

## College Documentation Bulletin

February 2015, # 11

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### STUDENTS WITH DISABILITIES, DIVERSITY AND INCLUSION

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## Introduction

Who are these students “with disabilities”; particularly those with mental health disorders (MHD), learning disabilities (LD), attention deficit hyperactivity disorder (ADHD) or autism spectrum disorder (ASD)? [The latter three disorders are referred to in this document as neurocognitive disorders.<sup>1</sup>] What is their experience like in postsecondary education?

Within the student population there are many forms of diversity: cultural, ethnic, socio-economic, religious, physical, sensory, neurocognitive, etc. Ever since the Universal Declaration of Human Rights enshrined the right to education as a fundamental right in 1948, Québec society has been clearly moving towards the inclusion of all students, including those with disorders and disabilities. At all levels of education initiatives have been developed aimed at increasing the participation rate of these students. In postsecondary education services have been in place for them since 1982.

The current trend is to have the individual’s environmental demands and his capability to respond to them aligned. For example, an individual with paraplegia is not a “disabled person” who is limited by his paralysis; however, if there is no elevator or access ramp in a building he will find himself in a “disabling situation” until such time as there is a way for him to get around this obstacle.

In order to counter the stigmatizing effects of a medical perspective, which is based primarily on a diagnosis, several institutions are adopting a less categorical approach by focusing on student needs. It is no longer adequate to merely expect the individual to adapt by providing him with support and accommodations, but rather to foresee putting in place universal facilitators. These facilitators play a preventive role and address the needs of as many students as possible. Students, especially those with a mental health or a neurocognitive disorder (LD, ADHD or ASD), force key players in postsecondary education to rethink teaching and intervention strategies according to the “Disability Creation Process” (DCP) model and “Universal Design for Learning” (UDL).

Thus we have begun to reflect on the notion of universality, a concept that is flourishing in the United States and is beginning to take hold here. Following the trend towards Universal Design for Learning (UDL), measures that are implemented for one group can also be beneficial to other groups; for example they can benefit students whose mother tongue is neither French nor English.

In reading through this edition of the *Bulletin* you will certainly find new avenues for reflection, an exchange of ideas and solutions of interest to college-level personnel who must deal with today’s reality of heterogeneous groupings. The following works have been selected with a focus on diversity; some were written with a specific group in mind but may, in any case, apply to other groups as well.

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<sup>1</sup> The approach to the subject covered in this edition of the *Bulletin* has been undergoing major changes in recent years and this is reflected in the vocabulary being used. Thus, terms such as “neurocognitive” and “neurological diversity” should be viewed as provisional. Although in the present context they accurately express the variety of conditions to which they refer, they could eventually be replaced by other terms reflecting the evolution of this specialized field.

## Classification, conceptualization and social context

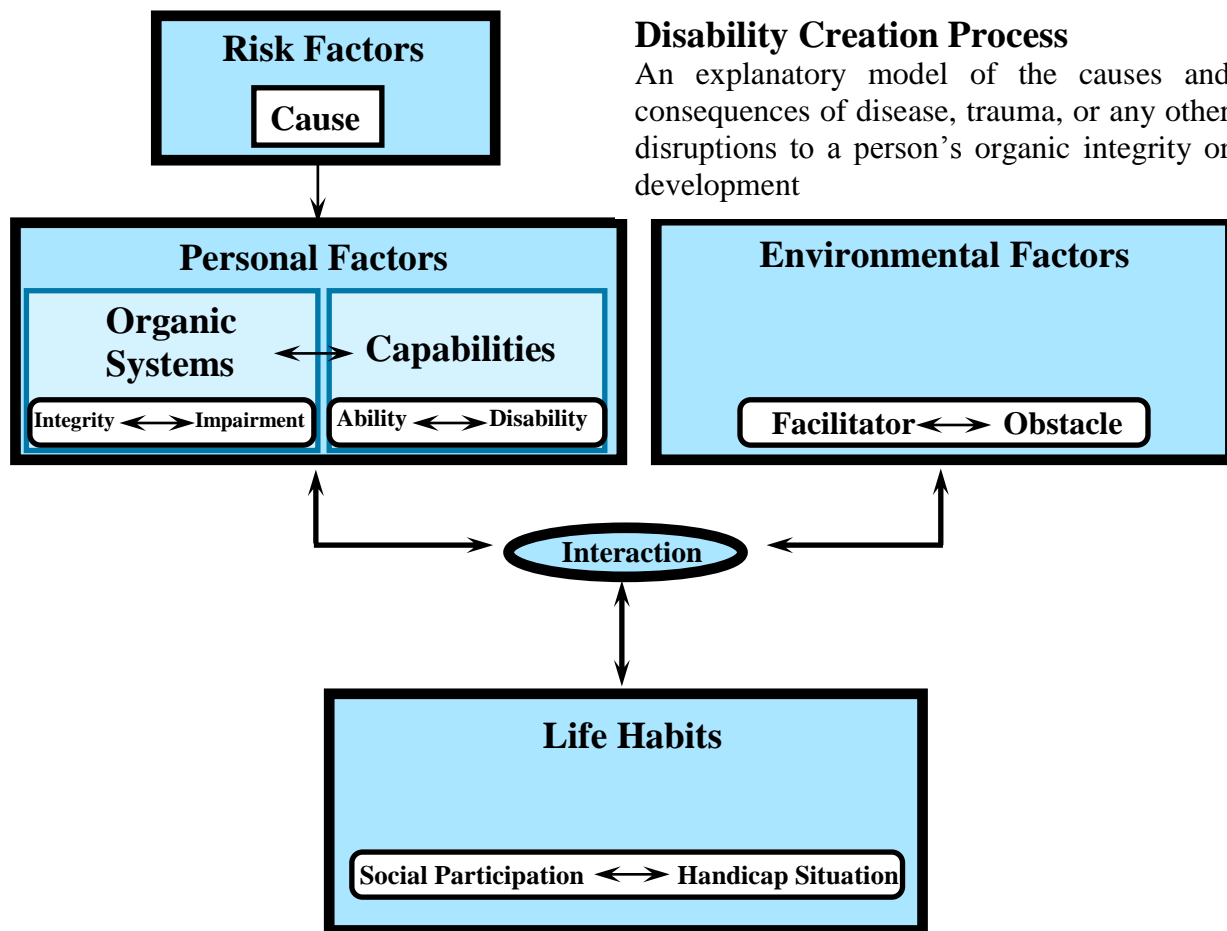
The concept of disability, as well as its classification, has evolved considerably over the last several decades, as have the social context and jurisprudence regarding discrimination.

**FOUGEYROLLAS, Patrick and al. [The Quebec classification : Disability creation process \(DCP\)](#)**, Québec, International Network on the Disability Creation Process (INDCP), 1999, 135 p. (A paper copy is also available : CDC class number: [788555](#))

For more than 30 years the World Health Organization has studied the classification of impairments, disabilities and handicaps. In 1988 the Quebec Committee on the International Classification of Impairments, Disabilities and Handicaps (ICIDH) was formed under the guidance of Patrick Fougeyrollas. The committee was registered as a non-profit organization and was engaged in the promotion, application and enhancement of the ICIDH. It introduced environmental factors into the conceptual model. In 1997 the Quebec Committee became the International Network on the Disability Creation Process (INDCP).

The Disability Creation Process (DCP) model (Illustration 1) helps document and explain the causes and consequences of disorders referred to in this *Bulletin*. It considers the disabling situation to be the result of the interaction between personal factors (age, sex, preferences, impairments, disabilities, etc.) and environmental factors (educational services, attitudes, social network, accessibility to infrastructures, etc.). The DCP aims at strengthening capabilities and compensating for disabilities, not only through rehabilitation but also by reducing environmental obstacles.

Illustration 1 : Disability creation process (DCP) model



**Disability Creation Process**

An explanatory model of the causes and consequences of disease, trauma, or any other disruptions to a person’s organic integrity or development

© INDCP/CSICIDH 1998

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**Illustration 1: Disability creation process (DCP) model**

Disease, trauma, or any other disruption to a person's organic integrity or development may cause impairments and lead to temporary or permanent disabilities. These can be static, progressive, or regressive in nature. However, it is the different obstacles or facilitators encountered in the individual's environment that, in interaction with his disabilities, can hinder the accomplishment of life habits, thus compromising his daily activities and social roles. The accomplishment of life habits, measured on a scale, can range from full social participation to a total handicap situation.



The Organization for Economic Co-operation and Development (OECD) [Students with Disabilities, Learning Difficulties and Disadvantages: Statistics and Indicators](#). (Also available in a paper version at the CDC (French Edition), class number: [786094](#))

This document presents a portrait of international trends towards school integration and inclusion. These trends are inherently linked to children's and human rights, to the commitment of parents, stakeholders and teachers, as well as to social cohesion. Special education, as it was practiced in the late 1960's, has been reorganized to address the real needs of students through an adapted pedagogical approach. In presenting the situation in various countries where integration is practiced, this document examines the facilitators and obstacles to equity and school integration with respect to legislation, educational structures, financing, evaluation of learning, teacher training, the awareness of parents, peers and siblings, the lack of specialized personnel, class sizes, the use of personalized curriculum, as well as collaboration with other services. The book ends with a series of questions regarding classifications and categories, along with qualitative and quantitative data available on students with different needs who live in various regions around the world, thus bringing to light the shortage of data available on the future of these students. According to the OECD these gaps should be addressed in subsequent studies.



**DUCHARME, Daniel and Karina MONTMINY.** [L'accommodement des étudiants et étudiantes en situation de handicap dans les établissements d'enseignement collégial](#), Montréal, Commission des droits de la personne et des droits de la jeunesse, 2012, 225 p. (Also available, the article: [ACCOMMODATING DISABLED COLLEGE STUDENTS](#), Pédagogie collégiale, Vol. 25, no. 4)

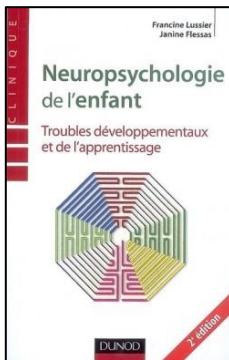
This document is the result of a widespread consultation with practitioners within the college network that took place in 2009-2010, and six round table discussions that were held between November 2010 and September 2011.

It provides up-to-date opinions based on the input of numerous stakeholders. The book was launched, not only in the presence of representatives of the college network, but more notably in front of the survey respondents and participants of the round table discussions.

## A look at differences and diversity

Here are a few major works on disorders and special conditions that may affect students.

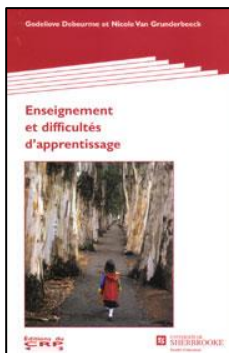
**LUSSIER, Francine and Janine FLESSAS. *Neuropsychologie de l'enfant. Troubles développementaux et de l'apprentissage*, Paris, Dunod, 2009. (Available at the CDC, class number: [788556](#))**



In addition to disorders affecting written language such as developmental dyslexia, the authors also deal with autism, in which language comprehension is generally inferior to oral or written expression. Lussier and Flessas also underline differences in social interaction relating to non-verbal behaviour, the sharing of enjoyment and interests with others, as well as emotional reciprocity.

This volume not only presents general information about dysphasia, but it also looks at the strengths and skills of people with this diagnosis: a strong desire to communicate, attempts to communicate through looks, mimes and gestures, perseverance in spite of failure, and an acute sense of observation (page 168). People with dysphasia are often successful at tasks that do not require language.

Though dyscalculia is not as common as dyslexia or dysphasia, it is extensively examined. (page 297).



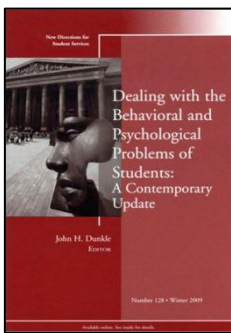
**DEBEURME, Godelieve and Nicole VAN GRUNDERBEECK. *Enseignement et difficultés d'apprentissage*, Université de Sherbrooke, Éditions du CRP, 2002, 186 p. (Available at the CDC, class number: [785581](#))**

This collection of works is of interest due to its detailed study of the evolution of knowledge in the 1990's regarding difficulties and learning disabilities (dyslexia, dysorthographie, dyscalculia), as well as dysphasia. In 1992 distinctions were made between mild and severe difficulties. Two parameters were used to identify severe difficulties: a delay of at least two years in following the Mathematics or French curriculum, or a specific learning disability. Furthermore, Québec, Canadian and American definitions of learning disabilities include temporary learning difficulties, something everyone has encountered at some point in his or her life. It is only recently that research has provided indicators allowing for the operationalization of definitions. Taking a more holistic approach, certain researchers have started to investigate environmental factors, the quality of instruction received, and the facilitators for acquiring knowledge. This perspective has led to a more systemic vision, taking into account not only a student's intrinsic factors but also his relationship to his learning environment.

This paradigm shift is reflected in the vision governing educational reform in Québec at the beginning of this millennium. It clearly places the focus on the student, stressing the importance of evaluating his capabilities and needs. It acknowledges his specific affective (e.g., self-esteem) and cognitive (e.g., learning to read) needs; it subsequently recognizes the necessity to re-examine, and if required, to change teaching habits and

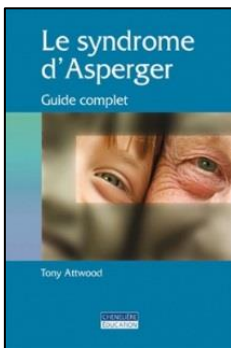
practices. This leads teachers towards differentiated pedagogy. The need and obligation for a detailed diagnosis is questioned; conversely, the importance of a diagnosis is taken into account to better understand a student's characteristics, to establish an intervention plan, and to select and provide services.

Furthermore, the authors underscore the significance of applied neuroscientific studies on adults with brain injuries to better understand reading behaviour and hence, dyslexia. This paradigm shift, as well as the progress in research and contributions of special education praised by the authors, lay the foundation for an important evolution in the field of learning disabilities in children. In reviewing this book one understands the impact of this work, especially regarding its influence on the development of resources for adults, such as specialized services or support in post-secondary education.



**DUNKLE, John. H. *Dealing with the behavioral and psychological problems of students: a contemporary update*, San Francisco, Jossey-Bass, 2009, 92 p. (Available at the CDC, class number: [723732](#) V.128)**

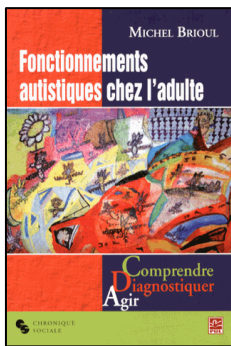
This volume deals with various aspects of atypical behaviour, including the “Assessment-Intervention of Students Problems” (AISP), a model developed 20 years ago by Ursula Delworth in *Dealing with the Behavioral and Psychological Problems of Students*. This model serves as much to direct and coordinate efforts aimed at supporting students as it does to maintain a healthy and harmonious environment. In addition, it has the benefit of demystifying behavioural disorders and better equipping teachers who may not have the training to intervene in crisis situations. Furthermore, this volume provides the reader with a more consistent language and understanding of behaviour that may be disruptive and can frighten teachers and fellow students. The content deals primarily with mental health disorders, stressing the fact that there are only a small minority of people with these disorders who are potentially violent. Consequently, information contained in this collective work can apply to all students who demonstrate undesirable behaviour, whether or not they have a mental health disorder. The authors of Chapter 3 look into legal considerations that may be of concern to teachers and practitioners, as well as to administrators at the post-secondary level.



**ATTWOOD, Tony. *Le syndrome d'Asperger. Guide complet*, Montréal, Chenelière Éducation, 2009, 487 p. (Available at the CDC, class number: [788219](#) or [Ask us](#) for the English Edition: *The Complete Guide to Asperger's Syndrome*, London, Jessica Kingsley Publishers, 2008.)**

As the subtitle indicates, this clear, easy-to-read, and practical guide is truly comprehensive. Following a description of Asperger's syndrome, the author closely examines its manifestation in the different life stages. In the first chapters he deals with topics of interest to practitioners in post-secondary education: the pros and cons of differential diagnosis; the most prevalent concomitant disorders; friendship and social skills; and the “theory of mind” and empathy. This volume also contains chapters

that shed an interesting light on the expression of emotions, narrow interests, language characteristics and intellectual skills; traits that may be observed in many people with Asperger's syndrome. In addition it examines subjects that are less frequently mentioned, such as sensory acuity which can range from hyposensitivity through to the more prevalent hypersensitivity. We learn why certain students with Asperger's syndrome stay away from others, do not shake hands, and may jump when someone brushes up against them. Although chapters 12 and 13 specifically relate to adulthood and postsecondary education, these topics are touched upon throughout the book. The author discusses interventions such as psychotherapy, as well as pedagogical approaches and strategies. The glossary is very useful and the comprehensive bibliography offers the means for delving deeper into the subject.



**BRIOUL, MICHEL. *Fonctionnements autistiques chez l'adulte : comprendre, diagnostiquer, agir*, Lyon ; Chronique sociale, Montréal ; PUL, 2012, 448 p. (Available at the CDC, class number: [788549](#))**

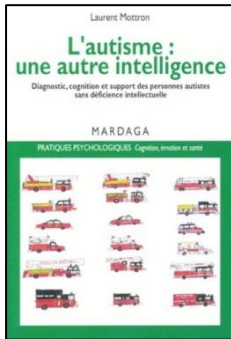
To begin with, the author presents the heterogeneous characteristics of autism that have led to the terms “autism spectrum” and “autisms”. Autism was initially included as a mental health disorder in the DSM-III version of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders and was considered pathological. Then, in the fourth version of the DSM it was clearly described as a disability, exceeding some of the criteria proposed by Kanner, who was the first to document autism. In the [DSM-5](#) (May 2013) other paradigm changes occurred that placed autistic spectrum disorders on a continuum where the specific diagnoses of Asperger's syndrome and of Pervasive Developmental Disorder - Not Otherwise Specified ceased to exist.

Several pages pertain to Asperger's syndrome, first described by Hans Asperger in 1944 as an “autistic psychopathy”. In 1981 Lorna Wing coined the term “Asperger's syndrome”, with its specificity of diagnostic criteria regarding language peculiarities and difficulties in communicating, resistance to change, physical clumsiness, as well as the possession of remarkable talents in certain fields. In the case of autism, as well as Asperger's syndrome, Brioul attributes anxiety to a “blurred” perception of the outside world and reality, which in turn leads the individual not to trust sensory information. The person with autism lives in his own world in order to escape, or uses any means possible to control his environment. Sensory demands and tolerance to closeness may also contribute to this anxiety.

Brioul introduces and quotes several scholars, including Jacqueline Berger. As the mother of two autistic girls, Berger puts a very humanistic, sociological perspective on autism, providing us with a magnified reflection of our own distress regarding the breakdown of interpersonal relationships. In the same chapter Brioul presents the “theory of mind” model which explains the difficulties that some people with autism may have in interpreting their environment, inferring the mental state of others, and feeling empathy.

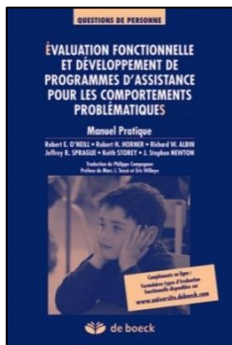


While Chapter 7 answers several practical questions, Chapter 15 addresses questions regarding treatments. Brioul reiterates that there is no specific drug for treating various forms of autism and suggests a synergistic approach, using a variety of measures. Finally, as a proponent of a multidisciplinary approach, he calls upon concerned practitioners to constantly question practices, theories and assumptions.



**MOTTRON, Laurent.** *L'autisme, une autre intelligence: diagnostic, cognition et support des personnes autistes sans déficience intellectuelle*, Sprimont, Éditions Mardaga, 2004. (Available at the CDC, class number: [788550](#))

This book presents scientific data on the subject in a language that is both accessible and practical as it combines the rigor of experimental psychology and clinical expertise. At the time this book was written the population described in it was almost unknown in France, and not significantly better known in Québec. The author summarizes autism as a “difference” rather than a “disability” or “deficiency”. In order to support his position he shares results showing that autistic people may “over perform”, especially in accomplishing perceptual tasks. This book is aimed at increasing knowledge on the topic and promoting change in the way people view autism. It could very well contribute to altering the way autistic people participate in society.



**O'NEILL, Robert E. et al.** *Évaluation fonctionnelle et développement de programmes d'assistance pour les comportements problématiques. Manuel Pratique*, Bruxelles, De Boeck, 2008, 195 p. (Available at the CDC, class number: [786991](#) or [Ask us](#) for the new English Edition: **FUNCTIONAL ASSESSMENT AND PROGRAM DEVELOPMENT FOR PROBLEM BEHAVIOR: A PRACTICAL HANDBOOK**, 3RD EDITION, CENGAGE LEARNING 2015, 144 P.)

This very practical book attempts to answer one of the most pertinent questions for post-secondary institutions: How can they deal with students who have atypical and sometimes problematic behavioural patterns? Indeed these disquieting behaviours may bother and even frighten people. The authors present an approach which has proven to be effective for over 20 years; that of functional assessment. When it is correctly applied the assessment results in an analysis of the problem, the development of a behavioural support program, and an evaluation of the results. The proposed process is obviously aimed, not only at reducing the real or perceived dangers and alleviating anxiety by restricting the problem-causing behaviour, but also at improving the quality of life of the individual who exhibits such behaviour. Thus the program is not just limited to reducing undesirable behaviour, but is also aimed at developing new skills. The handbook presents a clear explanation of the process. As well, there are materials available on the publisher's website.

Before developing a support plan it is essential to gather information as outlined in the five objectives of the functional assessment process:

1. Describe the problem behaviours;
2. Identify the predictors as to when such behaviours occur;
3. Recognize the purpose of these behaviours (why they persist);
4. Write down one or more hypotheses which describe the precise behaviour, an example of the exact situation when it occurs, and the results or reinforcers that maintain it ;
5. Directly observe and collect data that validate this hypothesis.

A functional assessment should result in an effective and dynamic behavioural support program. It must focus on the individual and take into account intrinsic (physical and medical) as well as environmental (activities, social life and context) factors. In addition the process assumes certain core values, notably the individual's dignity and the importance of the interaction between the individual and his environment. (This is fully in line with the DCP as described in this *Bulletin*.)

Following the functional assessment and analysis, the development of the support plan must take into account:

1. Changes the person, along with his family, friends, peers and practitioners, must undertake;
2. Information drawn from the functional assessment and analysis;
3. The principles of human development;
4. Respect for the values, resources and skills of the practitioners who will implement the plan.

No matter what form the plan takes it must include the following:

1. An operational definition of the problem behaviours;
2. Hypotheses drawn from the functional assessment;
3. A general approach aimed at making the problem behaviours irrelevant, ineffective and inefficient:
  - a. Context-based strategies,
  - b. Strategies based on predictors (immediate antecedents),
  - c. Strategies based on learning (what is going to be taught),
  - d. Strategies based on the consequences (those that maintain the desired alternative behaviour and reduce the problem behaviours);
4. Descriptions of routines and the most difficult problem situations;
5. Instructions for the follow-up and evaluation of the plan (page 144).

An example of a plan is presented in the book.

The numerous appendices contain blank forms aimed at helping practitioners and teachers, as well as parents, use this behavioural approach. The book is groundbreaking in Québec as it opens the way to behavioural change, not only in the individual concerned, but also in his surroundings, his family and among practitioners.



**MCGUIRE, Joan M., Sally SCOTT and Stan F. SHAW. Universal design for instruction. the paradigm, its principles and products for enhancing instructional access, *Journal of Postsecondary Education and Disability*, Vol. 17, # 1, autumn 2003, p. 11-21. (WORD Format article)**

The authors stress the fact that although students with disabilities have certain responsibilities and roles to play in their success, from now on practitioners must take into account the concept of universal design. They are called upon to update their practices and without discrimination have “success for all” as their goal, for UDI strategies which help students with disabilities can be beneficial to others:

- Access to course notes via the Internet or email;
- Flexibility in strategies for studying and learning (group work, audio and visual format of notes, online discussion forums);
- Clear and simple directions given orally and in writing;
- Varied material (Power Point, audiovisual CDs, texts in large print format);
- Evaluations focusing on the skills rather than on the difficulties the students may have;
- Reduction of physical obstacles; among others, allowing the use of computers for students with fine motor difficulties;
- Adapted use of space within the classroom;
- Development of a community of learners that promotes interaction between its members (study groups, discussion forums, team work, etc.);
- Creation of a teaching-learning climate and communication regarding specific learning needs.

## Conclusion

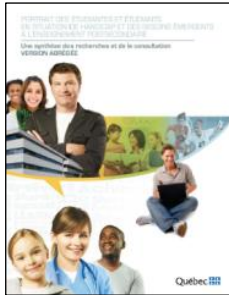
We should continue to intervene because:

- The compositions of classes, communications, as well as the educational and professional environment, have changed considerably since the beginning of the 1980’s when students with special needs began attending post-secondary institutions.
- The evolution and the dissemination of more inclusive pedagogical approaches have reaffirmed our obligations towards these individuals who want to contribute to society and are able to do so, resulting in a more favourable environment.
- Consequently, the study and development of new approaches and concerted actions are necessary, indeed imperative.

The post-secondary network can depend on the efforts already devoted to research and in the field, as well as on the enthusiasm of all stakeholders, in moving ahead towards the realization of inclusion. The response to date to the pursued objectives, to the issues in question and to the breadth of their application can, by its very nature, be seen as a responsible social action for it exemplifies the principles entrenched in the Charter of Rights and Freedoms.

The next edition of the *Bulletin*, on the same subject, will present recent initiatives, experiments and studies in post-secondary institutions.

# Moving forward



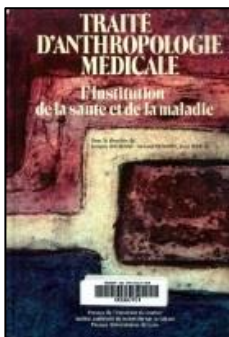
**BONNELLI, Hélène, Amélie Élixa FERLAND-RAYMOND and Stéphanie CAMPEAU.** [Portrait des étudiantes et étudiants en situation de handicap et des besoins émergents au postsecondaire. Une synthèse des recherches et de la consultation](#), Québec, Ministère de l'Éducation, du Loisir et du Sport, Direction des affaires étudiantes universitaires et collégiales, 2010.

This work deals with students with mental health or neurocognitive disorders in post-secondary institutions.

Universal Design for Learning Guidelines		
1. Provide Multiple Means of Representation	2. Provide Multiple Means of Action and Expression	3. Provide Multiple Means of Engagement
<ul style="list-style-type: none"> <li>1.1 Provide multiple representations</li> <li>1.2 Offer multiple representations of the same information</li> <li>1.3 Offer alternatives to reading instruction</li> <li>1.4 Offer alternatives to text-based information</li> </ul>	<ul style="list-style-type: none"> <li>2.1 Provide options for response</li> <li>2.2 Offer multiple ways to demonstrate learning</li> <li>2.3 Offer multiple ways to present work of students</li> <li>2.4 Offer multiple ways to present work of students</li> </ul>	<ul style="list-style-type: none"> <li>3.1 Provide options for motivation</li> <li>3.2 Offer multiple ways to engage students</li> <li>3.3 Offer multiple ways to engage students</li> <li>3.4 Offer multiple ways to engage students</li> </ul>
<ul style="list-style-type: none"> <li>1.5 Offer multiple representations</li> <li>1.6 Offer multiple representations</li> <li>1.7 Offer multiple representations</li> <li>1.8 Offer multiple representations</li> <li>1.9 Offer multiple representations</li> <li>1.10 Offer multiple representations</li> </ul>	<ul style="list-style-type: none"> <li>2.5 Offer multiple ways to demonstrate learning</li> <li>2.6 Offer multiple ways to demonstrate learning</li> <li>2.7 Offer multiple ways to demonstrate learning</li> <li>2.8 Offer multiple ways to demonstrate learning</li> <li>2.9 Offer multiple ways to demonstrate learning</li> <li>2.10 Offer multiple ways to demonstrate learning</li> </ul>	<ul style="list-style-type: none"> <li>3.5 Offer multiple ways to engage students</li> <li>3.6 Offer multiple ways to engage students</li> <li>3.7 Offer multiple ways to engage students</li> <li>3.8 Offer multiple ways to engage students</li> <li>3.9 Offer multiple ways to engage students</li> <li>3.10 Offer multiple ways to engage students</li> </ul>
Research-based knowledge base	Strategic, goal-directed learners	Personalized, motivated learners

**CAST.** [Universal design for learning guidelines, version 2.0](#). Wakefield, MA, 2011.

Reference book on universal design for learning (UDL)



**DORVIL, Henri.** [Types de sociétés et de représentations du normal et du pathologique : la maladie physique, la maladie mentale](#), published in *Traité d'anthropologie médicale. L'Institution de la santé et de la maladie*, under the guidance of Jacques Dufresne, Fernand Dumont and Yves Martin, Québec, Presses de l'Université du Québec, Institut québécois de recherche sur la culture (IQRC) and Presses universitaires de Lyon (PUL), 1985, Chapter 15, pp. 305-332.



**HENDERSON, Thomas.** [Universal Design for Learning \(UDL\) in Postsecondary Education](#), LesCegeps.com, [2012?].

A short presentation on the concept of UDL



**OUELLETTE, A. *Musique autiste. Vivre et composer avec le syndrome d'Asperger***, Montréal, 2011. (Available in several college and municipal libraries)

UQAM music teacher Antoine Ouellette tells about his life as a person with Asperger's syndrome. He also writes about the syndrome itself in a language that is accessible, realistic and humorous. His book reassures many parents and teachers, not only because he writes about Asperger's in a respectful and enthusiastic manner, but also because he is himself a good example of success.



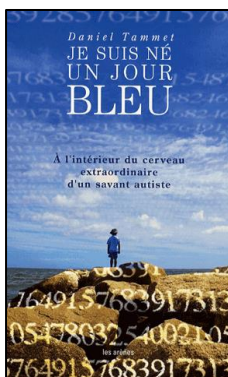
**ROSE, D. H. et al. Universal design for learning in postsecondary education : reflections on principles and their application**, *Journal of Postsecondary Education and Disability*, Vol. 19, no 2, 2006.

A comprehensive article on Universal Design for Learning that looks at multiple means of representing information, multiple means of expressing knowledge, and multiple means of engaging in learning.



**SAINT-ONGE, Mireille, Julie TREMBLAY and Dominic GARNEAU. L'offre de service pour les étudiantes et étudiants des cégeps ayant un problème de santé mentale ou un trouble mental. Rapport synthèse**, Québec, Ministère de l'Éducation, du Loisir et du Sport, 2010.

The summary of a vast survey of student services within Québec's post-secondary network.



**TAMMET, D. *BORN ON A BLUE DAY***, NEW YORK, SIMON AND SCHUSTER, 2007, 240 PAGES (Available in several college and municipal libraries)

Daniel Tammet has Asperger's syndrome. He is special in that he has succeeded in developing fairly normal communication capabilities (which is remarkable for someone who is autistic) and exceptional skills in the field of numbers and in language, typical of those referred to as "autistic savants". He is trying to inform readers of his way of understanding the world.

