

LETTERS TO THE EDITOR

(continued from p. 6)

- a. access and integrated choices regarding health;
- b. options within the environment to have privacy, or stimulation;
- c. access to integrated recreational activities;
- d. one or more friends;
- e. ensure personal safety;
- f. proximity to and options related to meaningful employment;
- g. proximity to and access to family.

Most of the criteria measured in [the] studies as reported fail to include most, if not all, of the above, and as such cannot conclude anything other than the research is limited and conclusions poor at best.

Marc W. Kelly
Executive Director
Greystone Programs, Inc.

Editor's Note: The article Mr. Kelly cites summarized several studies casting doubt on the currently popular idea that size, in and of itself, distinguishes "good" residential settings from "bad" ones. Just as one shoe size will not fit all, one residence size does not fit all. Small does not necessarily mean better. ARRI feels that a variety of residential options is needed, including small units, large institutions, "living centers" or "campuses," and ranch and farm settings. People differ, and have needs that are best met by a variety of options.

I agree that Mr. Kelley's criteria for successful residences are important. But there is no reason why they cannot be met by larger facilities.

Help! Gastrostomy, lead poisoning

To the Editor:

We have two severely autistic sons, one of whom had a gastrostomy (an operation to create an artificial opening into the stomach) performed as a matter of necessity. His impaired senses of hunger and thirst, taste, texture, and smell, all due to his autism, made his self-imposed diet restrictions life-threatening.

For years, despite intensive intervention, his dietary range narrowed and declined. For his fluid intake, he drank bath and shower water for four years; he became ketoacidotic at times, chronically dehydrated, underweight and severely iron-deficient.

The operation saved his life and we wondered why we hadn't done it years before. Believe me, there are autistic children who do *not* respond to eating/drinking programs—a "head bypass" is the only avenue for adequate nutrition.

Now he is healthy and hyperactive again, and his feedings [through the gastrostomy opening] are so routine as to be a non-issue. We can now go on outings on hot days without compromising his health. We have our precious child, whereas the specialist advised us that without this intervention he would not have lasted the year.

As I cannot believe that we are unique in this situation, though I know of no other autistic children in Australia with a gastrostomy, I would like to hear of any similar cases.

Deb Johnson
2 Duval Court, Wheelers Hill
Australia 3150

To the Editor:

I am writing to you in search of information regarding the effects of increased lead levels in a child diagnosed with autism.

We have in our program a set of twins, 2-1/2 years old, both of whom have marked autistic behaviors and elevated lead levels. The little boy has a level of 1.9 $\mu\text{mol/L}$ and his sister a level of 1.3 (this has dropped from 1.7 $\mu\text{mol/L}$). Both children have eaten dirt and the boy continues to. The family live in an old mining village.

The children have shown improvement since joining our program but we would appreciate any further information that you could give us.

Maryanne Coggans
Armidale Community Services Centre
Armidale, NSW 2350, Australia

Editor's Note: We almost never hear of autism caused by lead poisoning, so we were particularly interested in the brief report, published in ARRI 8/1, about Canadian autistic twin boys who had elevated lead levels and improved remarkably when treated by their physician, Ziguris Strauts. Now here is another report about lead poisoning—again involving twins! The story of the Canadian boys and their recovery is reported in the book *Turning Lead Into Gold*, by Nancy Hallaway, R.N., and Dr. Strauts. For information on ordering the book, call Metal Detox Medical Services, Inc., 604-986-3871, fax 604-986-5802.

Letters to the Editor are welcomed. Letters should be signed, and should not exceed one page in length, including references. News and notices may also be submitted; please send information well in advance of events.

Full inclusion

(continued from page 1)

also beginning to question whether or not full inclusion benefits disabled students themselves. A recent large-scale study by the National Longitudinal Transition Study of Special Education Students (NLTS) concluded that for physically disabled high school students, the benefits of full inclusion are highly significant. In addition, some benefits were seen for hearing or vision impaired students. But the report concluded that for high school students with severe impairments (such as autism), full inclusion did not result in any advantages. "This difference in impacts," the NLTS report concluded, "supports the hypothesis that regular education benefits youth cognitively equipped to absorb regular high school coursework."

Meanwhile, in Canada—where most provinces are moving toward full inclusion—teachers are expressing support for the concept, but only when it is appropriate and extensive assistance is provided to teachers. Neither, one teacher's association claims, is currently the case.

In 1993, the Alberta Teachers' Association published a report called "Trying to Teach," which detailed problems teachers were encountering with disruptive, violent, and/or socially inappropriate students. Last year the association released another report, which supported inclusion only when classroom sizes are capped and sufficient support services are available. The teachers are pessimistic about achieving these goals; Larry Booi, who chaired the 1993 committee which wrote "Trying to Teach," said recently that "the situation has deteriorated substantially because of budget cuts." He added, "We support integration, but not for all students, and not as a cost-cutting measure. By placing kids in regular classes without proper support, we are encouraging a policy of abandonment."

"Classroom disruption: the federal Individuals With Disabilities Act, up for renewal, adds to schoolhouse violence," Stephen Goode, *Insight on the News*, September 11, 1995.

—and—

"Schooling the disabled," Patricia Chisholm, *Macleans*, March 27, 1995.

—and—

"New research supports inclusion for physically disabled," *Harvard Education Letter*, July/August 1994.

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