WHAT IS HIGH FUNCTIONING AUTISM OR ASPERGER'S SYNDROME?

Dr. Leo Kanner published an article in 1943 in New York about his work with autistic children, and Dr. Hans Asperger's article about similar children he described as displaying "autistic psychopathy" was published in 1944 in Austria. Partly because Asperger's work was published in German, the article did not reach wide dissemination in the United States for 40-50 years. In the meantime, once autism was a separate diagnostic entity, the higher end of the autism spectrum had been referred to as high-functioning autism.

High-functioning autism, along with Asperger's Disorder, is most simply described as individuals who have the neurological difference of autism, but who have average to above average cognitive ability, often as tested through intelligence tests. However, it is not really this simple.

There are many individuals with Autism Spectrum Disorders or Differences (ASD) who have average to above average intelligence, but who have such intense symptoms of autism that they cannot function independently. There are individuals who can read at the college level, but who cannot relate even to their own families. There are individuals with such sensory sensitivities that they are limited to very few environments. There are individuals with savant skills (unusually high peak skills) but such weaknesses in their everyday life skills that they may be more dependent than an individual who has moderate mental retardation. Many of these individuals develop behaviors that are socially inappropriate. The range of difference in high functioning autism is tremendous. Many people say: High-functioning does not mean easy.

Neither does the word "high" mean that we put less value on those individuals who are "low" or "middle" functioning. The use of these categories is to help us to identify issues and strategies to address those concerns.

Is there a difference between High-functioning autism and Asperger's Syndrome?

Asperger's Disorder (as properly labeled) is a medical label that is in the Diagnostic and Statistical Manual (DSM-IV-TR) under the umbrella category of Pervasive Developmental Disorders (PDD). Some "authorities" are convinced that Asperger's is different from High-functioning autism. However, there is no consistent explanation how they differ. The book, Asperger Syndrome or High functioning Autism?, edited by leaders in the field of autism, Eric Schopler, Gary Mesibov, and Linda Kunce, concludes that there has not been clear criteria established for distinguishing the two. Many professionals are invested in one name or another. Many parents like the Asperger's terminology to differentiate their child from the more severe
aspects of the autism spectrum. For practical usage, Asperger's and High-functioning Autism (HFA) are equivalent terms with much variation between individuals. Dr. Tony Attwood has suggested that the difference between High-functioning autism and Asperger's is in how they are spelled. Because of the lack of support for a difference between High-functioning autism and Asperger's, many authorities are advocating the use of one broad label, Autism Spectrum Disorders (ASD).

**What will happen to these labels when the DSM is updated?**

The experts updating the medical DSM have reviewed volumes of research on the spectrum of autism for the fifth edition of the manual. According to the American Psychiatric Association website [http://www.dsm5.org/Pages/RecentUpdates.aspx](http://www.dsm5.org/Pages/RecentUpdates.aspx), which contains the suggested changes to autism criteria and the rationale for those changes, the current subcategories will be eliminated, and the condition will be called Autism Spectrum Disorders. Along with the label changes, there will be an accompanying severity level requirement.

The site states: 'Because autism is defined by a common set of behaviors, it is best represented as a single diagnostic category that is adapted to the individual's clinical presentation by inclusion of clinical specifiers (e.g., severity, verbal abilities and others) and associated features (e.g., known genetic disorders, epilepsy, intellectual disability and others.) A single spectrum disorder is a better reflection of the state of knowledge about pathology and clinical presentation; previously, the criteria were equivalent to trying to "cleave meatloaf at the joints".'

There is considerable debate how the DSM changes will affect labeling and services for children on the high end of the autism spectrum. Until the changes become effective, persons with HFA or Asperger's will continue to receive the same services they've been receiving.

**References:**


**Resources:**


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