

Autism in adult life: The Challenges

Anthony Bailey

Why ASD and Why Now?

- Prevalence
- Historically emphasis has been on childhood
- Fall through cracks
- Poor services
- Government responses

Pervasive Developmental Disorders

- Autism
- Atypical autism
- Asperger's syndrome
- PDD NOS
- Rett syndrome
- Disintegrative psychosis

Qualitative Impairments in Reciprocal Social Interaction

Failure to use non-verbal behaviours to regulate social interaction

Failure to develop peer relationships

Lack of shared enjoyment

Lack of socio-emotional reciprocity

Qualitative Impairments in Communication

Lack of, or delay in spoken language and failure to compensate through gesture

Lack of varied spontaneous make-believe or social imitative play

Relative failure to initiate or sustain conversational interchange

Stereotyped, repetitive or idiosyncratic speech

Repetitive and Stereotyped Behaviours

Encompassing preoccupation or circumscribed pattern of interest

Compulsive adherence to non-functional routines or rituals

Stereotyped and repetitive motor mannerisms

Preoccupations with part objects or non-functional elements of materials

Associated Features

- 75% individuals with autism have MR
- 25-33% individuals with autism develop epilepsy
- Behavioural difficulties
- Problems with attention and overactivity
- Sensory oversensitivities

Chakrabati and Fombonne (2001)

Disorder; rate/10000	Age of referral	Percentage male	Percentage normal IQ
Autism 16.8	30 months	76.9	30.8
Asperger 8.4	47.5 months	84.6	100
PDDNOS 36.1	37.2	80.4	92.4

Mediating mechanisms

- Impaired social/communicative understanding
- Impaired social/communicative ability
- Impaired self control
- Impaired flexibility
- Anxiety
- Lack of goals
- Low self esteem

Challenges

- Higher education
- Work
- Independence
- Relationships
- Co-morbid disorders
- Lack of ambition by others

Needs

- Diagnosis
- Appropriate education
- Address handicaps
- Treat and prevent secondary handicaps
- Identification and recognition of strengths
- Work
- Fostering of developmentally appropriate ambitions
- Increase daily living skills and independence
- Social networks

What are our goals?

- Highest possible quality of life
- Contribute to society

Optimal management of a chronic disorder

- Not an acute illness model
- Individual and their family
- Optimising educational attainment
- Maximising social functioning
- Maximising independent living
- Optimal employment
- Ensuring social support

Key aspects of management

- A plan
- Anticipation
- Prevention
- Regular review

Acute management

- History
- What strategies are they using?
- Non-compliance?
- Environmental manipulation
- Medication
- Long term plan

What is the goal of our intervention?

- Develop/repair a normative mechanism?
- Strengthen alternative strategies?

Strategies

- Focussed education
- Environmental manipulation
- Behavioural approaches
- Anticipate transitions
- Life planning
- Employment
- Medication

Communication skills

- Speech
- Context
- Groups
- Social chat
- Electronic communication

Social skills

- Joint attention behaviours
- Turn taking
- One-to-one interactions with peers
- Interactions with groups
- Scripts/social stories
- Emotion recognition

Interests and behaviours

- Limit intrusive/repetitive behaviours
- Turn interests/strengths into life opportunities
- Self help skills
- Teach planning skills

Prevention of secondary handicap

- Anxiety
- Social isolation
- Depression

Implications

- Prepare for adult life
- Targeted life long education
- Prevention rather than cure
- Early intervention
- Regular reviews