

Psychoeducational and Psychotherapeutic Support Strategies in Asperger Syndrome

Presented to:
Kentucky Autism Training Center

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Asperger Syndrome

- ▶ Characteristic symptoms of autism (mild to intense), average to above average intelligence
- ▶ On-time, age-appropriate language development (e.g., functional first words by 1 year, multiple word combinations by 2 years, full sentences by 3 years)

Today's talk will apply to???

- ▶ Several subcategories of autism spectrum disorders: High Functioning Autism, PDD-NOS, Asperger Syndrome
- ▶ HFA characteristic symptoms of autism (mild to intense) average to above average intelligence, may have history of language delays
- ▶ **DSM V does not plan to differentiate between subtypes**

Typical Differences seen in Asperger Syndrome or HFA

- ▶ Differences in Socialization
 - Socially "aloof", prefers solitary activities
 - or*
 - Socially active & interested, yet socially "odd"
 - Unusual quality eye contact
 - Flat/unusual emotional expression
 - Unusual/odd/indiscriminate imitation
 - Differences in peer play skills (or differences in adult interaction skills)
 - Challenges with understanding social rules

Typical Differences seen in Asperger Syndrome or HFA

- ▶ Differences in Communication
 - Good vocabulary but difficulties with auditory comprehension (better expressive language than receptive)
 - Challenges in following verbal directions (esp. in groups)
 - Difficulty with the give and take of conversation
 - Driven or perseverative talk on preferred topics
 - Literal understanding of language (confused by metaphors/sarcasm)
 - Inappropriate/unusual questions
 - Unusual speech intonation, volume, rhythm, and/or rate
 - Challenges in asking for help
 - May use echolalia (immediate, delayed)

Typical Differences seen in Asperger Syndrome or HFA

- ▶ Repetitive Interests, Activities, and Behaviors
 - Imagination may be less flexible; “creative” play may re-enact familiar scripts
 - Challenged by transitions/changes in schedule
 - Wants things “just so”
 - Unusual responsiveness to sensory experiences: sounds, visual details, touch, textures, foods
 - May engage in unusual body movements (flap hand, look at fingers, etc.)
 - Obsessive talk, compulsive actions and/or rituals

Typical Differences seen in Asperger Syndrome or HFA

- ▶ Cognitive Functioning
 - Procedural, mechanical skills generally intact and may be outstanding! (e.g., math computation, reading decoding) **Baron-Cohen’ “systematizing”**
 - Complex processing of information relatively impaired (e.g., reading comprehension)
 - Difficulties with abstract thinking (concrete, misses the “big picture,” focuses on irrelevant details)
 - Needs support with organization (initiating, planning, carrying out, finishing tasks)
 - Sequencing challenges (may lack sense of time or be over focused on time)

Typical Differences seen in Asperger Syndrome or HFA

- ▶ Fine/Gross Motor Differences (**not** seen in all)
 - Messy handwriting
 - Awkward gait
 - Clumsiness

Intervention Areas in today's workshop

- ▶ **Psychotherapeutic Interventions**
 - Of interest to counselors, therapists, and other mental health professionals
 - Possibly of interest to family members or individuals with Asperger Syndrome/HFA
- ▶ **Psychoeducational Interventions**
 - Of interest to professionals working in schools or other educational settings
 - Of interest to family members
 - Possibly of interest to individuals with Asperger Syndrome/HFA

Cognitive/Behavioral Therapy with Clients with Asperger Syndrome

- ▶ Associated Social-Emotional Difficulties
- ▶ Overall Tips
- ▶ Components of Therapy (Atwood, 1999)
 - Assessment
 - Affective Education
 - Social Skills Training
 - Cognitive Restructuring
 - Stress Management & Relaxation Training
 - Self-Reflection
 - Self-advocacy

Social-Emotional Challenges Sometimes Associated with AS/ HFA

- ▶ **Mood Disorders**
 - e.g., Desire for friends but aware of difficulties with achieving and maintaining friendships
- ▶ **Anxiety Disorder**
- ▶ **Social Interaction Difficulties**
 - e.g., Need skills training
 - e.g., Difficulty recognizing other person's thoughts
- ▶ **Rigidity in values and interests**
 - e.g., May have difficulty with compromise
 - e.g., May make extreme statements, no middle ground
 - e.g., Can't befriend a co-worker
- ▶ **Distortions in thinking, incorrect assumptions**
 - e.g., either too negative or too positive self-image

Tips for Therapy with someone with AS/HFA

- ▶ Who is requesting the therapy?
- ▶ Establishing rapport
- ▶ Practicing skills over and over
- ▶ Patience!
- ▶ Working with client to come to sessions regularly

Therapy Components: Assessment

- ▶ Interview
- ▶ Rapport
- ▶ Parent & Teacher Behavior Checklists
- ▶ Self Checklists for Adults
 - (ASEBA, BASC, MMPI-RF, Burns Anxiety and Depression)
- ▶ Reviewing school assessments, records
- ▶ Parent or Partner Interview

Therapy Components: Affective Education

- ▶ Improve ability to detect others' emotions
 - Body Language Tips
 - Journal re: self and others' reactions
 - (e.g., to compliments)
- ▶ Understanding one's own emotions
 - Worksheets

Therapy Components: Social Skills Training

- ▶ Problem-solving
- ▶ Role-play (e.g., compliment practice)
- ▶ Bubble Talk
- ▶ Explaining/reviewing social "rules" through social stories
- ▶ Social Effectiveness Therapy (Turner & Beidel)

Social Effectiveness Therapy

- ▶ Originally designed for individuals with social phobia, social anxiety
- ▶ A complete social skills program—instruction and rehearsal
- ▶ Ideally—16 weeks of group meetings
- ▶ ECU has used this program for teens and adults with Asperger Syndrome from 2005–2010

Therapy Components: Cognitive Restructuring

- ▶ Identifying and changing negative self-talk
- ▶ Identifying and changing cognitive distortions
- ▶ Enhancing thinking flexibility, learning to seek clarification
- ▶ “Rose Colored Glasses!”

Therapy Components: Stress Management, Coping, & Relaxation

- ▶ Relaxation Training
- ▶ Problem Solving
- ▶ Goal/Priority Setting
- ▶ Scheduling and Organizational Assistance
- ▶ Coping Strategy Training
- ▶ Organizational Strategy Training



Therapy Components

- ▶ Self-understanding
- ▶ Education about the autism spectrum
- ▶ Self-advocacy
- ▶ Connecting with others on the spectrum
 - Online
 - In person (informally, through social or advocacy groups, conferences)
 - Bibliotherapy

Therapy Components: Home/Residential Motivational System

- ▶ Written Reward System
- ▶ Responsibility List
- ▶ Task List
- ▶ Other Home Strategies...
- ▶ Key... to have someone monitoring and supporting—parent, tutor/advocate...
 - e.g. has this person been coming to class? Showing up for meals?



CHANGING GEARS:

Psychoeducational Intervention

4 BASIC PRINCIPLES



1. Individualize
2. Make events predictable
 - Routines
 - Schedules
3. Make expectations clear (visually)
4. Make learning interesting (special interests)

Psychoeducational Intervention

3 BASIC STRATEGIES



1. Routines
2. Written, Individual Schedules
3. Written Directions (Work System)

NEXT:

- ▶ Psychoeducational Intervention Techniques to Address Specific Characteristics Associated with HFA/AS



Techniques:

Language and Communication

- ▶ Write it down!
- ▶ Adjust complexity of language
- ▶ Provide step by step written directions
- ▶ Present information visually
- ▶ Use concrete speech. Teach slang, teasing, etc.
- ▶ Support help-asking skills

Techniques: Social Interaction

- ▶ Allow alone time
- ▶ Educate peers and enlist their support
- ▶ Promote peer interaction (clubs, structured games, special interests)
- ▶ Matter of fact, caring manner (not subtle facial, emotional cues)
- ▶ Individualized Social Rules
- ▶ Avoid extended verbal social reasoning (How do you think I feel?)
- ▶ Help generalize social routines, rules
- ▶ Concrete social skills training
- ▶ Remember that unusual social behavior is part of the person--don't "work on" everything

Techniques:

Restricted Interest, Sameness Need, Sensory

Issues

- ▶ Use areas of special interest
 - Reinforcers
 - To promote peer interaction
 - To increase interest in academics
 - To develop career and academic skills, choice of major
- ▶ Provide alternate activities for sensorily difficult situations
- ▶ Individualized schedule to ease transitions and changes
- ▶ Finished routines
- ▶ Use repetitive motor behaviors as a clue that the person needs something

Techniques: Managing Emotional Swings/Crises

- ▶ Teach social behaviors in "neutral" times
- ▶ Provide a "get away"
- ▶ Use direct, short verbal phrases; try giving written directions ("Please sit down.") Limit "reasoning".
- ▶ Try to make sure student can meet task demands (e.g., simplify demand if needed)
- ▶ Functionally analyze the emotional behavior

Techniques: Managing Associated Difficulties

- ▶ Organizational Assistance
 - Backpacks, fanny packs, labeled folders
- ▶ Highlight Important Material
 - Highlight key concepts
 - Reduce # of items on page, use larger print, highlight where answers are to go
- ▶ Help with handwriting
 - Shorten assignment
 - Reduce or eliminate "copying" from board, etc.
 - Teach keyboarding
 - Let person choose (pencil, pen, printing, cursive)
 - Allow audio recording answers for assignment
 - Use peer note taker