

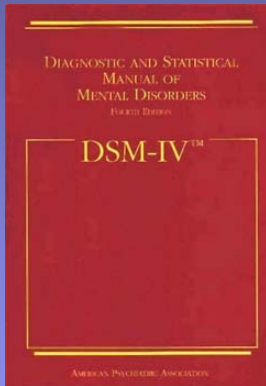
Therapeutic Innovative Strategies for Adults with Asperger Syndrome Resulting in Successful Psychosocial Outcomes

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Introduction

- Diagnosis
- Symptoms
- Treatment

Diagnostic Criteria



Diagnostic Criteria for 299.80 Asperger's Disorder

The following is from the *Diagnostic and Statistical Manual of Mental Disorders: DSM IV*

- (I) Qualitative impairment in social interaction, as manifested by at least two of the following:
- (A) marked impairments in the use of multiple nonverbal behaviors such as eye-to-eye gaze, facial expression, body posture, and gestures to regulate social interaction
 - (B) failure to develop peer relationships appropriate to developmental level
 - (C) a lack of spontaneous seeking to share enjoyment, interest or achievements with other people, (e.g., by a lack of showing, bringing, or pointing out objects of interest to other people)
 - (D) lack of social or emotional reciprocity
- (II) Restricted repetitive & stereotyped patterns of behavior, interests and activities, as manifested by at least one of the following:
- (A) encompassing preoccupation with one or more stereotyped and restricted patterns of interest that is abnormal either in intensity or focus
 - (B) apparently inflexible adherence to specific, nonfunctional routines or rituals
 - (C) stereotyped and repetitive motor mannerisms (e.g. hand or finger flapping or twisting, or complex whole-body movements)
 - (D) persistent preoccupation with parts of objects
- (III) The disturbance causes clinically significant impairments in social, occupational, or other important areas of functioning.
- (IV) There is no clinically significant general delay in language (E.G. single words used by age 2 years, communicative phrases used by age 3 years)
- (V) There is no clinically significant delay in cognitive development or in the development of age-appropriate self help skills, adaptive behavior (other than in social interaction) and curiosity about the environment in childhood.
- (VI) Criteria are not met for another specific Pervasive Developmental Disorder or Schizophrenia."

Co-morbid Diagnosis

- Depression
- Anxiety
- OCD
- Dyspraxia
- ADHD

Target Symptomatology

- Decreased self-esteem
- Difficulty reading people
- Social awkwardness
- Relationship issues
- Restricted interests
- Grooming and hygiene



Treatment Strategies

Initial Phone Contact

- Conduct phone assessment
 - helplessness/hopelessness
 - minimal resources
- Establish commitment to counseling
 - client and family



Initial Appointment

Create a Strong Therapeutic Alliance

- Tell the client and family you are eager to help them
- Conduct life review (validate feelings and experiences)
- Avoid misinterpretations (state the obvious)
- Expect to be tested
- Build confidence
- Set goals (make suggestions)
- Use humour (tell clients you are joking with them!)

Self-Esteem

- Be generous with positive feedback
- Provide hope
- Explore life purpose
- Practice visualization
- Identify self-talk
- Use CBT approach (SIR)
- Celebrate each small success

Self-Talk Record

Personal Self-Talk Record

<i>What Happened</i>	<i>My self-talk</i>	<i>My greatest fears about the situation</i>	<i>How will I face my fears?</i>	<i>Positive self-talk</i>

Role-Play

Best tool for improving social skills and developing empathy

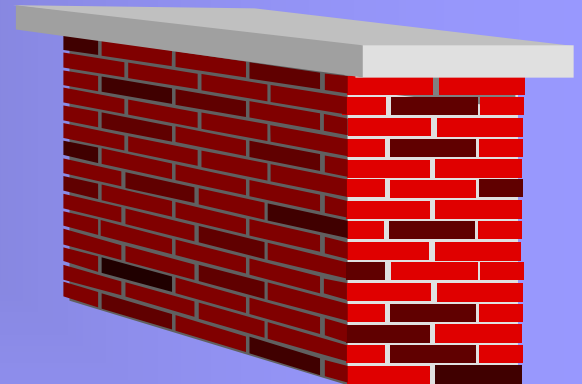
- Teach, Model, Practice
- Take turns playing both roles
- Use step-by-step approach
- Try a variety of approaches
- Have fun!

Family and Spouses

- Educate
- Conduct frequent joint meetings
- Provide time for loved ones to vent
- Clarify and reinterpret
- Strategize together

Restricted Interests

- Initially discuss client's special interest
- Explore job and social opportunities related to interest
- Remind clients that most people will not talk for hours about their specific interest
- Discuss other subjects



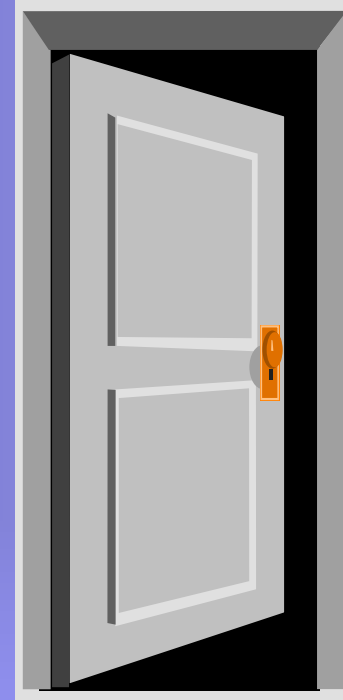
Pragmatic Counseling

- Gently provide honest feedback
- Teach and interpret non-verbal gestures
- Use a mirror
- Propose a schedule
- Assign homework



Practical Strategies

- Exercise
- Grooming and hygiene
- Mindfulness
- Relaxation breathing



Mentoring

- Assist client and family in acquiring a mentor
- Be creative (think outside the box)
- Include all players in the first meeting
- Establish goals
- Discuss strategies
- Set up review times

Medications

- Explore target symptoms with client
 - coach client in identifying the symptoms
- SSRIs most often indicated for anxiety and depression
- Stimulants have been helpful with signs and symptoms of ADD/ADHD

Take home message...

Pragmatic Counseling

- Directive
- Individualized
- Practical strategies

