

TIPS FOR WORKING WITH PEOPLE WITH AUTISM

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While at YAI/Premier HealthCare, we provided outpatient services to over 3000 people on the autistic spectrum, from the very mild to far more severe forms. There is a diverse set of skills required to work with this population, as our services spanned everything from medical, dental, and podiatric care - where the goal is to complete procedures smoothly and efficiently - to mental health and rehabilitative services, which directly target specific developmental areas in the patient for improvement.

Because of the wide variation of autistic traits and severity we come across, it's difficult to come up with a generalized set of treatment rules good for all situations. But here are some tips that should be relevant to many different types of providers.

- ◆ **Professional manner:** keep your manner paced, calm, and friendly in a low-key. Patients in general look for you to set the pace and the atmosphere. People with autism, in particular, feed off of the emotional tone you set and do best with steadiness and predictability in the office.
- ◆ **Language:** people with autism have difficulties inferring meaning. Be literal and do not take for granted that you are being understood. Be mindful of using idioms. Say exactly what you mean and mean exactly what you say. This is a challenge, because the practitioner has to have a constant level of mindfulness about his or her language. Self-editing while speaking isn't easy to master, but it gets easier with time.
- ◆ **Instructions:** briefly and kindly explain to your patient what you are doing and why – even to the non-verbal person. Autism is a disorder of impaired social intuition, so take nothing for granted – don't expect your patient to instinctively know what to do. Teach them. Direct instruction is the best. Keep your instructions short and simple.
- ◆ **A bit more on language and professional manner:** you may think your patients with poor eye contact are not listening, but they are. So what they hear as you frame things to their parents and caregivers are crucial to establishing a relationship with them and creating a comfort level. They will take a cue from their caregivers' response to you. They listen to your "tone." If you create a space where they feel criticized, pressured, over-stimulated, or threatened, you will not succeed with your intervention.
- ◆ **Sensory integration issues:** keep the environment unchallenging and friendly, with noises and distractions to a minimum. If patients need to hop or bounce or pace or vocalize, let them. It helps them discharge anxiety and it's part of making your space a comfortable space for them. Be clear with limits with your

patient as upfront as you can, and if there are caregivers present, ask them to help the person be successful in staying within these boundaries.

- ◆ **Touching and eye contact:** like infants and people with Fragile X Syndrome, who are struggling to regulate the intense emotions that social contact brings, people with autism may be highly sensitive to physical touching as well as direct eye contact. They often become over-stimulated or withdraw from the contact. So move in gently and let their reaction guide you as you seek to establish how to interact. If a patient looks away from me, I will not move closer and beam in on him or her. Instead, I will move my chair back a little, turn my body away at an angle, and look somewhere else while I talk. My patients usually respond by retraining their gaze upon me.
- ◆ **Feedback:** Find things to praise and reinforce on each visit, but don't over-praise. Don't be critical. If you need to set limits, do so very directly in a clear calm friendly but firm voice. Angry tones can set off a wave of poorly controlled emotions and fearfulness towards you.
- ◆ **Peculiar interests:** people with Asperger's Syndrome often have highly idiosyncratic interests. Work these interests. Use them as metaphors, segues, and talking points. Be curious. Don't worry about reinforcing them – they've already been self-reinforced a thousand times over; and, besides, it's far more important to connect with your patient.
- ◆ **Odd behaviors:** accept the wonderful uniqueness of your patients. Unless someone is going to get hurt, do not try to "correct" the behavior. This acceptance is an important part of modeling with their caregivers, many of whom are still struggling with their own acceptance. Many of these odd behaviors (eg rocking) serve important functions such as discharging anxiety or restlessness. If a person is somehow prevented from doing this, he or she may either get agitated or, more commonly, simply develop a different behavior in its place.
- ◆ **Self-educate:** learn what it feels like to have an autism spectrum disorder. I have recommended several books to my students: The Curious Incident of the Dog in the Night-time, by Mark Haddon, and anything by Temple Grandin, but especially Thinking in Pictures. Among the 100s of books available on working with people with autism spectrum disorders, consider Aspergers Syndrome, by Tony Attwood, anything by Brenda Smith Myles, and No More Meltdowns, by Jed Baker.