

BACKGROUND

Autism Spectrum Disorder (ASD) is a developmental disorder, influenced by many environmental and biological factors, which results in three main impairments. These are in the areas of social interaction, communication, and restricted and repetitive behaviours and activities. There is currently no cure for ASD. Instead, most interventions focus on helping the person with ASD manage their everyday activities, for example, medication which can help the person's mood and ability to learn.

Other types of support include behavioural and allied health supports (for example: psychology, speech pathology, and occupational therapy) designed to improve the child's ability to manage their difficulties. There is a continuum of impairment along the autism spectrum, from the more severe with significant impairments, to higher functioning individuals and those with Asperger's syndrome (those with fewer communication difficulties and lesser impairments in social interaction and restricted/repetitive behaviours). All variations of ASD, according to the Diagnostic and Statistical Manual of Mental Disorders 5th edition (DSM-V) are currently given the diagnosis of Autism Spectrum Disorder. For general purposes and your direct practice, it is important to be aware that young people with ASD may show several difficulties across three areas of impairment:

Social interaction difficulties

- The young person may show social behaviour that seems odd or out of place to others. They may struggle with taking turns, maintaining attention and joining in social interactions. They may not express themselves appropriately in line with the social context. Most likely, they will not understand many social norms and conventions.
- They may struggle to interpret social cues accurately, for instance knowing how others may be feeling, or the meaning of their facial expressions, tone of voice, and verbal and non-verbal communication.

Communication difficulties

- People with ASD can show language delays and speech abnormalities. People who have Asperger's syndrome may have more subtle language and speech anomalies, and initially appear to communicate reasonably well.
- They may show reduced spontaneity in their speech and focus on a restricted range of topics. Individuals with ASD may display a unique communication style, with unusual use of certain phrases or repetitive words. The pitch, speed and rhythm of speech may also seem unusual. Some individuals with severe impairments may display echolalia, where they mimic phrases or words that are heard.

Restricted/ repetitive interests and other difficulties

- Individuals with ASD may become fixated on one or more particular interests. They may interact with objects in their environment in an unusual way, or display unusual sensitivities or tolerance to sensory information. Sensory processing of pain, temperature, touch, smell, sounds and visual information may be either unusual or absent. They may show very specific preferences for the sensation of certain textures, or specific food preferences.
- Tolerating environmental changes can be very difficult for people with ASD, and many rely on rituals or routine to provide them a sense of order. People with ASD often require a great deal of support to cope with changes in their lives, and may struggle with many aspects of academic learning.

Helping young people with ASD, as part of your mentoring role in HYPAR

- It is important to find likable qualities about the young people you are working with, that you can relate to. Your role is critical in supporting these young people to develop coping skills for the difficulties of life, and creating a positive vision for their future.
- You can help by understanding their learning needs and preferences so that you can shape your interactions and work well with them. Find ways to help them enjoy themselves, feel like a valued and respected individual, and feel included in their community. Encourage and empower them through learning, so that they can go beyond their current abilities.
- You can help through concentrating on lifting their self-esteem, and helping them know there is a vision for them to have a good life; some skills work now will mean that vision is realised.

HYPAR'S HANDS ON APPROACHES FOR ASD: PRACTICE STEPS

The following areas can be helpful when supporting people with ASD.

Find an individualised way to work with the person:

- Understand their interests, preferences, preferred activities and how they like to manage their routine. Build on their strengths and help them feel confident to try developing new skills, particularly in areas where they struggle.
- Build rapport by finding common interests and sharing your own interests and curiosities. Find something you enjoy or find interesting about interacting with them, and notice when they are attentive.
- Negotiate how you will work with them e.g. “sometimes when I work with you I will teach you a new skill and show you how to do something – is that okay with you?”
- Ask them how they would like you to support them. Share with them aspects of your personality and your interests. You do not need to discuss very private information about yourself, but you can discuss general topics and mutual interests. Use your own learning examples, to role model how they might be able to tackle a difficult situation.
- Listen to what they say before evaluating their statements. See if you can figure out what they may really mean, for instance “I ‘m not doing...” may actually mean “I am afraid to try that activity because I am not confident”.

Have a pre-planned range of goals which relate to ASD and having a good life.

- Create achievable goals, with some room for a slight stretch in their skills over time. This will assist the young person to improve their skills and move to the next level.
- Goals should focus on social skills, communication and social behaviours, as well as how to help the person understand the wider social and community context. Often, allied health professionals such as speech pathologists, occupational therapists, physiotherapists, social workers or psychologists can assist with discipline specific goal setting. Have a life skills teaching approach when you think about skill development.
- Where possible, involve the young person in their planning. Sometimes they may indicate they don't want to be part of the goal setting and this is okay, as long as they have been given an opportunity to think about changes, plans, ideas that will impact on their life and their well-being
- Reflect on the progress of their goals, their skills mastery, and achievements. Demonstrate an understanding of how these improvements add to their overall sense of self.

Use structure

- Use reminders about the beginning, middle and end for most interactions to explain what will happen.
- Calmly demonstrate you understand their perspective and their frustrations, but also describe the perspective of others, or the wider context. This includes things they might need to remember, for instance “we are going to the shops today. Remember it can feel a little noisy there. If you get worried remember to let me know by shaking your head (or relevant gesture) then I’ll know that we need to get going”.

Use positive behaviour support

- Positive behaviour support is non-aversive. There is no focus on punishment, but rather teaching the person what they can do or need to do. The basic premise of positive behaviour support is: provide as much preventative, environmental, teaching and skill development as possible to positively shape behaviour.
- When behaviour escalates to a high level, reactive strategies need to be put in place to quickly reduce risk and de-escalate the situation. Sometimes these strategies might feel like you are ‘giving in’ to create safety. However, this is not the case, as learning will eventually occur (just not at the time of the escalation). When reactive strategies are in place, this is not the time for consequences, discussion, or describing why the behaviour was unwanted. Instead, learning will occur when the person is calm and in a better learning space (when the brains stress/ survival response is not activated).
- Offer praise, acknowledgment of the young person’s efforts and verbally reward good efforts in a general or subtle way (as some people can become self-conscious with over the top praise). Identify an individualised safety plan for you and the young person when you are on shift.
- Safety planning can begin with a general assessment of the situation, what to do when behaviour escalates (perhaps an agreed upon plan) and how to rapidly introduce safety. This may be through removing certain stimuli, people, getting the young person out of the situation or ceasing an activity. Have an emergency plan in place (in line with HYPAR guidelines, where there is clear awareness of how to maintain your safety and when to contact emergency services).
- Focus on the following prompts whenever you see problematic behaviour: What behaviour am I seeing? What might the person really be saying? What purpose do I/we think the behaviour serves? How could I/we respond in a way that helps?

Involvement of important people in the young person’s life

- Review goals in the persons care plan at regular intervals (e.g. every 3 months). Involve all stakeholders in the person’s progress, to enable shared, holistic and “wrap-around” support.
- The attention, involvement and input of significant people will ensure that the planning process, awareness of progress, and setting of new goals will be consistent.

Further work

The attached reference list contains further sources you can access for more information. You can discuss your needs for further information about Autism with your team leader or manager. It is ok to become confused about working with young people with Autism, and remember that all individuals with ASD are different and will require different methods of support. You are not expected to know all of the correct approaches to helping someone on the Autism spectrum, however a focus on broadening your understanding and developing a unique relationship with the young person will be a positive. It is also important to think about how you can positively shape the life of a young person with ASD, while being mindful that this is a continual learning process.

FURTHER READING:

References

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