

## My Disastrous First Year of Teaching

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My first year teaching special education was a disaster. When shown a common tool, such as screwdriver, the students were to write down the name of the tool on their quiz paper. One student, proud of his knowledge, insisted on orally giving every answer to the entire class. I then had him (the class was almost all boys) step outside the classroom and close the door, where he showed off his knowledge by mouthing the answers by the glass in the classroom door. And so it went. My principal said I was better suited teaching one on one, or at the college level, because I was subject-oriented rather than student-oriented.

The problem with what we used to call retarded (the term 'retarded' has now been replaced by *a person with a mental disability* which, in my judgment, is *more* demeaning) such as my students, were commonly misunderstood. As Down syndrome children tend to have similar personalities, so too both 'retarded' and autistic/Asperger's syndrome persons also tend to have certain personality traits in common. One is they are very naive when it comes to personal relations.

When evaluating special needs students, I interviewed a 16-year-old girl I will call Abigail. She was the homecoming queen of the institution for mentally challenged persons where she lived. The institution attempted to normalize the education there as much as possible, thus had a homecoming of sorts. Abigail expressed her love for children and wanting a husband and a family. The problem was she had an IQ of 50, meaning her intelligence was similar to the average 8-year-old. This very personable, very attractive girl could easily be taken advantage of, which was the institution's concern. In times past she would have been sterilized, but not today.

The concern was, if she married could she properly take care of her children and would a normal intelligent man be able to cope with her handicap? Exploitation of Abigail and our other “clients” was a real concern.

## **Working With Autistic Students**

Autism is clinically regarded as a spectrum disorder and refers to a group of conditions characterized by difficulties in social functioning related to verbal and nonverbal communication. For example, some are non-speaking, while others are proficient in several spoken languages. An anatomy student I had was at the non-speaking end of the spectrum. When I talked to him in class, he never once answered or responded in any way.

Three of my exams were oral and I had no idea what to do in his case. When his turn came for the exam, he amazed me. He scored 100 percent, rapidly verbalizing and locating the sternum, humerus, ulna, radius, metacarpal, patella, femur, clavicle, scapula until he named and located all 206 bones by correctly pointing where they were on the life-sized, plastic model in the anatomy lab. After this he never said a word to me; his only verbalizing was during the three oral exams.

Autistic clients also display compulsive repetitive behaviors, including stereotyped or repetitive movements, manipulation of objects, inflexible adherence to routines and ritualized patterns of behavior. Also common are fixated interests, hyper- or hypo-reactivity to sensory input or unusual awareness and interests in sensory aspects of the environment. They are abnormally sensitive to sounds that most of us unconsciously tune out; noises such as the refrigerator turning on may greatly bother them.

Another autistic student spent most of his time pacing back and forth in the back of my biochemistry class. He often missed my class, but would take exams on four chapters at a time during my office hours, easily passing all of them. I asked another instructor who taught calculus about him, and he noted his behavior was similar in his class. When asked why he did so well in calculus without attending class, he told me he was a math genius and ignored studying because he knew enough that he could usually figure out the answers when taking the exam.

The rate of autism, which has increased dramatically over the past two decades, as of March 2023 is 1 in 36 children. Although we now have better diagnostics and

increased awareness of the problem, this does not fully account for the marked increase. It is diagnosed four times more often in males than females. Autistic persons are also more likely to have chronic gastrointestinal issues which they deal with by vegetarian or other special diets. Many have microphobia (abnormal fear of germs) thus must spend much time cleaning.

They are often very naïve in trusting others, yet some are agoraphobic and, therefore, must shop during odd hours when few people are in the store. They, as is also true of many retarded persons, can often be taken advantage of. Thus the expression, “they will give you the shirt off their back,” often describes them. This is part of their general inability to comprehend and share the feelings of others. Then again, we—regardless of our neurotype—all need (and crave) understanding and acceptance. In the end, I found this population very rewarding to work with and, for this reason, has been one focus of my interest and research.

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