Ability to Launch

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Goals for Today's Workshop

- Identify the unique challenges to individuals with autism as they transition from youth to adult services

- Identify the skills and strategies that support and promote independence

- Equip families with necessary information in order to support independence, and help advocate for their relatives who are on the spectrum

Autism Spectrum Disorder (ASD)

– Group of neurodevelopmental disorders ("umbrella") characterized by deficits in communication, socialization and restricted/repetitive behaviors; disorders within this grouping:

✓ Asperger's or HFA

✓ Pervasive Developmental Disorder (PDD)

✓ Childhood Disintegrative Disorder

✓ Rett's Disorder

Detection of ASD

- ASD may be detected by the age of 3, sometimes as early as 18 months
- Parents are usually the first to notice differences such as lack of eye contact, lack of response to people or intense focusing on objects, discomfort with being held or touched
- Approximately 50% of children are diagnosed by kindergarten, parents, day care workers and pediatricians often dismiss early signs thinking the child will "catch up"
- Early intervention has a dramatic impact on the ability to learn new skills and reduce symptoms

Characteristics of ASD

- Deficits in social interaction

- Difficulties with both verbal and non-verbal communication

- Repetitive behaviors

- Narrow range of interests

- May exhibit unusual responses to sensory experiences

Autistic Traits

- Some individuals show a marked proficiency for rote memorization

- High Functioning autistics may demonstrate ability to identify patterns and apply to new situations

- Small fraction demonstrate savant skills in music or mathematics

- DSM-5 distinguishes between autism with and without intellectual disability

Neurocognitive Deficits of ASD

– Impaired higher level cognitive shifting

– Deficits in memory, planning, inhibition, flexibility and self-monitoring

– Weak central coherence: poor ability to integrate information from environment into a meaningful whole; tendency to focus on details at the expense of global meaning

– Decreased motivation to orient to social stimuli

– Theory of Mind (ToM) deficits

High Functioning Autism

- Individuals with average or higher FSIQ but impairment in independent functioning:

  1) Poor social problem solving and judgement problems leading to interpersonal problems,

  2) Although may have personal rules of conduct that are idiosyncratic but fail to conform to social norms

  3) Problems with money management, independent living, self-care, work

Communication

- Impaired social and emotional reciprocity

- Deficits in verbal and non-verbal communication lead to reading comprehension problems despite good vocabulary and decoding skills

- Deficits in developing, maintaining and understanding relationships

- Others may have value insofar as they instrumentally advance the individual's personal agenda
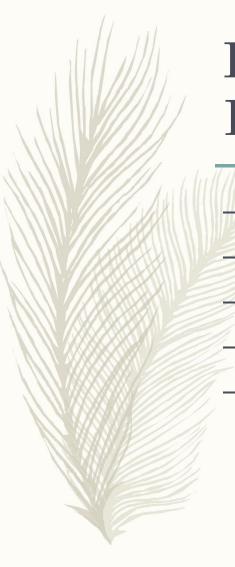
Reciprocal Social Interaction

– Nonverbal behaviors (eye gaze, gestures)

– Poor peer relationships

– Limited attempts to share enjoyment, interests or achievements with other people as would be true for typically developing children

– Difficulty taking turns, taking on another's perspective and limited give-and-take of social interaction

– Higher functioning have prosocial interest but limited interactional skills

Social Symptoms of ASD (cont'd)

- No "theory of mind"- slow to learn what others are thinking or feeling

- Misses social cues such as winks, smiles, grimaces, vocal inflection

- Social world can be bewildering without the ability to interpret gestures and facial expressions

- Concrete in language use, so miss symbolic or metaphoric use of language

- By the age of 5, most children know that others may have different feelings or thoughts than their own; the person with ASD has difficulty taking perspective

Restricted and Repetitive Behavior

– Motor stereotypies

– Repetitive behaviors

– Narrow interests
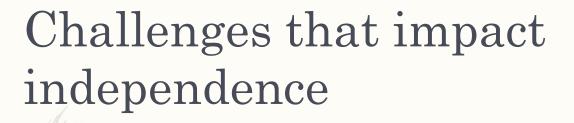
– Rituals and routines

– Preoccupation with parts of obje

Highly Prevalent Co-Morbidities

– ADHD

– Nonverbal Learning Disorder

– Bipolar Disorder

– Obsessive Compulsive Disorder

– Temper and anger management problems

– Gastro-intestinal or "gut" problems

Co-prevalence of mental health disorders

❖ Higher co-prevalence of OCD and autism

a)to what extent is ritual and repetitive behavior due to developmental disorder or due to OCD?

❖ Higher co-prevalence of Bipolar Disorder and autism

❖ Higher co-prevalence of ADHD and high functioning autism
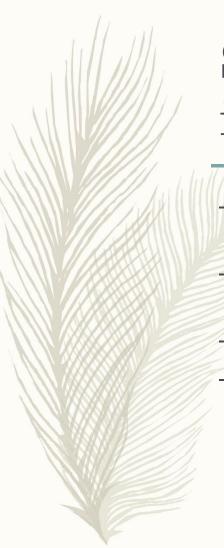
Challenges that impact independence

Given the foregoing description of the challenges associated with ASD, what are the ways in which independence might be impeded? What are the barriers at school, in the family or at work?

Life Challenges for Individuals on the Spectrum

– Limited adaptive skills (***capacity versus functionality***)

– Limited social supports

– Co-occurring medical problems (seizures, gastric problems)

– Co-occurring mental health disorders (Bipolar, Anxiety, OCD, specific phobias)

– Problems obtaining and maintaining employment, sustaining relationships and living independently

Skills deficits that affect social interaction

– Pragmatic language: knowing what is appropriate to say, where and when to say it

– Knowing what is and what is not important: the ability to see the big picture and not fixate or get stuck on irrelevant details

– Inability to engage in the give-and-take of conversation

– Misunderstanding of the " social rules of engagement," so that others may view the individual has aloof, deceptive, uncaring, mean spirited or rude

Emotions

- The person may have difficulty regulating his emotions
- The person may seem immature or appear to act inappropriately
- The individual may become self-injurious, disruptive, aggressive or property destructive, making social relationships more difficult
- The person may "lose control" in a strange or overwhelming environment/situation

Behavioral

– Catastrophic reactions related to sensory overload

– Increased likelihood of self-injury and aggression among lower functioning individuals

ABA approach to skills building

- https://www.youtube.com/watch?v=7pN6ydLE4EQ
- http://www.autismtrainingsolutions.com/resources/videos/escape-behaviors

Social Stories

– *https://www.youtube.com/watch?v=vjlIYYbVIrI*

Pictorial Schedule

- Instructs somewhere where to go via pictures
- How can we build on the visual skills of individuals and promote independence with the use of a pictorial schedule?

Establishing Work Systems

– A work system (TEACCH) is a systematic visual presentation of 4 types of information related to tasks and materials:

1) What is the person supposed to do?

2) How many steps are involved in task completion?

3) How will the person know he/she is done?

4) What do you do with materials when you are finished with the task?

Video-based Skills instruction

Video based instruction has been used in a variety of ways to teach children on the spectrum:

Basic skills

Social skills such as starting and stopping conversations

Altering temper tantrums during transitions

Behavior Problems or Sensory Overload?

– Sensory overload and over-sensitivity to noise, lights, strong odors, overcrowding

– When exposed to sensory overload an individual may become uncomfortable, frightened or disoriented

– Identify setting factors and environmental stressors that might be associated with behavioral problems

Learning Rules of Social Engagement

- Many individuals can learn the rules of social relatedness even if they are not emotionally related

- Someone can be taught good manners

- Someone could learn how to tolerate family functions

- Avoiding situations because of social anxiety or social skills deficits does not increase independency
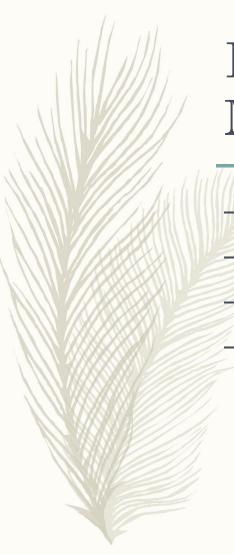
Routines for Personal Care

– It is important to master good grooming in order to be successful at school or at work

– Individuals need to learn simple self-management routines in order to accomplish hygiene and manage co-occurring medical or psychiatric illness

Develop Areas of Strength

- Do not solely key on the individual's areas of weakness
- See if areas of interest can be used to build friendships (shared interest)
- See if areas of interest can form the basis of work or volunteer activity
- Encourage trying new things because of the tendency to remain fixed within a narrow band of interest

Finding Mentors and Good Role Models

– Join groups of individuals who welcome those with difference

– Join social skills groups designed for individuals on the spectrum

– Join self-advocacy activities

– Locate individuals who have been successful (e.g. attend lectures, read materials, watch videos and movies about individuals on the spectrum who have been successful)

Anger Management

– Find ways to recognize when angry using stress and anger thermometers

– Develop coping skills for self-soothing (e.g. comfort tool kits)

– Understand triggers associated with anger reactions

– Learn how to be a better social problem solver

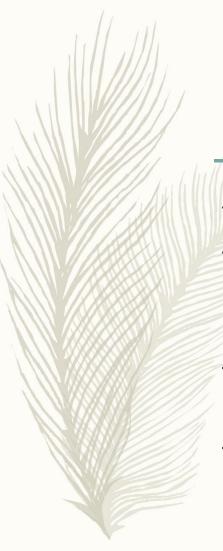– Learn the difference between assertive and aggressive communication

Treat co-occurring anxiety and depression

- Given the high co-prevalence of depression and anxiety among individuals on the spectrum it is important to treat mood and affective spectrum disorders

- This may involve medication management

- This may involve psychosocial (non-pharmacological) approaches to coping skills development

How do I provide structure?

- Adhere to schedule
- Have the consumer participate in marking a calendar
- Is this someone who does better if prepared for a change or transition, or does the person become overstimulated?
- Staff should train towards consistency so that all personnel are interacting in similar ways with consumer

How do I help the consumer with transitions?

– Help the individual develop a positive routine

– Help bridge transitions by giving the consumer something to look forward to but realistically anticipate and prepare for upcoming challenges

– Provide opportunities for Life Skills Training and application to real world activities

– Balance scaffolding with promoting opportunities for choice and independence

How to help?

– Eliminate exposure to violent media via television, video games and computers

– Identify learning style, relative cognitive strengths and deficits through assessment and re-assessment

– Provide early opportunities for language, social activities, team activities, volunteer activity

– Teach life skills including laundry, money management, self-care

– Provide scaffolding through a positive routine

– Provide clear expectations for behavior

– Use ABA and Positive Behavior Supports

How to help (cont'd)

- Build on interests
- Teach tasks using visual aids as a series of simple steps
- Clear expectations for behavior
- Provide opportunities for social interaction with peers and family members
- Teach individual to follow instructions at school, at home and at work
- Provide opportunities to earn incentives and regular reinforcement of adaptive behavior

Take Home Messages

- Get child assessed and appropriately supported within the school setting

- Involve child in social and life skills activities as soon as possible to increase self-sufficiency

- Involve in sports and team activities

- Develop a positive routine

- Expose adolescent to volunteer activities and job sampling

- Prepare adolescent for post-secondary schooling, independent living and work

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Questions?

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