Autism and resilience for teens and young adults

Jeanette Purkis
About Jeanette

- Autistic advocate
- Author
- Presenter
- Public servant
- Mentor
- Awards
- Former troubled teen
Autism and resilience - definitions

- Resilience is:
  - Ability to bounce back after difficulty or setback
  - NOT about victim-blaming

- Autism in this presentation is:
  - All cognitive capabilities, verbal speech or not, with or without co-occurring conditions
  - Any condition captured within the autism spectrum
Autistic teens....

- World may be/seem very confusing and stressful
- Puberty - emotional and biological
- Emerging gender identity and sexuality
- Importance of acceptance by peers and its implications
- May have left education or be struggling
- Concerns about upcoming transitions
What does resilience look like in autistic teens?

No absolutes but resilient teens more likely to be:

- More self-confident
- More able to take on new challenges
- Better able to manage unexpected challenges
- More able to manage disappointment and change
- More able to manage social interactions
- More able to like themselves
Different not less: Valuing autistic people

- Different not less
- Focussing only on deficits or issues unhelpful
- Many autistic people experience autism as an integral part of who we are
- Value of adult autistic role models
- Supporting positive identity - highly valuable
Basics of resilience

- Place of safety
- Controlled challenges
- Failing successfully

"Autistic reality is of no less value or truth than non-Autistic reality" - Jeanette Purkis.

Jeanette Purkis' Autism Books and Other Things/FB
The place of safety

- An environment where the young person is validated
- Teen isn’t criticised or shamed for autistic expression
- A place of trust and respect
- Environment based in love and care - validation
- This should ideally start in early childhood and continue
- Build sense of worth and value
Controlled challenges

- Resilience built through controlled challenges
- Building the resilience ‘muscle’
- Achieving one challenge should build confidence for the next
- If something goes wrong explain it as a learning experience as much as possible
- Teen likely to benefit if given agency in the process
- Can start at any age
Failing successfully

- Challenges can result in failure
- Autistic teens - and adults - struggle with failure
- Why perfectionism is not a good thing

Viewing failure as a learning opportunity can build:
  - Capacity for resilience
  - Confidence
  - Self-esteem

- Greater capacity to navigate study and work transitions into adulthood
"I am constantly delighted and encouraged by our young people on the spectrum"

Jeanette Purkis' Autism Books and Other Things/fb
Self-esteem and resilience

- Building self-esteem impacts the acquisition of resilience

Supporting self-esteem can involve:
- Making sure they feel - and are - included
- Them knowing you are ‘in their corner’, especially in difficult times
- Providing positive feedback
- Listening to them
Risk factors for resilience

Resilience can be difficult for autistic kids to acquire due to:

- Negative attitudes of others
- Perfectionism
- Anxiety around change
- Assumption of incompetence
- Trauma from bullying or other abuse

This indicates that it is very important to acquire resilience.
Protective factors for resilience

- Respectful relationships
- Self-worth and self-esteem
- An assumption of competence
- Teen being stretched and challenged within their capability
- Autism being seen as an attribute or difference and not a tragedy
Success isn't about reaching some arbitrary goal. It is about reaching your potential, whatever that may be.
Strategies

- Change is improved by the teen having a ‘road map’
- The value of encouraging questions
- Set and maintain boundaries
- Autistic adults can assist role models and ‘translators’
- Communication differences seen as cultural difference
- Interoception
- Acknowledging that parents and teens themselves are the experts
In summary

- Resilience is a highly useful skill but difficult to acquire
- Promote & support self-esteem and positive autistic identity
- About stretching teen within their capacity
- Valuable skill to take into adulthood
- Focus on exclusively deficits doesn’t help
- Resilience can become a self-replicating skill
Teens, Anxiety and The Autism Spectrum

DR. Wenn B. Lawson PhD, Cpsychol, AFBPsS MAPS
What to expect from this talk

We will explore:
• The cognitive style in autism
• The cognitive style in the generic population
• What this means with regard to being an AS teenager
• Stress and anxiety: statistics, reasons and what might be helpful for us all
That’s typical!

“That’s typical” I heard her say. I wondered what she meant? “You always want it your way” She echoed without relent.

I waited, silent as a bird, And pondered on her words. She just kept talking, I kept walking, What was it that I heard?
That’s typical!

“I always want it my way?”
What other way could there be?
I only know the proper way,
The way that’s there for me.

If we do it her way,
It wouldn’t be right at all.
It would be wrong and all along,
I’d know it’s wrong and not OK!
That’s typical!

So, why can’t she understand?
What is it she doesn’t get?
I must firmly stand my ground,
I mustn’t give in yet!

If I give up she’ll never learn.
She’ll never know the way.
She calls it “being stubborn”,
But, I’m scripted for this play.
Cognitive Style in AS

- Being single minded
- Being literal
- Being closed to alternatives
- Being specific rather than general
- Being given to poor timing & sequencing difficulties
- Being prone to now, not then/when …

FOR MORE INFO...

Wenn’s books: Build Your Own Life; Understanding and working with the spectrum of autism. The Passionate Mind
Cognitive Style in generic population

- Being diversely connected
- Being non-literal
- Being open to bigger picture
- Being General & specific
- Being given to Understanding timing and sequencing
- Being able to forward think outside of one’s interest
AS (attention)
Narrow and Deep

NT (attention)
broad and shallow

Highly focused Interests take precedence

Multiple diffuse interests

Tree of Life Experience

----- attention

----- attention

----- attention
Stress

• Important component for keeping skin over body and enabling body to function effectively

• When is stress not good? When it is dis-stress. This causes lack of body/mind rest and is very tiring.

FOR MORE INFO...

Wenn’s books, general reading on stress, general reading on autism.
Anxiety, what is it?

- A state of being/mood/emotion
- Negative affect
- Physical feelings of tension, increased heart rate, ‘funny tummy’ etc.
- Worry/apprehensive about some future event/misfortune that might occur
  - ‘what if….’ thinking style (e.g., What if I fail my exam; what if I miss the bus…..)
Why Anxiety and Stress?

- AS population prevalence 20-40%
- Non AS population 3-13% (Louisa Caroll, Clinical Psychologist, Autism Ass. NSW).
- Growing awareness of anxiety problems in the AS population is not yet accompanied by growth in scientific knowledge about assessment and/or treatment of anxiety, especially in children & teens.
How is it expressed?

• Physiologically- physical reactions triggered by autonomic nervous system (pounding heart, rapid breathing, sweaty palms, nausea)

• Cognitively: negative reactions and irrational beliefs

• Behaviorally: avoidance/escape or externalising/challenging behaviors (lashing out or self harm)
When is anxiety a problem?

• When it is out of proportion to the reality
• When it is chronic and can’t be reasoned away
• When it is related to innocuous situations
• When it leads to constant avoidance
Childhood Anxiety Disorders

- Separation Anxiety Disorder (SAD)
- Specific Phobias
- Social Phobia
- Obsessive Compulsive Disorder (OCD)
- Generalised Anxiety Disorder (GAD)
- Panic Disorder
Why are AS Teens vulnerable to Anxiety Disorders?

• Genetic factors (family history of anxiety or other mood disorders)
• Disposition: temperament, personality (shy, anxious)
• Relationship factors – parenting styles & modeling of caution/anxious behaviour
• Cognitive factors- information processing styles and negative self-talk
Triggers (Processing Information in Autism)

• Relational: monotropic individuals relating to polytropic individuals. What does this mean for communication?

• What does this mean for understanding and comprehending the world we all share?
  – Change, literality, closed pictures, forward thinking, learning and mistakes?

• What does it mean for social skills and acceptance?

• What about sensory sensitivities?
What does this mean for behaviour?

- Inappropriate behaviour
- Excessive talking or no talking
  - Frozen states (catatonia), rituals, repeated obsessive behaviour.
- Inability to understand or accept ‘it’s OK to do it differently’ stuff.
- Overwhelming feelings of exposure
Why Is Anxiety Difficult To Overcome?

• AS might mean individuals have reduced information or an incomplete picture of the situation. This leads to:
  – Lack of knowledge of other ways to respond
  – Complete belief in the outcome of the feeling
  – Feelings stronger than words
Management Strategies

• Using words that don’t address the underlying issues won’t work.
  – ‘it won’t hurt you’; ‘don’t be silly’; ‘stop this’.

• Address the real issue by:
  – Understanding AS
  – Modify language
  – Reduce demand
  – Put together an intervention or program

• Consider other possible supports
  – Medication (never use in isolation)
How to get there

• Technology is often a big part of the answer
• Computers (use scanned in pics; calendars; lists; power point; email)
• Proloquo2go
• Cameras
• TV/DVD/iPad/iPodTouch/video games
• Second Life? Simms?
• Mobile phones
Support will vary according to need

- Practical things that enable me to help myself
  - Diary and planners
  - To do lists
  - Structuring my day
  - Structuring my free time
  - Diet/exercise/social connection?
  - Sleep hygiene
Aim to give strategies that individuals can use

- Teach concepts (reality v fantasy)
- Role play
- Practice
- Give self-help skills (Build your own life)
- Be patient with us!
I’m not stupid, just autistic

• Please respect who I am
• Please help me to respect who you are
• Communication is a two way street
• Helping me to help myself is terrific.
• Understanding I might still need support as I age is wonderful
Aggression

• What am I feeling?
• How can I express my feelings?
• How can I make people listen?
• What gets things to change?
• What ‘tools’ do I have at my disposal?
• What have I learnt?
manipulation

• Change is terminal, I must prevent it.
• The unknown is scary, I must stay with what and who I know.
• I don’t understand that there are other ways to know and do things, (I am not generic) I must always do things the same way and make others do the same.
• I lack connections, unless someone helps me to build them
Anxiety

• I am anxious because I don’t know what will happen

• How can I be sure that I am OK?

• My feelings are stronger than the words people give me. Which are true?
Stress

• I am very uncomfortable. Stimming might help make me feel comfy again.

• I am over loaded, I need to avoid all demand

• I cannot learn any new task or complete my usual activity when I feel this way

• I need space, quietness, decreased demand and familiarity
All Behaviour is Functional

• If you want my behaviour to change, you must teach me how to behave differently.

• I may need pictures/photos to help me understand the procedure and process that you want me to take.

• I am happier when you are calm and happy. I may depend upon you to be confident, where I am not.
Resources

• Wenn’s Books
• Wenn’s web page: www.wennlawson.com
• Other books and web pages
• Autism aware professionals
• Extended family and friends
• Each other
Building Social Skills in Teens and Young Adults

Gayle Rogers, Speech Pathologist, Northcott
Introduction

• Gayle Rogers
  Speech Pathologist
  Campbelltown

• Slides developed by the Northcott multidisciplinary Therapy team
Overview of presentation

• Defining Social Skills
• Identifying where difficulties using social skills may occur
• The role of allied health professionals in supporting social skills development
• Strategies for teaching social skills
• Useful tools and resources
• Questions
Defining Social Skills

• Social skills are

Positive social behaviours that indicate social interest or provide appropriate social initiations or responses in specific situations. (Walton and Ingersoll, 2012)
Let’s break that down

• Social skills are behaviours
• Social skills involve indications
• Social skills involve initiating
• Social skills involve responses
• Social skills involve a specific situation
Where difficulties occur

Behaviour:

– Difficulties regulating emotions
– Difficulties regulating and responding to sensory information
– May present with repetitive behaviours
– May present with specific challenging behaviours such as aggression, self-injury etc.
Indications:

– Difficulties using and understanding body language
– Difficulties identifying the social cues
– Difficulties identifying contextual cues
– Difficulties interpreting social and contextual cues and processing this information to form a response.
Initiations and Responses:

What:
• Difficulties formulating thoughts into sentences
• Difficulties knowing what information is required in a response
• Difficulties knowing how much information to include
• Difficulties understanding that spoken information is only part of the message

How:
• Difficulties using correct volume, intonation and pitch
• Difficulties using an appropriate level of assertiveness i.e. not too passive and not too aggressive.
• Difficulties understanding that what is said does not always contain all the information
• Difficulties understanding what someone else may be thinking or feeling (theory of mind)
Specific Situations:

- Difficulties understanding how behaviour and language changes in different contexts
- Difficulties identifying the clues in the context
- Difficulties interpreting the clues and using these to determine how to respond
The role of Allied Health Professionals

- **Counsellors and Psychologists** can help develop skills to support emotional regulation, resilience and cognitive skills.

- **Occupational Therapists** can help to develop emotional regulation skills, sensory regulation skills. They can help to break down the social scenario and implement strategies to support success at each step.
Strategies for teaching social skills

• The purpose of social skills intervention is to make the implicit, explicit.
• Developing social skills is like developing any other skill:

- Think about a skill you have learnt e.g. learning to drive.
Hierarchy of Social skills

- Alex Kelly’s hierarchy of social skills is a nice place to start when thinking about social skills.
Strategies

• Visual Supports
• Social Stories
• Comic Strip Conversations
• Video Modelling
• Apps
• Worksheets
Visual supports

• Benefit visual learners and many individuals with ASD are visual learners

• Benefits of visuals:
  – Help make abstract verbal concepts more concrete
  – Remain stable over time and can refer back to it
  – Provides a more powerful means to engage attention
  – Helps consolidate learning
WHO DUNNY IT?

How to avoid being a suspect and leave without a trace!

Flush  Brush  Wipe  Wash

We are all responsible to ensure we ‘clean up’ after ourselves, wash our hands and remain hygienic.

That means YOU too.

1800 911 206
northcott@northcott.com.au
northcott.com.au

Northcott
Let’s see what you can do
What is a Social Story™?

• Intervention technique developed by Carol Gray.

• A Social Story™ is a short story/written document, written in a **specific style and format**, that describes an activity, situation, skill or concept.

• It is written specifically for a person with Autism Spectrum Disorder.
The goal of a Social Story™ is to share accurate social information in a patient and reassuring manner that is easily understood by the reader.
Social Stories™ can:

- Inform a person about how other people usually act during an activity or situation.
- Explain why other people act in certain ways.
- Provide a person with examples of common responses to certain social situations.
• The goal of a Social Story™ should never be to change the individual’s behaviour

However...

• The individual’s improved understanding of events and expectations, through the writing and reading of Social Stories™ may lead to more effective responses.
Examples

**Asking Politely**

When I want something, sometimes I forget to ask nicely.

I say things like, "give me that" and reach out for what I want.

It is rude to act like that. People will not want to help me if I don't ask nicely. I need to ask politely so people will answer me.

I can ask nicely like, "Excuse me, can you please give me that." Then I wait for them to answer before I reach for something.

When I am polite, people will want to help me and I will be happy.
GARY’S social stories on moving home:

STORY 1 ‘Gary’s home’

Gary lives at Oak Lodge. Gary has his own bedroom at Oak Lodge. He has lots of things in his bedroom. He has a TV, music, books and tractors. Gary sleeps and eats at Oak Lodge. When Gary goes out, he comes back to Oak Lodge. This is because Oak Lodge is his home.

Gary is going to move to a new house. Gary will look at the house. Gary’s mum and dad will look at the house. Alex and Lucien will look at the house. Gary will meet the staff and the other residents at the new house. Gary will tell Alex and Lucien if he like the house. If Gary likes the house, Gary might move there.

Gary will have new staff to look after him. Gary will have his own bedroom. Gary can take all his things to his new home. In his new bedroom there will be his TV, his music, books and tractors.

Gary might feel a bit worried about leaving. Gary might feel a bit worried being in a new home. Alex will help Gary to talk about it. The new staff will try to help Gary feel OK. Alex will see Gary in his new home. Lucien will see Gary in his new home. Alex and Lucien will be happy to see Gary.

Gary can make some new friends. Making new friends can be fun. He can also see his old friends at Oak Lodge. They will be happy to see him. He may stay at Oak Lodge for a drink or something to eat. He will then go back to his new house. Gary will sleep in his new house. When he goes out, he will come back to his new house. This is because this is his new home.
Comic Strip Conversations

• Intervention technique developed by Carol Gray
• They are simple visual representations of conversation.
• They can show:
  – the things that are actually said in a conversation
  – how people might be feeling
  – what people's intentions might be
• Use stick figures and symbols to represent social interactions and abstract aspects of conversation.

• Use colour to represent the emotional content of a statement or message.

<table>
<thead>
<tr>
<th>Colour</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>Green</td>
<td>Good ideas, happy, friendly</td>
</tr>
<tr>
<td>Red</td>
<td>Bad ideas, anger, unfriendly</td>
</tr>
<tr>
<td>Blue</td>
<td>Sad, uncomfortable</td>
</tr>
<tr>
<td>Yellow</td>
<td>Frightened</td>
</tr>
<tr>
<td>Black</td>
<td>Facts, truth</td>
</tr>
<tr>
<td>Orange</td>
<td>Questions</td>
</tr>
<tr>
<td>Brown</td>
<td>Comfortable, cosy</td>
</tr>
<tr>
<td>Purple</td>
<td>Proud</td>
</tr>
<tr>
<td>Colour combinations</td>
<td>Confusion</td>
</tr>
</tbody>
</table>
Video Modelling

• Based on the principles of social learning theory that individuals will repeat behaviours they have seen other perform

• It involves having the individual watch a video of an adult, peer or themselves preforming the behaviour correctly

• Taps into the visual strengths of individuals with Autism
How can you teach social skills?

• Incidental teaching – teaching as the situations is happening

• Structured learning
  a) Explain
  b) Model
  c) Role play (with feedback)
  d) Practice, practice, practice!

• Give positive reinforcement for appropriate behaviour
How can you teach social skills?

• Incidental teaching – teaching as the situations is happening

• Structured learning
  a) Explain
  b) Model
  c) Role play (with feedback)
  d) Practice, practice, practice!

• Give positive reinforcement for appropriate behaviour
Not all moments are teaching moments!

• Learn best in calm, safe environments.
• If you or your child are feeling anxious or frustrated, it might not be the best time to teach a social skill.
• Be patient and make learning social skills a positive experience.
Resources

• Social Skills Programs
• Books and Websites
• Applications for iOS devices
• The Kit: Keep It Together for Youth
Social skills programs

• May be run by Teachers, Therapists, Psychologists, or anyone else with training/experience.

• Professionals may develop their own, or use set programs that have research backing their effectiveness such as:
  – The Program for the Education and Enrichment of Relational Skills (PEERS®)
  – Secret Agent Society - social skills program for 8-12 year olds with High-Functioning ASD.
  – Stop Think Do Social skills program- Social problem solving method for resolving conflicts.
  – Alex Kelly social skills training programs
  – TEACCH® Autism program
Useful books and websites

• Tony Attwood (see www.tonyattwood.com.au)
• Alex Kelly (see www.alexkelly.biz)
• Carol Gray (see www.carolgraysocialstories.com)
• Sue Larkey (see www.suelarkey.com.au)
• Jed Baker - ‘The Social Skills Picture Book for High School and Beyond’
• Lots of others out there!
# Applications for iOS devices

<table>
<thead>
<tr>
<th>Application</th>
<th>Price</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Model me Going Places</td>
<td>Free</td>
<td>Photo slide show of children going to places, e.g. hairdresser, mall, doctor, playground, shop restaurant. American. Does not follow Carol Gray protocol.</td>
</tr>
<tr>
<td>Storyrobe</td>
<td>$0.99</td>
<td>A mobile, digital story book that allows you to turn photos into a talking book.</td>
</tr>
<tr>
<td>Stories2Learn</td>
<td>$14.99</td>
<td>Can make story sequences with text and record speech.</td>
</tr>
<tr>
<td>Talk’n Photos</td>
<td>$2.99</td>
<td>Store photos in albums and record a message for each photo. No text.</td>
</tr>
<tr>
<td>Pictello</td>
<td>$19.99</td>
<td>Can make story sequences with text and record speech.</td>
</tr>
<tr>
<td>My Story Creator</td>
<td>$0.99</td>
<td>Make a page from a comic using ready-made backgrounds or your own photos. Cannot record voice, but good for people who can read. Can save images to photo album to import into a talking photo album.</td>
</tr>
<tr>
<td>Strip Designer</td>
<td>$4.95</td>
<td>Useful for making comic strip conversations and social stories. Can draw figures or upload photos and type personal text.</td>
</tr>
<tr>
<td>App Name</td>
<td>Price</td>
<td>Description</td>
</tr>
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</tr>
<tr>
<td>Super Duper: What are they Thinking</td>
<td>$1.99</td>
<td>Well thought out app. Touch the speech bubbles to hear answer. Refresh for a total of 3 suggestions for each speech bubble. Option to score and email results to monitor progress</td>
</tr>
<tr>
<td>If… Then…Fun Deck</td>
<td>$1.99</td>
<td>If… then…Fun deck replicated in app. No answers. Try taking a screen shot then importing into Talking Photos so child can record their answers.</td>
</tr>
<tr>
<td>Understanding Inferences</td>
<td>$2.00</td>
<td>Understanding inferences Fun deck replicated in app. No answers. Try taking a screen shot then importing into Talking Photos so child can record their answers.</td>
</tr>
<tr>
<td>How would you feel if</td>
<td>$2.00</td>
<td>How would you feel if…Fun deck replicated in app. No answers. Try taking a screen shot then importing into Talking Photos so child can record their answers.</td>
</tr>
<tr>
<td>Kidioms</td>
<td>$1.99</td>
<td>Provides explanations for 64 common idioms, then has 3 different activities to test your knowledge. Child must be literate to use it. Does not have any sound or reinforcers.</td>
</tr>
<tr>
<td>Multiple Meanings Library</td>
<td>$13.99</td>
<td>Aimed at teaching multiple meaning of words, 5 activity options. Can select words or use all, but always presents in same order. OK for older, literate learners, but has some flaws in the images, so don’t necessarily have to understand question to get the correct answer.</td>
</tr>
</tbody>
</table>
The KIT: Keeping It Together for Youth

• A resource developed by the CanChild Centre for Childhood Disability Research, McMaster University in the USA

• Best known as “the youth kit”
It helps youth to

- Learn about the kind of information they need as they go through the teenage years and make the transition to adulthood
- Keep track of important information that you need to do what you want, to get what you want, or to give to other people
- Use information to get the right supports and services for you as you get older
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### Section III: Other Information I Need to Keep

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Northcott
Let's see what you can do
# Planning for Parties & Events

**TIP:** Put the date and time of the event in your schedule.

<table>
<thead>
<tr>
<th>Occasion:</th>
<th></th>
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<tbody>
<tr>
<td>Theme:</td>
<td></td>
</tr>
<tr>
<td>Date:</td>
<td></td>
</tr>
<tr>
<td>Time:</td>
<td></td>
</tr>
<tr>
<td>Place:</td>
<td>Accessibility: Yes ☐ No ☐ N/A</td>
</tr>
<tr>
<td>Address:</td>
<td></td>
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</table>

## Guest List

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<tr>
<th>Name:</th>
<th>Are they coming?</th>
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<tbody>
<tr>
<td>1.</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>2.</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>3.</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>4.</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>5.</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>6.</td>
<td>☐ Yes ☐ No</td>
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<tr>
<td>7.</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>8.</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>9.</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>10.</td>
<td>☐ Yes ☐ No</td>
</tr>
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<td>11.</td>
<td>☐ Yes ☐ No</td>
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<td>12.</td>
<td>☐ Yes ☐ No</td>
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## To Do List

### 3 weeks before
- Find a place. Ask the right questions, i.e. is it accessible, number of people allowed, is there a cost, when is it available etc.
- Make guest list.
- Find out how much money you have to spend on the party.
- Plan what decorations and supplies that you need. What do they cost?
- Plan what food you need. What does it cost?
- Add up all costs.
- Figure out what you REALLY need so that you have enough money to cover costs.
- Plan and tell guests what they need to bring (one way to save money).
- Plan games or entertainment, i.e. dance, movie night, pool party etc.

### A few days before
- Call guests who have not got back to you.
- Make shopping list.
- Buy decorations and supplies.
- Buy food and beverages.

### Day of Party
- Clean party room, arrange furniture, and decorate.
- Prepare food.
- Set out food.
References


LUNCH

AFTERNOON SESSION RESUMES @ 12:25PM
Successfully managing big emotions on the autism spectrum

Dr Emma Goodall, PhD, MA, BEd hons
Steps involved in managing big emotions

1. Develop interoceptive awareness

2. Develop awareness of emotions as they are developing, and develop and practice the skills to respond to developing emotions (Co-regulation)

3. Self-manage and self-regulate
What is interoceptive awareness?
Collections of body signals are interpreted as emotions and feelings:

We have a range of internal body signals, e.g:

- Pulse rate and quality, breathing rates and quality
- Muscle and tendon placement and tension

You need to have both awareness of the sensations and a way to describe them.
Awareness of internal body states

- goosebumps
- hair on end
- butterflies in tummy
- wobbly knees
- stuck feet
- tears
- shaky body
- tight throat
- sweaty palms
- thumping heart
- feel like going to the toilet

Awareness of feelings and emotions

- Interoception skills required to understand self and self-regulate

Awareness of impact of external stimuli on self

Northcott - Let's see what you can do
If you do not ‘feel’ (have interoception)...

• How do you know how you feel?
• How can you connect to yourself?
• How can you connect to others?
• How do you self-manage/self-regulate?
• How do you behave?
Developing awareness of emotions – differences in the autism spectrum

- Interoception is atypical in autistics
- This can look like; 0 -> 100
What is 100?

Flip your lid
Sympathetic Nervous System Overload
Lose the plot/lose it, Meltdown (or shutdown)
BUT...

it can be perceived as challenging behaviour
Dan Siegal’s Hand Model of the Brain
So when you ‘lose it’ or flip your lid:
This is because you are in sympathetic nervous system overload.
The sympathetic nervous system is driven by neurotransmitters.
If you have low interoceptive awareness you do NOT FEEL or EXPRESS 0-99

- the build up of noradrenaline, • which is the lid starting to lift

Increasing SNS
99 is big emotions and no clear thinking, 100 is SNS overload (survival instinct mode) and reptile brain takes over as you flip your lid.
As we develop interoception we will start to feel our emotions BEFORE they are big. Which means we can do something about it, which prevents SNS overload/flippping our lid.
How can we develop interoception?

Mindful body awareness activities
• Done 2-3 times a day for 1-5 mins
• Or once a day for 20 mins

Over a period of 8-10 interoceptive awareness significantly improves. Where a person experiences trauma – interoception decreases as a protective mechanism
Engaging in mindful body awareness (interoception activities) prevents SNS overload and returns us to calm.

Where you are sitting, stop everything for a moment and just breathe, in and out through your nose. As you breathe, focus on your breath. Keep breathing, what does your breath feel like as it passes your nostrils?
Hold each hand position for ~30 seconds
Discuss or point to where you could feel each stretch or squeeze
Repeat & focus on one of the places to feel something
For further resources or information:

[https://mindfulbodyawareness.com](https://mindfulbodyawareness.com)
download free – Interoception 101 pdf
Big emotions and feelings start out small and get bigger until we notice them and express them or do something about it.
Examples:
Survival instinct

- Action/Response/Behaviour
- Emotions
- Thought
- Interoceptive Awareness
- Something happens

The process is cyclic with the survival instinct guiding the cycle.
You hit them

Sad or angry or frightened (depending on internal body signals)

Rage or fear
Practice these mindful body awareness techniques every day at least 2-3 x a day

• This helps them to become automatic and helps you to embed your developing interoceptive awareness

• Start to monitor and notice your body throughout the day

• Where do you hold your muscle tension?

• Learn to relax that part of your body
Where and what do you feel?
Prevent

• Do mindful body awareness activities regularly
• Track heart rate or use mood checkers to help you know when to do more interoception

Recover quicker

• STOP
• BE STILL
• BREATHE & FOCUS ON YOUR BREATH

Continue to focus on your breath, you will become skilled at this.
Thank you

• https://mindfulbodyawareness.com
PANEL DISCUSSION

Q & A
Change & Transition. Understanding Poor Object Permanence in autism

DR. Wenn B. Lawson PhD, Cpsychol, AFBPsS MAPS
What to expect from this talk

• Individuals on the autism spectrum (AS) & ‘change’: Challenging Poor Theory of Mind – thinking ‘Object Permanence’

• Practical strategies that might help

• How to access these

• How to build ongoing concepts
**TERMS**

**Object Permanence:** knowledge that perceptual objects continue to exist even when they cannot be seen or touched (develops in infants ~ 7 months old)

**Theory of Mind:** ability to attribute mental states (beliefs, desires, intentions, emotions) to others

**Schema:** a cohesive, repeatable sequence in which actions are tightly interconnected and have meaning (organizing information and building blocks of knowledge)
Transition

**Autism is:** I like it here, please do let me stay.

**Autism is:** I know it here, please don’t take me away.

If and when I leave this place to travel to another space,

I need to know it right away. I need to know that I’m OK.
Transition is so fleeting, it leaves not time to stay. Will I have time to settle, or will I be whisked away?
I know that change can happen. I know it can take time.

But how can I know what this will mean? What this will mean for mine.

Transition is about moving, “to where or what” one asks?
This is my very question, from present or the past.....

Time for me is all the same, I know not of its future. I only know I trust in ‘now’... tomorrow can come, I just need to know how.
Autism as: Cognitive Style

*Joint attention* refers to the capacity for people to coordinate attention among self, other, and an object or event to share an interest or an experience: (Adamson & McArthur, 1995; Bakeman & Adamson, 1984; Wetherby & Prutting, 1984)
Autism as: Cognitive Style

• Typical individuals develop joint attention with ease. Even when focused upon a favorite object can shift attention, to look, listen, etc. to something else.

• AS individuals find this difficult. They may not respond to name, to shared joint attention or shifting focus when invited to look, think or do something else.
Motivators: Typical Development

- Social reciprocity, Knowledge of Object Permanence (OP)
- Shared Interest
- Praise
- Achievement
- Confidence
- Various Intrinsic Rewards
- Various External Rewards
Motivators: AS Development

• Interest, Delayed Object permanence
• Praise related to interest
• Achievement
• Confidence
• Various intrinsic rewards (of interest)
• Various external rewards (of interest)
Passion (Interest)

Willey, (2001) “At the base, I have to wonder, are we so very different from marathon athletes, corporate presidents, bird watchers, or new parents counting every breath their newborn takes? It seems lots of people, NT or otherwise, have an obsession of sorts. In my mind, that reality rests as a good one, for obsessions, in and out of themselves are not bad habits.
Passion (Interest)

There is much good about them. Obsessions take focus and tenacious study. They are the stuff greatness needs. I have to believe the best of the remarkable – the artists, musicians, philosophers, scientists, writers, researchers and athletes—had to obsess on their chosen fields or they would never have become great. In some respects, then, it must be said that obsessions do not have to be considered handicaps. (p. 122)
Therefore, In AS, we learn differently

Because we don’t divide our attention well, we need our interest (where our attention is focused) to be our motivator. This is a consideration when dealing with issues such as ‘OP’

“…..certain intervention strategies targeted at enhancing motivation may indirectly lead to positive changes in joint attention” (Vismara & Lyons, 2007. (p 216)
Using interest to build concepts: such as ‘Change’ (OP)

- Often in AS passionate interests are connected to technology
- Therefore, using IT can be a way of building concepts
- If I don’t divide attention I might experience ‘change’ as frightening and this increases anxiety and resultant behaviours, (blamed on poor ToM)
Finding ways to build concepts

- Power Point
- Video
- Photos
- Role play
- Video games
- Interacting with individual’s interests as rewards, motivators and places to share
- Projects
- Ongoing reviews etc.
CHANGE

Change, change and more change,
Of context, place and time.
Why is it that Life’s transient stage
Plays such havoc with my mind?

You said, “We’ll go to McDonald’s”
But this was just a thought.
I was set for hours,
But the plan then came to naught.

My tears and confused frustration,
At plans that do not appear,
Are painful beyond recognition,
And push me deeper into fear.
CHANGE

How can life be so determined?
How can change be so complete?
With continuity there is no end,
Security and trust are sweet.

So, who said that change would not hurt me?

Who said my ‘being’ could not be safe?
CHANGE

Change said, “You need continuity”
In order to find your place.

For change makes all things different,
They no longer are the same.
What was it that you really meant?
All I feel is the pain.
MIT Binocular Rivalry Study

- Different images were presented to each eye simultaneously (e.g. L eye – broccoli, R eye – globe)
- **Neurotypical**: images appeared one at a time, alternating between L eye, R eye
- **AS**: images switched more slowly between L eye, R eye with more reports of merged images (e.g. bottleneck in the process of inhibiting conflicting visual stimuli)
- Using MR spectroscopy to measure glutamate (excitatory) and GABA (inhibitory) levels in the VC, Dr. Kanwisher’s lab found higher GABA levels were paired with better visual suppression, indicating that “impaired inhibitory circuitry drives the vision suppression in autism”
Transitions and Communication Systems

In regards to strategies, the picture system, visual schedule, and other systems may be useful in providing accommodation for transition between activities. However, it might not change the individual's understanding as to why the change is happening.
School/work & Social Skills

Who, what, where, when?

- Washing hands
- Food prep
- Self & Other
- Sexual expression
- Dress code
- Social codes
- Manners
- Timing

Getting ready for PE

- Pants
  - Zipper, Button, Snap
- Belt
- Shirt
  - Collar, Buttons
- Socks
- Zip, Velcro, or Tie Shoes
Visual: Clothes on bed...Show me...Don't tell me
Auditory Cues

AUDITORY TOOLS: TALKING CLOCK, VERBAL INSTRUCTIONS FROM MOTHER, CD WHICH SPEAKS INSTRUCTIONS (E.G. MORNING DRESS ROUTINE)
Tactile: Let's put clothes on together......
Doing rather than telling or showing
Story of Lily

Lily, age 13, has autism. Lily goes to a new restaurant with her parents. The food, seating, and service were all exceptional! However, the next time Lily’s family took her to this restaurant, she demanded that they sit at the same table, order the same food, and see the same waitress. If that particular table was taken, she made them wait until it became available. If anything was out of place, Lily would have a melt down.
Story of Tom

Tom, age 14, has autism. He went to stay with his grandparents and attempted to play a game of hide-and-seek. But, as soon as Tom’s grandparents were no longer visible, Tom began to shout and rock. He was utterly convinced his grandparents were gone.
Past, Present, and Future Tense

• Tom lives in the now. His past might not inform his present.
• He is not learning typically.
• He has ‘delayed’ object permanence and is very literal.
• Lily lives in the now. She is “stuck” in the schema not able to generalize her experiences.
• Accommodating Tom and Lily’s ‘autistic’ disposition as a learning medium.
• Use their focused attention and interests to build concepts they are missing.
How to change the brain

• For AS, to change one’s understanding is to intentionally change the brain.
• Create new connections through one’s interests in order to capture his/her attention and assist in that person’s learning and understanding
• Use a story telling format and items of interest to both capture the individual’s attention and to engage the individuals in his/her own understanding using Disney characters; Lego models; video games; comic strip stories (e.g. super heroes, dinosaurs, princesses, etc.) and role play.
Learning with AS

• In AS delayed connection means anxiety & fear. Our changing body (puberty) may over whelm (or underwhelm) so building confidence & continuity via strengths is the path to follow to successful adulthood!
References


• Lawson, W.B and Dombroski, B. (2015) ‘Might we be calling problems seen in autism spectrum conditions, poor theory of mind, when actually they are related to non-generalised Object Permanence?’ Journal of Intellectual Disability – Diagnosis and Treatment. 3, 43-48

Resources

- www.wennlawson.com
- Ross Green www.livesinthebalance.org
  https://www.youtube.com/watch?v=uoXBFOZml80
- www.JKP.com
- http://www.autismspectrum.org.au/content/summary-findings-we-belong-too
- http://www.autism.org.uk/working-with/education/teacher-form.aspx?gclid=COu1w5_0p8UCFSsEwwodWQkAEw
Resources

The Wonderful World of Work by Jeanette Purkis
