Investigating Adolescent Issues in Autism Spectrum Disorder (ASD) & the DSM-5 Criteria
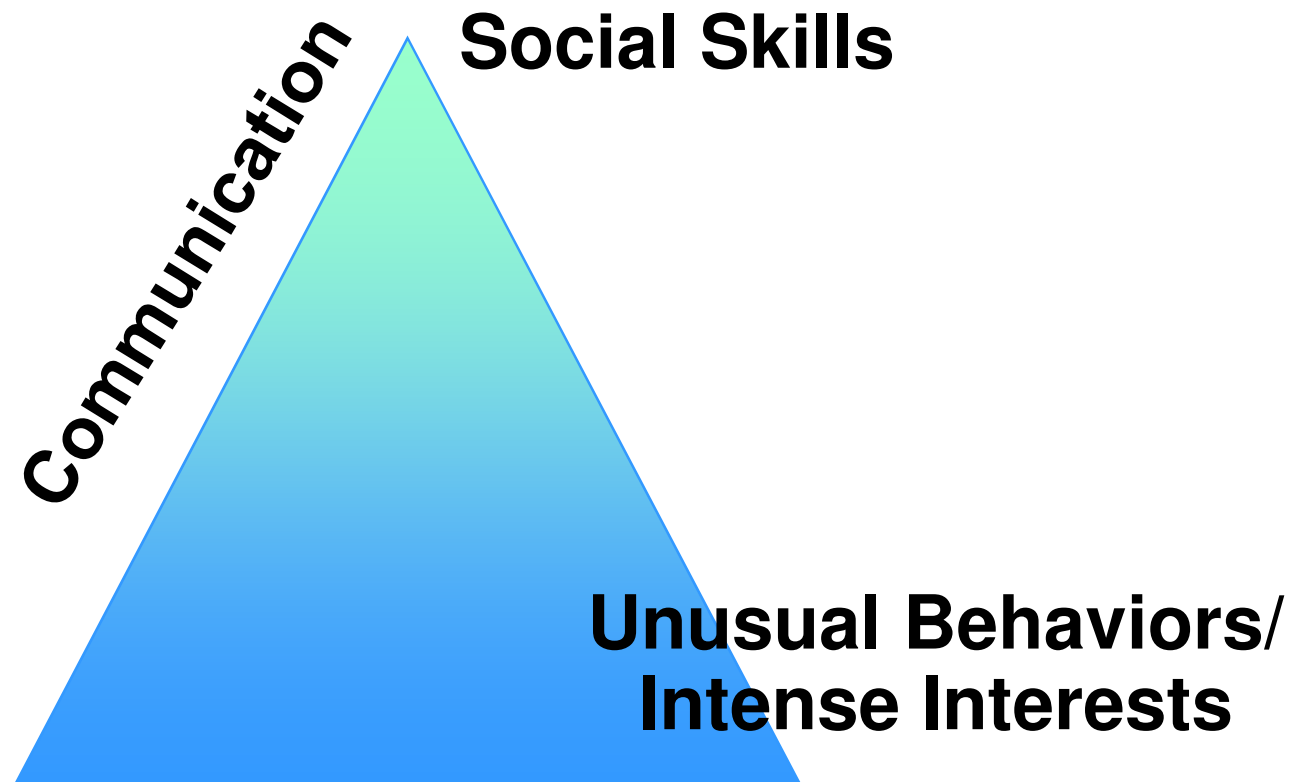
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Three Core Symptom Domains – DSM-IV

Communication

Social Skills

**Unusual Behaviors/
Intense Interests**

Two Core Symptom Domains – DSM-5

- Social Communication/Interaction

- Restricted, Repetitive behaviors, and interests

Accompanied by a severity modifier for each domain to capture the spectrum of ASD

DSM-5

- 7 criteria (from 12 criteria from DSM-IV)

- 5 previously independent disorders in DSM-IV grouped as PDD, DSM-5 defines a single ASD

- New category of Social Communication Disorder

- Language development is treated as separate from ASD

- More inclusive age of onset criterion

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DSM-5 Criteria for ASD

1. Persistent deficits in social communication and social interaction, have to have all 3 (currently or by history):

   a. Deficits in social-emotional reciprocity

   b. Deficits in nonverbal communicative behaviors used for social interaction

   c. Deficits in developing, maintaining and understanding relationships

** Specify current severity

DSM-5 Criteria

2. Restricted, repetitive patterns of behavior, interests or activities as evidenced by at least 2 of the following (currently or by history):

   a. Stereotyped or repetitive motor movements, use of objects or speech

   b. Insistence on sameness, inflexible adherence to routines, or ritualized patterns of behavior of verbal or nonverbal behaviors

   c. Highly restricted, fixated interests that are abnormal in intensity or focus

   d. Hyper-or hypo reactivity to sensory input or unusual interest in sensory aspects of environment

DSM-5 (cont'd)

3. Symptoms must be present in early childhood (but may not become fully manifest until social demands exceed limited capacities or may be masked by learned strategies in later life).

4. Symptoms cause clinically significant impairment in social, occupational or other important areas of current functioning.

5. Not better explained by intellectual disability or global developmental delay. Intellectual disability and ASD frequently co-occur; to make co-morbid diagnosis, social communication should be below that expected for developmental level.

Autism Spectrum Disorder

- ASD- can be conceptualized as a heterogeneous group of disorders or symptoms
- Not a single disorder and there is no agreed upon single cause
- Every child with ASD is unique
- Key is to identify the symptoms so we can intervene

Comorbidity

- 64% poor attention span

- 43-88% unusual preoccupation

- 16-37% obsessive/compulsions or rituals

- 50-89% stereotypic utterances

- 68-74% stereotypic mannerisms

- 17-74% anxiety/fears

- 9-44% depressive mood, irritability

- 43% self-injurious

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Sleep Problems in ASD

- Individuals with ASD suffer from problems (insomnia) 40-80% more

- Those with hx of regression have more sleep problems

- Sleep problems can impact mood, attention, impulse control, daytime functioning in general & cause parental stress

- Daytime sleepiness may manifest as hyperactivity

(Cortesi, Giannotti, Ivanenko, & Johnson, 2010)

Pediatric Neuropsychology

- Professional specialty concerned with learning and behavior in relationship to a child's brain. A pediatric neuropsychologist is a licensed psychologist with expertise in how learning and behavior are associated with the development of brain structures and systems.

www.div40.org

What is a Good Evaluation?

- Looks at "whole" child/adolescent

- Tests administered depend on your concerns – have specific questions in mind

- Clearly delineates strengths and weaknesses

- Interprets test data for you in terms that you understand

- Uses the objective data from research-based methods/standardized tests to make specific, relevant and practical recommendations

What do we assess?

- General Intelligence
- Academic Achievement
- Language
- Phonological Processing
- Visual-Spatial Perception
- Memory
- Attention

- Executive Functions
- Processing Speed
- Fine Motor Skills
- Sensory Functioning
- Emotional/Behavioral/ Social Functioning
- Adaptive Functioning

Achievement

- Word Reading

- Reading Fluency

- Reading Comprehension

- Math Computation

- Math Story Problems

- Written Expression (Transcription and Generation)

Written Expression

- Transcription: production of letter and spelling that is necessary to translate ideas into a written product

- Generation: translations of ideas into language representations that must be organized, stored and then retrieved from memory

(Fletcher, 2012)

Evaluation Procedure

- Rating scales – input from parents/teachers

- Home videos

- Thorough diagnostic interview

- Observation

- Formal neuropsychological testing

- Referral to other specialists as needed

Evaluation Procedure

- Feedback to parents

- Do not just give label

- Provide concrete steps (in writing) for parents to follow

- Discuss results with child if appropriate

- Be available for follow-up with family and school

Neuropsychological Findings

- Have problems in comprehension of sentences

- Mental state verbs

- Reasoning

- Theory of mind tasks

- Prosody

- Pragmatics

Neuropsychological Findings

- Impaired memory for emotional events, faces and verbal information

- Sustained attention for non-preferred activities

- Impaired executive functions (set shifting, working memory, hypothesis testing)

- Impaired attention shifting

Executive Functioning

- Umbrella term for many complex cognitive processes that serves ongoing goal-directed behaviors

Most definitions of executive functions include the following:

- Goal setting and planning

- Organization of behavior over time

- Flexibility

- Attention and memory systems (working memory)

- Self-regulatory processes (self-monitoring)

Benefits of Executive Functions

- Academic success in school and life is increasingly dependent on a student's ability to plan, organize and prioritize information, distinguish main ideas from details, monitor their progress, and reflect on their work

(Meltzer & Krishnan, 2007)

Critical Elements Common to Programs

- Highly supportive environment

- A functional approach to problem behaviors

- Curriculum content that addresses communication, behavior and social skills

- Plans for transition from junior high & high school

- Focuses on the whole child

Intervention

- Education about ASD

- Individual/Family Therapy

- Behavior management techniques/Positive programming

- Primary focus is prevention of problems (be aware of sensory issues & coping skills)

- Social Skills Training (Social Stories/Scripts/Groups)

- Visual Supports

- Peer Mediated Intervention

- Medication

Adolescent Issues

- Dealing with Anger/Frustration (Co-morbidity)

- Independent Task Completion & Executive Functioning Skills

- Pragmatic Language/Social Awareness

- Personal Hygiene

- Self-Awareness & Advocacy

- Dating/Sexual Interests

- Managing Money

- Employment

Eliminating Negative Behaviors

- Intervene when adolescent shows initial signs of stress

- Provide visual support and assistance with communication

- When appropriate ignore

- Will perceive responses in "absolute value"

- FBA to identify antecedents

- Positive Behavior Plan; collect data to determine if plan is working

Self-Regulatory Strategies

- Identify signs of overload

- Identify potential problematic situations

- Strategies (effectiveness) adolescent uses to manage stress

- Modify environment and adult response

- Try soothing music

- Exercise

- Technology

Calm Down Strategies

- Create cue cards or visual list of what to do when angry/stressed.

- When adolescent shows card, direct to "quiet spot"

- When in quiet spot, direct to visual to show how to calm (take a deep breath, count to 100, recite Star Wars characters, listen to music on iPad)

- Use stress ball, notebook to write in, book, etc. When calm, return to activity

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Adolescents and Daily Living

- Hygiene – no real drive to please others & sensory issues

- Dressing – teach independence

- Bathing and Grooming (list of how to adequately shower; list for bathroom routine)

- Use calendar to remind to shower, brush teeth, do laundry, etc.

- List and discuss why good hygiene is important

Independence

- All are driven by hormones –they are adolescents

- Teach adolescent skills to do things for themselves – cooking, laundry, packing lunch, cleaning, importance of appearance/hygiene, and leisure skills

- Use older peers as buddies/tutors to go shopping

EF Interventions

- Use of everyday routine with (e.g., Goal-Plan-Do-Review)

- Support working memory with "visual copy" of routine

- Teach adolescent how to formulate a plan, review their performance

- Teach to monitor their behavior

- Teach to become a self-advocate

Academic Interventions

- Highlight texts, study guides, notes

- Completed model of what is expected

- List of criteria for grading

- Decrease writing-verbal responses, computer, multiple-choice tests

Academic Interventions

- Priming

- Teaching outlining skills, how to pick out important details

- Graphic Organizers (*Framing Your Thoughts, Inspirations, etc.*)

- Provide enrichment activities in areas of strength (i.e., advanced classes in science, drama, art, etc.)

- Homework support – fax or email to parent or eliminate

Suggestions for Attention

- Allow individual own ways of attending

- Reduce distractions

- Exercise

- Use visual frames & graphic organizers

- Provide auditory frame (say what you are going to do and then do it)

- Break down lengthy assignments/lists

- Model goal directed behaviors

"Learning the R.O.P.E.S for Improved Executive Function"

(Schetter, 2004)

- Capitalize on visual strengths, practice and feedback in real-life situations, relies heavily on graphic organizers

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Write about your day:

Today I --

The best part of my day was ------------------------------

Draw about your day!

Name:_____ **Date:**_____

Social Skills

- Cue cards and scripts for interacting with friends

- List of reminders/rules for behavior (cue cards to show how to deal with stressful situations; too loud – get headphones or exit room)

- Never assume, always teach skill

- Use Social Stories &Comic Strip Conversations

- List of activities, list of free-time options

- Dry erase board, white board, etc.

Social /Language Strategies

- Teach exceptions to rules

- Keep a double meaning word notebook to review and test

- Teach idioms

- Break down social skills

Respect

To make people respect me, I should respect them. I should:

- Say "hello" when I see them

- Thank them for the favors they do for me

- Compliment them on their work

- Do favors for them (i.e., open doors and show I care)

- Start a pleasant conversation with them

Respect (part 2)

If something goes wrong, I should not freak out. I should:

- Stay calm: don't be a "rude dude"

- Ask a calm question to help problem solve

- (If I am out of lunch money) "Can you help me? I'd like to each lunch today."

- (If the schedule changes) "What am I supposed to be doing right now?"

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Respect (part 3)

I should not: raise my voice or hit them

- If I think they are laughing at me, laugh along with them (Everyone must laugh at themselves once in a while)

- Thank them if they give me an explanation

- Go along with it as if nothing happened

- Go through with what I have to do without complaining out loud (by, A.C.D.C.)

Responding to Bullying

- Know the facts and slang

- If someone upsets you, stay calm

- If they continue, make an excuse to get away

- Inform parents and/or counselor

- Stay safe, get away, tell trusted adult

- If someone approaches you online, tell parents ASAP

Sample Hidden Curriculum

- Don't write on the bathroom walls

- For boys, don't talk in the restroom while you are urinating

- Don't look over someone's shoulder when they are checking their email/texting

- Know which kids to avoid

- Do not pass gas or pick your nose (or teeth) in any class

(Myles & Simpson, 1998, 2001)

Items (cont'd)

- Use a nice tone of voice when talking to teachers – they like it. Also, try to smile sometimes.

- Rules change from teacher to teacher. Do not focus on the fact that it might not be fair.

- If you do something funny, it is usually funny once. If you do it repeatedly, it makes you look goofy and people might make fun of you.

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Technology to Improve Skills

- A personal digital assistant (PDA) – also helps by listing conversational tips (i.e., smile, make eye contact, don't interrupt, etc.)

- Can program it with lists of organizational tips, strategies, track progress

- Use it to record feelings/frustrations

- iPad, iPhone Apps – *Proloquo2Go*

- www.FizzBrain.com

- Software programs: *Dragon Naturally Speaking*

- *Iscribe DigiMemo4*

Summary

- Prepare for transitions

- Provide structure and visual supports

- Establish routines and be consistent

- Limit verbalizations and avoid arguments

- Teach expectations for all new routines (lists, social stories)

- Never assume, first teach

- Focus on generalization

Resources

- Parent support groups/information (www.autism-society.org)

- Sibling support groups (www.thearc.org/siblingsupport)

- Respite services (CCBDD)

- Other family members (www.asgc.org)

- Create informal network of other parents/families/professionals in community (www.milestones.org)

- Books/training modules (www.ocali.org; www.autisminternetmodules.org)

- **AIMS – Autism Internet Modules: Linking Research to Real Life (from Autism Interactive Collaborative Network group)**

  www.autisminternetmodules.org

LIGHT IT UP BLUE FOR THE ANNUAL WORLD AUTISM AWARENESS DAY!!
April 2, 2015

www.worldautismawarenessday.org

www.autismspeaks.org

Questions

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