting the needs of students with AHA/AS (Freedman, 2010; Wolf et al., 2009; Zager et al., 2013). In addition, individuals with HFA/AS have written or edited personal accounts that provide first-person perspectives on postsecondary education (Carley, 2008; Perner, 2012; Prince-Hughes, 2002; Shore, 2003; Willey, 1999). Both types of resources are invaluable for those supporting college students on the spectrum.

**Academic Departments and Programs.** Some colleges and universities have academic departments or programs with faculty who have expertise in ASD. These individuals can be tapped to conduct workshops or in-service trainings for other faculty, staff, and administrators. Some of these faculty members might teach in specialized programs designed to train professionals about ASD. Interested college personnel could be permitted to audit these courses, or particularly relevant parts of them, to increase their knowledge about this disability. In addition, academic program areas such as education, special education, counseling, psychology, nursing, social work, occupational therapy, and speech-language pathology could provide students to serve as one-to-one peer mentors for students with ASD. Individuals preparing to work in these fields, in addition to having some background in neurotypical development, should already be experts in the “art” of being college students (Davis, 2012). Peer mentors can assist the student on the spectrum in a variety of ways, including social-emotional support, role modeling of behaviors, the acquisition of new skills as well as the practice of those previously learned, advice (Blumberg & Daley, 2009) and social navigation. These peer mentors would need to be recruited and trained, then supervised on an ongoing basis by experts in the field.

**Residential Life.** For students with HFA/AS who elect to live on a college campus as part of their educational experience, the residential life team can help serve this population. The team of resident assistants
and the resident director can assist these students by responding to issues such as roommate conflicts, noise complaints, disruptive behavior, and adjustment needs. Living in a college dormitory can be a challenge to many students, but can be particularly difficult for some students in this population, especially those with sensory, executive function, and social challenges. The individual with HFA/AS might need specific assistance with personal issues such as how to protect their belongings, including medications (Wolf et al., 2009). For those individuals with HFA/AS who do not want or cannot obtain a single room, Wolf et al. (2009) recommend housing in a residence hall with well-trained, knowledgeable staff who can monitor roommate conflicts and facilitate the student’s adjustment to the residential community. Disabilities services can partner with residential life staff to address issues such as sensory overload and social communication challenges, which are common in students with HFA/AS. Prior to enrollment in a residential college, families must make realistic decisions about the readiness of their son or daughter to transition from the structure and predictability of living at home to a college residence. In evaluating the readiness of some students on the spectrum to live away from home, the student, their family members, and professionals who know the individual well need to reconsider the essential functions of living on a campus and interacting with others in a higher education community.

Centers for Teaching and Learning. Many colleges and universities have centers for teaching and learning that could provide a venue for faculty and staff development in ASD. Suggested topics include recognizing the behaviors of students with HFA/AS, the process of referral to the disabilities office, the role of executive function in academic success, and the social challenges of ASD. Davis (2012) recommends campus-wide education rather than limiting training to the personnel most familiar with the “neurologically atypical” student such as those in the disabilities or clinical fields. In that case, a broader in-service training that consists of a series of workshops could be open to administrators, students, and staff, and members of the faculty. A center for teaching and learning could provide this information at a one-time event. If that is not feasible, other approaches such as conducting the in-service as part of a faculty development day could be explored.

Coordination and Collaboration

With the increase in the number of students with HFA/AS enrolled in IHEs, colleges face increasing considerations when addressing the long-term needs of their admitted students. These institutions, whether public or private, large or small, have the pragmatic motivation to improve retention and graduation rates. The institutions, as well as the students who enroll in them, are best served when all admitted students succeed. The call for specialized programs for students with autism spectrum conditions is apparent and several have been developed at significant cost to their families. In this era of budgetary constraints and diminishing resources, colleges can exploit their existing infrastructure to find ways to support these students. Until colleges develop specialized programs, their infrastructure might already have resources in place that could be used, expanded, or adapted to meet the unique challenges of this growing population.

While disabilities services can serve as the central point to coordinate this endeavor, other divisions can play an important and collaborative role. Look for partners in personal counseling, the speech-language-hearing center, the health clinic, the learning center, career counseling, the student center, the library, various academic departments and programs, residential life, and the center for teaching to serve students with HFA/AS in unique ways. Campus education and training, peer mentor programs, therapeutic and clinical services, and support groups are some of the ways these divisions can address this issue. Wolf et al. (2009) suggest that the additional divisions of multicultural affairs, judicial affairs, campus police and public safety officers, academic affairs, business affairs, and the upper administration also be aware and involved. All campus resources should be ready to share this challenge. With so many distinct components of the infrastructure involved in this endeavor, coordination and collaboration are key (Pillay & Bhat, 2012; Welkowitz & Baker, 2005). With these coordinated efforts, the institution provides supports that will give the admitted students a fair chance to succeed while demonstrating improved outcomes for retention and graduation rates.
Future Directions

IHEs that have not yet addressed the unique needs of this growing population should begin campus-wide dialogues and provide education about ASDs to members of the broader college community. An important step would be to reach out to faculty members who might not be familiar with this multi-faceted condition but who have expressed concern about certain students.

Colleges might also consider expanding the menu of accommodations to meet the unique profiles of the heterogeneous population of students with HFA/AS. These students may need accommodations that differ from the ones offered to students with more traditional learning and physical disabilities (Smith, 2007). Colleges that already have programs, or those that have begun to develop them, can inform first year or prospective students that the institution is an ASD-welcoming place. Of course, every campus is unique with its own profile of strengths and weaknesses. Further, providing supports beyond basic access accommodations for their otherwise qualified students is the decision of the institution. In this era of limited budget, non-mandated supports are often impossible unless private funding or a fee-based approach is used.

Finally, all divisions could explore outside funding sources or approach their administrations for support to develop and pilot a program and evaluate it by collecting data reflecting defined outcomes for the students with ASD and other members of the college community. These could include evaluating college-wide in-service training, different aspects of the program such as the success of a support group, completion of coursework, development of career plans, successful integration into the college community, retention rates, and postgraduate outcomes (Jones, 2012). The tasks of this endeavor are many and only with a concerted, coordinated effort can this be accomplished, but the experience can enrich the lives of the members of the college community and its diverse student body.

References


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