Creating a Group Intervention for Transition-Aged Individuals with Autism Spectrum Disorders

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Introduction

- Many individuals with autism spectrum disorders (ASD) experience a drastic shift during the transition from high school to adulthood and find themselves with a significant loss of structured supports (Anderson et al., 2018).
- Successful transition to adulthood requires planning for post-secondary education or employment, healthcare delivery, housing and daily living; however, many individuals with ASD do not get this support (Anderson et al., 2018).
- In addition, young adults with ASD are more likely to be socially isolated than young adults with other disabilities (Orsmond et al., 2013).
- Participation in social activity and interaction is associated with quality of life and general functioning, making it an important target for support in transition-aged young adults (Orsmond et al., 2013).
- The CCC at URMC provides integrated behavioral health services as part of a larger multidisciplinary team that serves patients age 19+ with childhood onset conditions.
- Approximately half of that patients served at CCC have a diagnosis of intellectual disability, and a subsect of that group also have autism.

Complex Care Center (CCC)

The CCC at URMC provides integrated behavioral health services as part of a larger multidisciplinary team that serves patients age 19+ with childhood onset conditions.

The Survey

- The survey was created to poll patients at URMC’s CCC to gauge their interest regarding various group topics. Patients were asked to indicate which topics interested them from a list and that their choices would inform the development of upcoming groups.
- Current survey results indicate a preference for group intervention focused on managing stress, rated by approximately half of those patients (Oswald et al., 2018).
- Unfortunately, survey collection was limited due to onset of covid-19 social distancing restrictions. Due to this limitation, it would be important to continue discussion/surveying of relevant topics from this survey.

Data Collection

- Approximately half of that patients served at CCC have a diagnosis of intellectual disability, and a subsect of that group also have autism.

Project Objectives

- This project focuses on:
  1) learning more about the specific needs of transition-aged patients with ASD or related social differences by conducting a needs assessment.
  2) Developing a group intervention based on empirically supported interventions.

Survey Results

<table>
<thead>
<tr>
<th>Topics</th>
<th>Votes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-Care: Managing Stress</td>
<td>7</td>
</tr>
<tr>
<td>Social Skills: Dealing with Conflict/Problem-Solving</td>
<td>5</td>
</tr>
<tr>
<td>Social Skills: Dating</td>
<td>5</td>
</tr>
<tr>
<td>Finding Community Activities/Events</td>
<td>5</td>
</tr>
<tr>
<td>Social Skills: Meeting New People</td>
<td>4</td>
</tr>
<tr>
<td>Social Skills: Making Conversation, “small talk,” Chatting</td>
<td>3</td>
</tr>
<tr>
<td>Social Skills: In the Workplace</td>
<td>3</td>
</tr>
<tr>
<td>Social Media/Online Safety</td>
<td>1</td>
</tr>
<tr>
<td>Self-Care: Hygiene</td>
<td>0</td>
</tr>
</tbody>
</table>

Discussion and Future Directions

- The CCC at URMC intends to host regular psychosocial/educational series for individuals with autism or similar social differences utilizing interest data from this survey.
- Unfortunately, survey collection was limited due to onset of COVID-19 social distancing restrictions. Due to this limitation, it would be important to continue discussion/surveying of relevant topics from this group attendees to ensure their needs and interests are being met.
- Current survey results indicate a preference for group intervention focused on managing stress, rated by approximately half of that patients served at CCC.
- Approximately half of those patients served at CCC have a diagnosis of intellectual disability, and a subsect of that group also have autism.

Workshop Considerations

- A number of groups have been developed for young adults with autism to assist in building social and communication skills across domains.
- Most of these interventions are in the form of 6-12 week group interventions (UCLA PEERS for Adults and Careers; Laugesen et al., 2015, ACCESS; Oswald et al., 2018).
- However, there are some 1-time interventions, such as UCLA PEERS’s Dating, Friendship, and Conversation bootcamps, suggesting there is some benefit in offering this type of intervention.
- Focus groups for the development of groups for young adults with ASD suggested that participants prefer interactive and dynamic training, and involved caregivers were interested in information that paralleled the group content (Oswald et al., 2018).
- Additionally, some of those groups offered a supported social hour following group to encourage social connection and use of skills (Connor et al., 2019).

“Self-Care: Managing Stress”

Stress Management and ASD

- Managing stress is generally important for young adults but may be particularly important for young adults with autism, as up to 40% of individuals with autism have significant anxiety (Nah et al., 2018).
- Previous groups with a cognitive behavioral therapy approach (CBT), mindfulness-based stress reduction (MBSR), and a combination of these, mindfulness-based cognitive therapy (MBCT), have shown to be effective in improving coping efficacy for young adults with ASD (Bresciani & Kuper, 2017).
- The current workshop outline incorporates the MBCT approach with considerations for individuals with ASD.

Sample Group Outline

- Introductions (Name and share something about you)
- Introduction to mindfulness
  What is mindfulness? Using visuals to demonstrate
  Mindful eating experiential exercise followed by reflections
  Body scan exercise

- Discuss incorporation of daily mindful moments (“Habits”)
  Suggest exploring Youtube for mindfulness clips, mindfulness apps, etc.
  Wrap-up:
    2-minute deep breathing (can do with a visual for in and out breaths)
    Handout available for participants and extras for caregivers (review the workshop, suggested mindfulness exercises & apps)
    30-minute post-workshop social (light snacks and refreshments provided)

References


